



Town of Capitol Heights

American Rescue Homeowners Application

Date: December 8, 2022

Dear Town of Capitol Heights Homeowner,

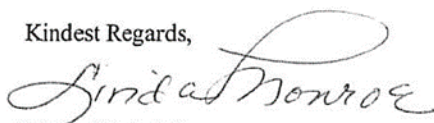
The American Rescue Plan Act “ARPA” passed by Congress provided support for local governments including funding for all towns, cities, counties and States in USA. The Town of Capitol Heights received ARPA funds to address needs in this community. In early 2022, the previous Town Council voted to set aside **\$866,803.50** for disbursement to all Town homeowners.

As such, stimulus payments will be equally distributed to 1,498 households of record in the Town. Beginning as early as January 2023, the Town of Capitol Heights will begin disbursing these funds to all **eligible** homeowners within the Incorporated Town of Capitol Heights.

All homeowners are entitled to a portion of this stimulus provided that they meet the following criteria listed below:

1. Property must be within the Incorporated Town of Capitol Height’s jurisdiction (to include owner occupied, owners of rental homes, owners of vacant homes, owners of homes with joint/ multiple owners, and homes owned by trust, or LLC’s).
2. Property/ homeowner(s) must be in **compliance** with Town codes with no active fines, citations, unpaid property taxes, or existing liens on the property. If the property owner has multiple properties (a home, a rental home, a business, vacant land) **within the Town of Capitol Heights, he/she can only be deemed eligible if all owned properties are in compliance at the time of distribution.** Note: The owner of multiple properties can receive a stimulus payment for each household owned within the Town of Capitol Heights boundary.
3. Review attached application for all other information required.
 - For property owners in need of special assistance with their ARPA application (handicapped, elderly, those whom may need a translator, etc.) please contact Dezirae Montgomery at 410.684.9912 or email at arpa@capitolheightsmd.com
 - To inquire about outstanding property taxes, please contact the Town Treasurer by email at arpa@capitolheightsmd.com or by calling her at 301.336.3036, extension 105
 - For general inquiry related to this process, please contact Dezirae Montgomery at 410.684.9912 or by email at arpa@capitolheightsmd.com. You may also contact Inspector Tomeka Jones at 443.972.0466 or by email at tmjones@capitolheightsmd.com

Kindest Regards,



Mayor Linda Monroe



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PROPERTY OWNER INFORMATION SHEET

Property Owner's Name(s): _____

Property Address: _____

Alternate Address*** (for owners who live off-site and/or rent property to tenants)

*****Please Note: If you enter an alternate address, ALL correspondence will be mailed to the alternate address, NOT to the property address.**

Home phone#: _____ Cell#: _____

Work phone# _____ Fax#: _____

E-mail address: _____

Senior Citizen: Y or N

Translator needed: Y or N

Please note: It is important that we have all of the above information should we need to contact you in case of an emergency and/or information of urgency.

**Please return to: Town of Capitol Heights Neighborhood Services Department
401 Capitol Heights Blvd
Capitol Heights, MD 20743

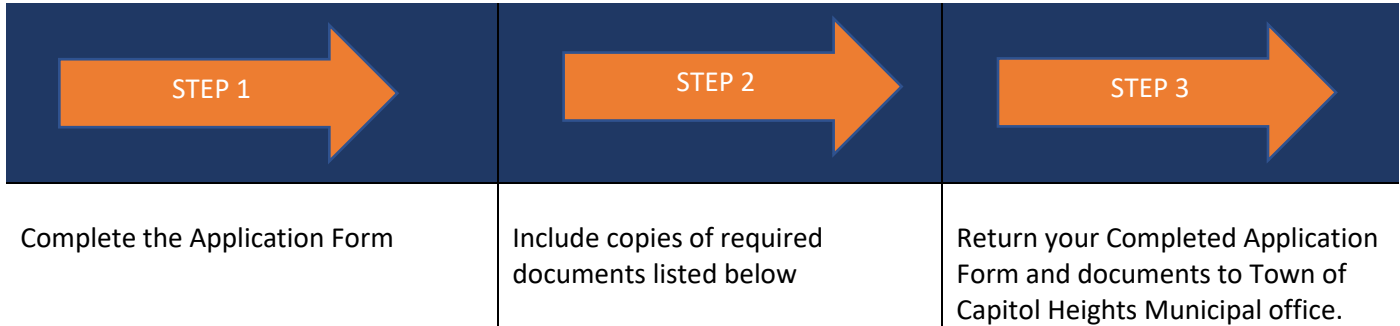
Or fax to (301) 420-3187

Or E-Mail at dmontgomery@capitolheightsmd.com



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DOCUMENTS REQUIRED IN ADDITION TO COMPLETED APPLICATION

- **PHOTO ID OF APPLICANT**
Driver's License and/or Another Government Issued Identification Card

- **PROOF OF RESIDENCE (PLEASE SUBMIT TWO OF THE FOLLOWING)**
 1. Unexpired Driver's License with Current Address Listed
 2. Current Property Tax Bill or Payment Receipt
 3. Mortgage Statement within the Last 30 Days
 4. Copy of Deed

To inquire about the status of your application over the phone or any other question about the American Rescue Homeowners Program, please contact Town Hall at 301-336-0626.



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Please be sure to fill out application clearly and completely. Once completed, print out all information. In order to be eligible for this assistance, you must provide documentation to prove information provided on this application.

Name

Primary Phone Number

Mailing Address

Secondary Phone Number

City, State, Zip

Street Address

[If Different from Mailing Address or If You've Moved]

Email Address

[Would You Like Your Email Added to the Town's Email Blast]

- YES
 No

I swear or affirm under penalty of perjury that all information I gave to the Town of Capitol Heights Municipal office is true, correct, and complete to the best of my belief and knowledge. I am the representative of the individual household owner in this application and I am submitting this application on behalf of myself or the household owner.

Maryland has a fraud law that will be vigorously enforced for intentional misrepresentation of information contained on this application. Punishment can occur for not telling the truth when applying for assistance



Town of Capitol Heights

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Applicant's Signature

Date

Industrial Bank

Application / In Joint Effort with the Town of Capitol Heights

American Rescue Homeowners Program

All information provided will be submitted to Industrial Bank. Information provided below will only be used for the **American Rescue Homeowners Program**. Your name, the name of your bank, routing number and account number must be filled in completely. Page 3 must be submitted in addition to pages 1 and 2 in order for your application to be reviewed and processed for your Town American Rescue Plan Stimulus Payment.

Applicant's Name

Bank Name

Routing Number

Account Number

Checking
 Savings