Rehabilitation Grant Program (RGP) Information & Application

Objective:

Clearfield City has established the Rehabilitation Grant Program (RGP) to provide assistance for home improvements that eliminate blight, conserve energy, improve property values, and preserve the housing community within the city limits of Clearfield City. The RGP is available to low to moderate income homeowners.

Clearfield City will allow the RGP to provide up to \$8,000.00 in the form of a grant to eligible homeowners within the limits of Clearfield City. The grant may be used to correct present home problems, accessibility modifications, code violations of health and safety concerns and/or energy improvements.

Target Population:

Funds are targeted to assist single family homes that are owner-occupied which have a household income at or below 80% of the area median income as determined by the U.S. Department of Housing and Urban Development (HUD) and adopted by Clearfield City. Townhomes and/or condominiums do not qualify.

HOUSEHOLD SIZE	MAXIMUM INCOME
1 Person	\$42,950
2 Persons	\$49,050
3 Persons	\$55,200
4 Persons	\$61,300
5 Persons	\$66,250
6 Persons	\$71,150
7 Persons	\$76,050
8 Persons	\$80,950

Eligible Applicants:

- The applicant must have owned and lived in the home for at least one year prior to requesting assistance.
- Home must continue to be owner-occupied at least two years after final inspection; otherwise funds received are required to be paid back.
- The applicant's home must be deficient in at least one aspect of the Uniform Housing Code (UHC), or must fall below the minimum Housing Quality Standards (HQS).
- Each applicant is eligible once in a lifetime to receive RGP assistance, regardless of change of addresses and/or grant status.
- Homeowner must be current on mortgage payments and taxes.
- No liens on the property.
- The property must be the applicants' primary residence.
- All applicants must meet income guidelines as specified above.

Eligible Repairs:

Eligible repairs/improvements through this program must meet HUD guidelines as designated in CFR §570.202 and are limited to the following:

/	Reque	sted Repairs/Improvements (one or more is required):
		Accessibility modifications
		Code violations of health and safety concerns (ex: electrical, plumbing, leaking water heater, etc.)
		New energy efficient windows
		New siding
		New stucco
		New roof
		New water and/or sewer lateral.
/	Option	al Repairs/Improvements:
		New landscaping
		New attached garage
		New driveway

Funding:

The fiscal year for the RGP grant program begins July 1st of each year. Funds are processed and disbursed on a first come, first served basis until the fiscal year's funds are depleted.

Grants from the RGP shall not exceed \$8,000, and will be awarded on a 1 to 4 matching ratio (i.e. a \$1,000 match from the applicant will qualify for a \$4,000 grant; and to qualify for the maximum \$8,000 grant, the applicant must contribute \$2,000).

The sum of all mortgages/liens plus all rehabilitation funds provided by Clearfield City cannot exceed 95% of the Market Value as determined by the Davis County Assessor's Office.

Forgiveness Period:

The grant will be secured by a Deed of Trust. The Deed of Trust, Notice of Default and Promissory Note will be notarized, recorded and filed at the Davis County Recorder's Office and a copy will be placed in the applicant's file. Any funds received through this program will need to be repaid to Clearfield City if the owner moves or sells within 2 years of the date of final inspection. During the required time of residency, 50% of the grant will be forgiven one year after the date of final inspection and the remaining 50% will be forgiven after the full two years. To receive these credits, grant recipient(s) will be required to provide proof of residency in the form of utility billings and property tax notices for each year. No credit will be awarded without proof of residency as described above.

Application Process:

Applicant must complete and submit the following application to the Davis Community Housing Authority. This application will assist the Davis Community Housing Authority staff to evaluate your eligibility to participate in this program. Incomplete applications will not be accepted. Please provide the most accurate information possible, all information is subject to verification. Applications will be processed on a first come, first served basis.

Once your application is completed, please call (801) 939-9198 to schedule an appointment with the Special Programs Administrator. The Special Programs Administrator will review your application, explain the program and answer any questions. Notification of program acceptance or denial normally occurs within two weeks of the appointment.

