



FOR CITY HALL OFFICE USE ONLY:

Date Received _____ Time Received _____ Received By _____
Initial Published Application Intake Period – 9/11/09 – 10/2/09.

**BOONE OWNER-OCCUPIED HOUSING REHABILITATION PROGRAM
APPLICATION FOR PROGRAM ASSISTANCE**

INSTRUCTIONS: Please review attached “*Program Information*”. Then, complete the application, answering all questions. Answer “Not Applicable” or “N/A” if the question does not pertain to you. When completed, please mail or deliver this application as soon as possible to City Hall, or return to Simmering-Cory, Inc., P.O. Box 141, Clear Lake, IA 50428. If you have questions, contact Melanie Mitchell at Simmering-Cory, Inc., (641) 357-7554.

Applicant’s Full Legal Name (Include middle initial): _____ Age: _____

Spouses Full Legal Name (Include middle initial): _____ Age: _____

Address (Street and PO Box): _____ Telephone: _____

(HOUSING INFORMATION)

Date you purchased home: _____

How many bedrooms are there in the house? _____

Do you have a mortgage on the home? YES / NO If yes, what is the name and address of your mortgage lender? _____

(NOTE: Properties being purchased on Contract, mobile homes constructed before 1976 or on rented land or not on foundation, and rental units are not eligible.)

Name and address of your local housing insurance agent: _____

(HOUSEHOLD COMPOSITION)

(List everyone in household including yourself and spouse. You must list everyone, even if just living there on a temporary basis.)

Name (List Head of Household First):	Age:	Relation to Head of Household:	Gender:	Race: (Optional-for survey purposes)

Are there any anticipated changes to this household composition? YES / NO

If yes, please explain: _____

Does anyone living in the household have a diagnosed handicap or disability? YES / NO

If yes, please explain: _____

(EMPLOYMENT INCOME)

Please provide current gross income (amount prior to any deductions). If you anticipate any changes in this, please document change and reason for change. The employment of every household member must be reported.

Name of Household Member:		

Present Employer: Address: Telephone:

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Date employed: Gross salary - month/year:

Name of Household Member:		

Present Employer: Address: Telephone:

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Date employed: Gross salary - month/year:

Name of Household Member:		

Present Employer: Address: Telephone:

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Date employed: Gross salary - month/year:

If you are reporting self-employment income, please specify what type of work it is and what area, if any, of the house is used for business purposes: _____

(ASSETS)

This takes into account all assets of every household member, and includes checking accounts, savings, C.D.'s, stocks, bonds, income from rental property, real estate owned, etc.

Name of Household Member:			

Bank/Financial Institution: Address: Type of Account: Current Balance:

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Bank/Financial Institution: Address: Type of Account: Current Balance:

(Please make sure that you review Certification By Applicant(s) and Penalty Statement on Pages 6 and 7, and sign your application on Page 7.)

CERTIFICATION BY APPLICANT(S): Please read carefully before signing!

In submission and signing of this application, I agree to and acknowledge the following:

1. I will allow inspections of my home to determine eligibility and probable cost. At the Preliminary Inspection, if the Inspector(s) determine my property not to be clean and sanitary, or is unable to inspect any area because of difficult access due to any items or debris in the way, I will be given two weeks notice to remedy the situation prior to complete inspection. If after those two weeks, I have not remedied the situation as required, I will be determined ineligible for assistance.

2. If I am determined eligible, a contractor to complete the work will be chosen on a competitive basis by the City. I will allow the Program Administrator to make all arrangements for the rehabilitation work.

3. I understand that should lead-based paint hazards exist at my property, I will comply with all Regulations involved with the correction of such hazard, even if it involves temporary relocation of myself and my family and/or possible packing of possessions. I understand that we will not have access to the home during that time period. **I understand that the Housing Rehabilitation Program is considered a voluntary program (not mandatory rehabilitation program) and that I will not receive full compensation for required temporary relocation expenses.**

4. Any rehabilitation work done on my home will be guaranteed for a minimum of one year by the contractor. I understand that the City's and Program Administrator's involvement after that time period in regards to the enforcement of said warranty is expired after that year.

5. I agree that the work items set forth as required under State/Federal Regulations, will constitute all items as bid by the Contractor and no other work shall be required from Contractor unless such work is relevant to Specification items and is approved by the City's designated Inspector and Program Administrator before such work is performed.

6. I agree that there will be no work performed, or money exchanged, through private agreement with any party involved with the Rehabilitation Contract. I acknowledge and agree that no work will be done that is not authorized by the Housing Inspector and Program Administrator.

7. I agree that the City is not responsible for maintenance items or damages caused by me or any of my visitors prior to the Contract, during the course of the work and open Contract, or after close out of the Contract.

8. If at any time during the application process or the construction period, there is a change in my household income, or family or household composition, I agree to report this change to the Program Administrator.

9. I acknowledge that all income and asset information received from the verification of information concerning this application will be kept confidential by the City and its administrative personnel. Verification of any of the information contained in this application may be obtained from any source named herein.

10. I reserve the right to withdraw from this Program at any time prior to Contract signing. I may withdraw after Contract signing only within the three-day rescission period of the signing of the Mortgage Lien/Promissory Note. If I withdraw after that period, it may be required that all costs incurred to that point be paid by me.

11. I agree that by submitting this application for assistance I have invited the City and Program Administrators on to my property to administer the required inspections and work done on my property in accordance with applicable Regulations and will cooperate with them in doing so.

12. I certify that I have provided all information with respect to household members (current and anticipated), income (current and anticipated), etc. with respect to my application for assistance and have read and understand the penalty clause underneath my signature.

