**SAMPLE**

# Property Owner Application Form

# GRANTEE NAME CDBG Housing Rehabilitation Program

Date:

|  |  |  |
| --- | --- | --- |
| Applicant Name: | Address: | Telephone: |
|  |  |  |
| Location of Property to be Improved: |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Current# Living Units | After Improvements | Current #Units Occupied | After Improvements |
|  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date purchased: |  | Deed Recorded, Book: |  | Page: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1st Mortgage: |  | 2nd Mortgage: |  |
| Original Mortgage Amount: |  | Current Balance: |  |

## Tenant Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Apt. No. | Tenant Names | #Occupants | #Bedrooms | Rent/month |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## Housing Costs

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Month | Year |  | Month | Year |
| Mortgage |  |  | Hazard Insurance |  |  |
| Taxes |  |  | Property Maintenance |  |  |
| Heat |  |  | Flood Insurance |  |  |
| Electric |  |  | Improvement Loan |  |  |
| Gas |  |  | Other |  |  |
| Sewer |  |  | Other |  |  |
| Water |  |  | TOTAL |  |  |

|  |
| --- |
| Project Data – Describe Necessary Improvements: |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

Applicant is: White non-Hispanic Black non-Hispanic

 Hispanic American Indian/Alaskan Native

 Asian or Pacific Islander

(Racial/Ethnic group data is obtained for statistical purposes only and will not be considered in determining applicant's eligibility.)

Household members information:

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | AGE | Relationship toHead of Household | SOCIAL SECURITY NO. |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Do you or anyone in your family have a disability that impacts your housing needs?

Yes No

If yes, please describe your housing needs as related to the disability:

## Sources of Income

|  |  |  |
| --- | --- | --- |
| NAME | SOURCE | AMOUNT/YEAR |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

## ASSET VALUES

|  |  |  |  |
| --- | --- | --- | --- |
| Current Home Value: |  | Savings Bonds: |  |
| Stocks: |  | Other Investments: |  |
| Other Real Estate: |  | Other: |  |

TA: Grantees should refer to the Income Verification and Review Guidance (Tool 2-2) to establish supporting documentation requirements and verification needs for their program. Enter information here on the program’s income verification process and required documentation, including a consent to release information if 3rd party verification is required.

I/we the undersigned, certify that all information in this application, and all information furnished in support of this application, is true and complete to the best of the applicant's knowledge and belief.

Applicant Signature Date

Applicant Signature Date

PENALTY FOR FALSE OR FRAUDULENT STATEMENT

Section 1001, Title 18, U.S.C., "Fraud and False Statements", provides, among other things, that whoever knowingly and willingly makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than $10,000 or imprisoned for not more than five years, or both.

## FOR OFFICIAL USE ONLY

Date of Application Review: Type of Assistance: Grant Loan Amount of Assistance: Approved **( )** Rejected **( )**

Reason(s), if rejected:

Signature of Authorized CD Representative Date

#  WHAT TO EXPECT AND WHAT NOT TO EXPECT

FROM THE GRANTEEHOUSING REHABILITATION LOAN/GRANTPROGRAM

## Things That the Homeowner Will Do in the Rehabilitation Program.

The program will help homeowners during the rehabilitation process, but the property owner is responsible for making the choices and to be involved in the activities listed below.

1. The property owner will help the rehab technician during the initial inspection of their house and point out known problems.
2. The property owner, **not** the program, will choose the contractor(s) to bid on the proposed work.
3. The property owner will review the bids with the rehab technician.
4. The property owner, **not** the program, will choose the contractor(s) to perform the work on their property.
5. The property owner, **not** the program, will sign the improvement contract with the contractor(s).
6. The property owner will be involved in the process of inspecting work in process and of approving payments to the contractor(s).
7. The property owner, the program, and the contractor(s) will be involved in settling disagreements that may occur during the rehab process.
8. The property owner will be responsible to contact the contractor(s) to correct problems covered by contractor warranties during the first year after the job has been completed.

## Things That the Homeowner Should Think About Before Making the Final Commitment to the Rehabilitation Program.

## The improvements made as part of the CDBG rehabilitation program are limited by CDBG regulatory requirements as well as limitations of the existing housing unit. For example:

1. Not all of the work that the property owner may want to be done can always be completed. The work completed will address the program requirements and address health/safety issues but will probably not solve all problems.
2. Floors, walls, ceilings, doors, windows, and other components in an older home may not be completely plumb, level, square etc. when the work is finished.
3. It can often be very stressful for you and/or your tenants to live in the house while the contractor is performing rehab activities.
4. The GRANTEE NAMERehabilitation Program is **not** the contractor, **does not** recommend contractors, **does not** choose the contractor(s) to do your work, and **cannot** guarantee that you will be completely satisfied with the work completed. The program **will** however work closely with you to help solve any problems and to help ensure that the work completed is functional, meets applicable codes and regulations, is consistent with industry standard installation practices, and is of a quality consistent with standards prevalent in your area.

Homeowner Signature Date

Program Representative Date