Clearfield City Rehabilitation Grant Program Process

- 1) Once all requested information has been received and the applicant is notified of program eligibility, a first inspection of the home will be scheduled. All items that require repair or replacement and any Uniform Housing Code (UHC) or Housing Quality Standards (HQS) violations will be listed on the Description of Work document.
- 2) A description of Work, based on the inspection, will be written by the City Building Official. The Description of Work will be discussed and confirmed with the homeowner before sending out contractors for bids. A minimum of three licensed contractors will be invited to bid.
- 3) A second visit to the home will be scheduled for a contractor walk through. Bid submittal deadline will be approximately one week after contractor walk through.
- 4) The Special Programs Administrator will review all qualified bids with the homeowner. The contract will be awarded to the lowest bidder unless the homeowner is willing to pay the difference between the lowest bid and the chosen contractor.
- 5) After the homeowner has chosen the contractor, the contract will be signed by the homeowner, contractor and the Davis Community Housing Authority.
- 6) Once the documents are signed, the contractor will start work and submit bills for payment to the Davis Community Housing Authority.
- 7) Once all work has been completed, the homeowner, Special Programs Administrator and Building Official will conduct a Final Inspection to ensure all work has been completed satisfactorily.
- 8) A 1-year warranty period starts after successful Final Inspection on all grants.

Please sign below stating that this information was reviewed to you and or spouse by the Davis Community Housing Authority's Special Programs Administrator and you understand the requirements and procedures of the Home Rehabilitation Grant.

Applicant/Date	Date	Co-Applicant/Date	Date
Household Member over 18	Date	Household Member over 18	Date

Rehabilitation Grant Program Application (RGP)

The information collected below will be used to determine whether you qualify for this program and will only be used for verification pertaining to this application.

Applicant Information					Dat	e:	
Applicant's Name (Last) First			(MI)		Home	Phone	
					()	
Address (include Zip Code):						er of Years Ov	vned:
Name and Address of Employer:						mployed:	
D ' DI M		NT C	V 0 11		YES		1
Business Phone No.		No. of	Yrs. On Job:		Yrs. Ii	n this line of w	ork:
Name and Address of Previous Employer (if less that	an 2 vrs)	No of	Yrs. on job		Rusin	ess Phone:	
Traine and Address of Trevious Employer (if less the	uii 2 yis.)	110.01	113. 011 100		(ess i none.	
)		
Co-Applicant Information:							
Applicant's Name (Last) First			(MI)		Home	Phone	
					()	
Address (include Zip Code):					Numb	er of Years Ov	vned:
Name and Address of Employer:						mployed:	
					YES		
Business Phone No.		No. of	Yrs. on Job:		Yrs. li	n this line of w	ork:
Name and Address of Previous Employer (if less that	an 2 vrc)	No. of	Yrs. on job		Rucin	ess Phone:	
Traine and Address of Trevious Employer (if less tha	an 2 yrs.)	140. 01	115. OH JOU		Dusiii		
** 1111					()	
Household Members:			Date Of				Cosial Commitm
Name	Relationsl	hin	Birth	,	Age	Sex	Social Security Number
Name	Keiationsi	шЬ	Ditti	F	ige	ЭСХ	Number
	Head Of Hous	ehold					

NOTE: All household members 18 years and older who receive an income must supply the information listed below:

Monthly Income

Source	Applicant	Co-Applicant	Other Household Members 18 or Older	TOTALS
Salary				
Overtime Pay				
Commissions				
Fees				
Tips				
Bonuses				
Interest/Dividends				
Social Security				
Net Business Income				
Net Rental Income				
Pension/ Retirement				
Unemployment Benefits				
Workers Compensation				
Alimony, child Support				
Welfare Payments				
Other:				
TOTALS:				

Assets

Type	Cash Value	Type	Cash Value
Checking Account		Other	
Savings Account		Other	
Stocks/Bonds, IRA'S		Other	
Recreational Items		Other	
Home Equity		Total	\$

Liabilities

List current obligations (debts) including auto loans, credit cards, charge accounts, credit union loans, personal loans, etc. **NOTE: All household members 18 years or older must disclose information also.**

