

Phillips County Economic Development Down Payment Assistance Program Application

Applicant Information

Full Name(s): _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

Property & Construction Details

Property Address or Legal Description: _____

City/Town: _____ Zip Code: _____

Total Square Footage (finished living area): _____ Number of Bedrooms: _____ Number of Bathrooms: _____

Number of Garages: _____ Basement or Slab: _____

Estimated Project Cost/Purchase Price: \$ _____

Estimated Start Date: _____ Estimated Completion Date: _____

Developer Contact Information

Name: _____ Email: _____

Telephone: _____

Builder/Contractor Information

Name: _____ Email: _____

Telephone: _____

Financing & Ownership

Will this be your primary residence? ☐ Yes ☐ No

Do you have financing approval? ☐ Yes ☐ No

Do you own or control the building site? ☐ Yes ☐ No

Financial Resources/Loans (Add attachments if necessary): _____

Primary Lending Institution: _____

Requested Assistance (based on total project cost)

☐ \$10,000 (Cost \geq \$200,000)

☐ \$8,000 (\$190,000–\$199,999)

☐ \$5,000 (\$170,000–\$189,999)

☐ \$3,000 (\$150,000–\$169,999)

Required Attachments:

- ☐ Proof of site ownership or control
- ☐ Preliminary plans or drawings
- ☐ Any required permits (if applicable)
- ☐ Proof of financing (bank letter)
- ☐ Narrative of how funds will be used
- ☐ Resume/Experience of builder/developer/contractor

Certification

I/We certify that the information provided is accurate and understand that any false statements may disqualify this application. I/We agree to comply with the terms of the PCED Down Payment Assistance Program and provide additional documentation upon request.

Applicant Name (Printed): _____

Applicant Signature: _____

Co-Applicant Name (Printed): _____

Co-Applicant Signature: _____

Date: _____

Submit to: Phillips County Economic Development

Email: director@pcedks.org

Address: 205 F Street; PO Box 604, Phillipsburg, KS 67661

Phone: (785) 543-5809