



Housing and Redevelopment Department
Emergency Repair Loan Program (ERL)
Preliminary Application

Date: _____

Applicant's Name: _____

Residence Address: _____

Mailing Address (if different from Residence Address): _____

Telephone Number (Home): _____ Work: _____

What is your Gross Annual Household Income? _____

Please briefly explain the work that needs to be done:

Do you need assistance in finding a contractor? (Please Circle) YES NO

Thank you for filling out this preliminary application for our ERL program. Please mail or fax to:

**City of Menlo Park
Housing and Redevelopment Department
Attn: Brenda Moore
701 Laurel Street
Menlo Park, CA 94025-3483**

**FAX: 650-327-1759
PHONE: 650-858-3414**