Creditor	Original Balance	Current Balance	Monthly Payment	Past Due Amount
1 st Mortgage				
2 nd Mortgage				
Car Payment				
Student Loan				
Consolidation Loan				
Credit Card				
Other				
Total:				

Eligible Repairs Requested

Eligible repairs through this program must meet HUD guidelines as designated in CFR §570.202 and are limited to the following:

	ested Repairs (one or more is required):	
	Accessibility modifications	
	Code violations of health and safety concerns water heater, etc.)	(ex: electrical, plumbing, leaking
	New energy efficient windows	
	New siding	
	New stucco	
	New roof	
	New water and/or sewer lateral.	
✓ Optior	nal Repairs:	
	New landscaping	
	New attached garage	
	New driveway	
Authority to velocumentation by me may cause I understand to discovered after the cost of any addition, I haddition, I had	rerify all information provided using whatever as necessary. I understand that false or misuse this application to be denied and or legal that if any false or misleading information preser the work is completed that I will be held put the work performed plus interest at twelve put attorney's fees. The property that I have not received any field City Grant Program(s) within the last twelve.	sleading information provided action may be taken against me. covided in this application is personally and financially liable percent (12%) per annum plus
Authority to velocumentation by me may can I understand to discovered after for the cost of any additional In addition, I haddition, I	verify all information provided using whatever in as necessary. I understand that false or misuse this application to be denied and or legal that if any false or misleading information preser the work is completed that I will be held put the work performed plus interest at twelve put attorney's fees. The property that I have not received any field City Grant Program(s) within the last twelve put the control of the control	er verification methods and sleading information provided action may be taken against me. rovided in this application is tersonally and financially liable tercent (12%) per annum plus mancial assistance from

WARNING: Section 1001 of Title 18 of the U.S. Code making it a criminal offense to make willful false statements or misrepresentations to any department or agency of the U.S. as to any matter within its jurisdiction.

DOCUMENTS REQUIRED:

Please attach the following documents to this application. Incomplete applications will not be processed. All information will be presented to the Davis Community Housing Authority's Special Programs Administrator.

Government issued photo ID for each adult household member 18 years and older
Completed Clearfield City Application
Current Property Tax Statement
Mortgage Statement
Proof of Income for the previous 60 days (Possible source of income include, but are not limited
to: Pay stubs, SSI/SSA yearly statement, Profit & Loss Statement (if self-employed), child
support, alimony, etc.)
Copy of Checking & Savings Account Statements (last 2 months)
Proof of Homeowners Insurance
Federal Tax Returns (complete) for last two years
Divorce Decree (if applicable)

NOTE: All household members 18 years and older who receive an income must supply the information listed below. All requested information will be used solely to determine applicant and property qualification.

REQUIRED INFORMATION:

Information for Government Monitoring Purposes

Please read this statement before completing the box below: The following information is requested by the federal government for loans/grants related to CDBG funded programs, in order to monitor the City's compliance with equal credit opportunity and fair housing laws. You are required to furnish this information. The law provides that the City/Housing Authority may neither discriminate on the basis of this information. However, if you choose not to furnish it, under federal regulations the City/Housing Authority is required to note race and sex on the basis of visual observation or surname. The City/Housing Authority must review the above material to ensure that the disclosures satisfy the requirements to which the City is subject under applicable state law for the program applied for.

Applicant/Mark all that apply	Co-Applicant/Mark all that apply		
Ethnicity:	Ethnicity:		
 Hispanic 	o Hispanic		
 Non-Hispanic 	 Non-Hispanic 		
Race/National Origin:	Race/National Origin:		
o White	o White		
o Black/African American	 Black/African American 		
o Asian	o Asian		
 Native Hawaiian/Other Pacific Islander 	 Native Hawaiian/Other Pacific Islander 		
 American Indian/Alaskan Native 	 American Indian/Alaskan Native 		
 Other/Multi-Racial 	 Other/ Multi-Racial 		
Sex:	Sex:		
o Male	o Male		
o Female	o Female		
Marital Status	Marital Status		
o Married	 Married 		
 Separated 	 Separated 		
 Unmarried (incl. single, divorced, widowed) 	o Unmarried (incl. single, divorced, widowed)		