

The Town of Lizton is conducting this survey to obtain information necessary to apply for a Community Development Block Grant. These grant dollars can be used on various types of community projects that will benefit Lizton's residents. All information will be kept confidential.

Attention Lizton Residents!
We need your help to apply for
Grant Dollars!

HOW CAN I HELP?

We are mailing income surveys to randomly selected households in Lizton. If you receive a survey, please take a moment to complete the survey and return it in the self-addressed, stamped envelope. Your participation is very important.

If we do not receive your survey, reminder surveys will be mailed. Every time surveys are mailed, it costs Lizton money for the postage and material. Your reply to the initial survey is greatly appreciated!

All information gathered will be confidential and only a collective summary will be included in our grant application.

**THANK YOU FOR HELPING OUR
 COMMUNITY!**

Questions regarding the GRANT, call:
 Tonya Perry
 Clerk-Treasurer
 M-F, 1:00 - 5:00 PM
 317-994-5500

INSTRUCTIONS

Row 1 - CIRCLE the TOTAL number of person(s) living in your household (adults and children). If more than one family is residing at this address, please complete a separate income survey form for each family.

Row 2 - Look at the dollar amount below the box you circled. Is the total annual household income Above or Below that amount?

Row 3 - Please check Above or Below.

(exact annual HH income is NOT required)

Row 1	TOTAL Number of PERSONS Living in Household:	1 Person Total in HH	2 Persons Total in HH	3 Persons Total in HH	4 Persons Total in HH	5 Persons Total in HH	6 Persons Total in HH	7 Persons Total in HH	8 Persons Total in HH
Row 2	Income Limits Hendricks Co. HUD FY 2016:	\$37,350	\$42,700	\$48,050	\$53,350	\$57,650	\$61,900	\$66,200	\$70,450
Row 3	Check if your Total Annual HH Income is Above OR Below the Amount Listed in Row 2:	Above() Below()	Above() Below()	Above() Below()	Above() Below()	Above() Below()	Above() Below()	Above() Below()	Above() Below()

Respondents may decline to complete the section below by checking the box:
 Why do we request this information? CDBG regulations 24 CFR 570.491 for the State program require data collection of family racial/ethnic for persons who are applicants, participants in or beneficiaries of their programs/grants.

Family Racial / Ethnic Information			
	Total		Total
White		Hispanic	
Black/African American		Black/African American AND White	
Asian		American Indian/Alaskan Native AND Black/African American	
American Indian/Alaskan Native		Other Multi-Racial	
Native Hawaiian/Other Pacific Islander		Number of Handicapped/Disabled	
American Indian/Alaskan Native AND White		Number of Persons over 62	
Asian AND White		Female Head of Household	

Resident's Street Address and/or PO Box: _____
 (to maintain confidentiality, resident's name is not required)

Date: _____