



**Titusville Redevelopment Authority Housing Rehab Interest Form**

**110 W. Spring St., Box 1, Titusville, PA 16354, Phone 827-3668**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**NUMBER OF PERSONS IN HOUSEHOLD:** \_\_\_\_\_

**DOES YOUR HOUSEHOLD FALL BELOW THE FOLLOWING CRAWFORD COUNTY LOW INCOME LIMITS?**

One Person: \$37,000

Two Persons: \$42,250

Three Persons: \$47,550

Four Persons: \$52,800

Five Persons: \$57,050

Six Persons: \$61,250

Seven Persons: \$65,500

Eight Persons \$69,700

**Please check one:**      **YES** \_\_\_\_\_      **NO** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_      **DATE:** \_\_\_\_\_