Signature: _____

Date: _____

Signature: _____

Date: _____

PENALTY FOR FALSE OR FRAUDULENT STATEMENT: U.S.C. Title 18, Sec. 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies...or makes any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both." You have hereby been notified that should the City find knowledge that you reported fraudulent information with regards to your Housing Rehabilitation Assistance application or verifications, upon City's demand, assistance will be terminated and you will be required to pay back 100% of assistance awarded to you.



**CITY OF BOONE
OWNER-OCCUPIED HOUSING REHABILITATION PROGRAM**

Program Information

What is the Purpose of the Program? - The purpose of the Program is to assist low and moderate-income persons in making needed repairs to their homes to bring the home into compliance with the Rehabilitation Standards and to improve the overall housing stock in the community. Typical repairs may include structural repairs, roofing, plumbing, mechanical, siding, painting, wiring, etc.

How Can A Homeowner Qualify? - Some of the conditions reviewed for eligibility are:

1. The property must be located within the designated neighborhood located East of Clinton Street to Brainerd Street and South of 8th Street to 1st Street, and must be a single-family structure.
2. The property has to be in such a condition to allow for inspections and required work. The property must be reasonably clean, sanitary and uncluttered to allow required access for inspections and contractors to complete the required work.
3. Cost estimates, and/or actual bids, must verify cost eligibility. Some properties may be considered "cost prohibitive" for rehabilitation.
4. Mobile homes are not eligible unless they meet manufactured home criteria requirements. (Contact Simmering-Cory, Inc. for criteria.)
5. The applicant must be an owner-occupant, or purchaser-occupant, and must have resided in the dwelling for six months prior to date of application.
6. Property taxes, special assessments, mortgage payments (if applicable), and utility payments must be current and paid-to-date.
7. For the term of the mortgage with the City, the homeowner must purchase and maintain fire and extended coverage insurance in an amount equal to, or greater than, the current assessed value of the property (land and buildings). The City shall also be named on the insurance policy as an additional Mortgage Holder.
8. Properties being purchased under Contract Sales are not eligible.
9. The applicant's annual gross total household income must be below income limits(*) shown, based on the number of persons in the household:

<u>Number of Persons</u>	<u>Income Limits</u>
1 person	\$35,650
2 persons	\$40,750
3 persons	\$45,850
4 persons	\$50,950
5 persons	\$55,050
6 persons	\$59,100
7 persons	\$63,200
8+ persons	\$67,250

*Income limits are reviewed and published by HUD annually. Should limits change, newly published limits will come into affect.

What Type of Assistance is Offered? - The City can provide assistance in the form of a deferred payment loan to make needed repairs for a qualified applicant. Assisted homeowners will be required to sign a Mortgage Lien/Promissory Note for a five-year period. If the owner occupies, and there is no sale or transfer or abandonment of the house for five years, there will be no repayment obligation. A sale, transfer, etc., prior to the five years would likely require at least a partial repayment of the grant funds. The Mortgage Lien/Promissory Note will be recorded as a lien against the property. (Homeowners need to be aware that after the Mortgage Lien has been recorded, future re-financing of their first-position mortgage loan, or financing of a mortgage loan may require first position by that mortgagor, and a subordination request would need to be presented for review and authorization through the City Council.)



Does the Homeowner Have to Pay Anything? – While there is no required homeowner contribution, there are some instances where the low bid may come in over the allowable budget. If the project is not considered “cost prohibitive”, homeowners may be given the option to finance the difference. Homeowners are not “locked in” to anything until they know if it will become necessary for them to pay anything and how much.

What is the Process? –

1. The Homeowner completes the Application for Program Assistance and submits it to the City. Applications received during the published “intake period” will be ranked and put on the Waiting List accordingly. Ranking is based upon income and assets. This will require preliminary verifications to be processed. The applicant will receive a letter from Simmering-Cory, Inc. explaining what information is needed to process this. Applications received after the published “intake period” will be placed on the Waiting List on a first-come, first-serve basis.
2. When the application comes to the top of the Waiting List, the full verification process begins. The Homeowner will receive a letter from Simmering-Cory, Inc. explaining what information is needed to finalize verifications.
3. Once the applicant is qualified, an inspection of the entire house and property will be made to determine property eligibility and to establish a detailed list of the repairs that are needed. Only repairs necessary to meet the rehabilitation standards will be allowed. The inspection also determines preliminary project feasibility.
4. An Open House is then scheduled to be held at the house. At the Open House, contractors who are interested in bidding on the work are welcome to take a tour of the house and look at proposed work items. Project Specifications are provided for the contractors and the owner.
5. The City will then solicit competitive bidding from general contractors for the required work. Bids are then reviewed based on budget, etc. Projects receiving bids over the allowable budget costs may be determined ineligible.
6. After City award of Contract, a meeting (Pre-Construction Conference) will be held with the owner, the inspector and the contractor present. All required work will be reviewed and all paperwork will be signed. Contractor and owner will discuss anticipated start-date and any other information that needs to be reviewed.
7. For interior Lead-Hazard Reduction Activities, it is required that the homeowners be temporarily relocated, and will not have access to their home during that work period. They must move to a hotel, motel or other approved location. This procedure will be reviewed before start of construction and partial compensation may be paid to the homeowner for the approved temporary relocation housing.
8. City’s Housing Inspector will conduct inspections and periodic pay requests during the course of the work until close-out of project. If there are any change orders (required, authorized work items) during the course of the work, the homeowner will be required to sign an Amendment to the amount of the Mortgage Lien/Promissory Note reflecting the change in amount.

For more information, please contact:

Simmering-Cory, Inc.
PO Box 141
Clear Lake, IA 50428-0141
641-357-7554

or call City Hall.



(Information submitted for the purpose of application for the Boone Housing Rehabilitation Program is strictly confidential.)