



Application for Funding

Minnesota Housing Community Fix Up Fund

The following is an application to participate in Minnesota Housing's Community Fix-Up Fund Program. Please answer all questions in detail, sign and date the application and submit to Kathy Aanerud, Community Fix-up Fund, Minnesota Housing, 400 Sibley Street, Suite 300, St. Paul, MN 55101. For further details about the program refer to the Fix-Up Fund manual on the Minnesota Housing web site www.mnhousing.gov

Applicant Information:

Lender: _____ Address: _____

Contact person: _____ Phone Number: _____

E-mail address: _____ Fax Number: _____

MHFA Lender ID # _____

Describe the partnership formed (including non-lending partners) to offer CFUF, including the role each partner will play. Include letters of support from each partner that demonstrate the partner's knowledge of the application and what specifically that partner's role will be in the partnership.

Partner: _____ Address: _____

Contact person: _____ Phone Number: _____

E-mail address: _____ Fax Number: _____

Role of Partner _____

Partner: _____ Address: _____

Contact person: _____ Phone Number: _____

E-mail address: _____ Fax Number: _____

Role of Partner _____

(Add additional pages as necessary.)

Targeting Information:

- Describe the targeted community need(s) to be met with CFUF. Include the specific geographic area, the projected number of eligible households, the demographic composition of the eligible households, and the availability of other subsidized programs in the area (CDBG, NRP, etc.)

