



**CITY OF COLONIAL HEIGHTS
2022-2023
CDBG HOME REPAIR PROGRAM
GUIDELINES AND APPLICATION**

IMPORTANT

After all documents have been completed and returned to the office, project:HOMES will begin the review process of your application. Please do not take this application apart; if application is returned and pages are missing your application will not be processed.

Please address inquiries to:

**Rishonda Anthony
Project: Homes
88 Carnation Street
Richmond, VA 23225
Phone: (804) 233-2827 Ext. 244 Fax: (804) 525-7665**

**Brandi Payne
City of Colonial Heights Planning Department
201 James Avenue
Colonial Heights, VA 23834
Phone: (804) 520-9297/Fax: (804) 524-8755
Email: payneb@colonialheightsva.gov**

"This program is run in accordance with the Federal Fair Housing Law (The Amendments Act of 1988). "It is illegal to discriminate against any person race, religion, sex, handicap, familial status, or national origin."



*Fair Housing
because of*

Application Deadline: August 19th, 2022

City of Colonial Heights CDBG Home Repair Program Guidelines

This program is made possible by the federal Community Development Block Grant Program. A grant of up to \$10,000 is available per owner-occupied home to assist with specific home repairs or activities that eliminate conditions detrimental to the safety and health of the residents.

Applicant Eligibility:

In order to be considered for this grant:

- 1) The house must be a single-family, owner-occupied dwelling located within the City of Colonial Heights.
- 2) There are two types of eligible applicants: the homeowner or a renter with a legal disability.
- 3) The applicant must live in the home (as a primary, permanent residence), and be able to provide proof of home ownership, active home insurance, paid property taxes, proof of exemption or proof of payment on bill. The owner could, however, provide proof of control of the property if he or she has made payments of property taxes and insurance for a period of three (3) years immediately preceding application submission. Life estate rights are an acceptable form of ownership.
- 4) **If the applicant is a renter with a legal disability, the applicant will need to obtain the information listed above from the property owner with the submission of the application.**
- 5) **If the applicant is a renter with a legal disability, the applicant must provide a notarized statement from the property owner granting permission for the repairs and a copy of the lease.**
- 6) Applicants who have received this grant in the past may reapply for assistance after 5 years after the work has been completed.
- 7) Although the program is available citywide, priority will be given to households in the Violet Bank-Flora Hill, Shepherd Stadium, Westover-Snead, Toll House, and Eilerslie/Dunlop Districts, first time applicants, persons who are elderly or have a disability, and to those needing repairs that threaten the safety or well-being of the household members.
- 8) Homeowners must be at or below 80% of the area median income. Income and assets will be verified before a home repair contract is issued. The total household income based on the number of people living in the home, cannot exceed the following:

Number of Persons in Household	Maximum Income*
1	\$56,400
2	\$64,450
3	\$72,500
4	\$80,550
5	\$87,000
6	\$93,450
7	\$99,900
8	\$106,350

* FY 2022 HUD Income Limits (Richmond MSA)

Eligible Repairs:

Eligible activities or repairs include but are not limited to the following:

- Unsafe electrical, heating or plumbing systems
- Faulty roofs
- Faulty porches and steps that present a safety risk
- Security upgrades such as deadbolts and floodlights
- Lead-based paint testing

Application Deadline: August 19th, 2022

Ineligible activities consist of any unnecessary physical improvements, any repairs of a cosmetic nature, repairs to sheds, and repairs to garages or any structure not attached to the living unit.

Repayment Clause:

To prevent owners from simply selling the property and profiting from the CDBG-funded improvements, the owners must repay the program if they sell the property within five years; however, part of the owner's obligation is forgiven each year they live on the property.

Repayment of the rehabilitation grant, or in the event there are relocation costs, shall be based on a twenty percent (20%) reduction of the amount to be repaid per year, according to the following schedule:

0 - 12 months: 100% repayment
After one (1) year: 80% repayment
After two (2) years: 60% repayment
After three (3) years: 40% repayment
After four (4) years: 20% repayment
After five (5) years: 0% repayment

If the property is inherited by a blood relative who is also eligible under the program guidelines or sold to an eligible person under the guidelines, repayment may be deferred. If the owner dies during the five year period of the grant and the heir(s) sell the dwelling, then repayment will follow the same schedule as if the owner were alive and selling the dwelling.

Preconstruction Requirements

Debris removal is a pre-construction requirement to program participation. Property owners will be required to clear the exterior and interior property site of all identified trash, debris, inoperable vehicles and derelict structures prior to receiving program assistance. If the owner is elderly or handicapped and cannot physically clear the property or arrange for the removal of the debris, an attempt will be made to obtain the assistance to the homeowner.

If you are within the income guidelines, need the eligible repairs, and would like to be considered for assistance, you **MUST** reply to all the questions in the Home Repair Program application. Mail the application to Project: Homes at that address below and provide a copy of all applicable requested documents. priority will be given to households in the Violet Bank-Flora Hill, Shepherd Stadium, Westover-Snead, Toll House, and Ellerslie/Dunlop Districts, first time applicants, persons who are elderly or have a disability, and to those needing repairs that threaten the safety or well-being of the household members. Assistance is available for those needing help filling out the application.

Due to HUD regulations, you **MUST** provide all documentation requested with your application, or you will not be eligible for any funding. Persons whose applications are denied have 15 days from receipt of the letter to appeal the decision.

Please return applications and documentation to:
Rehab Department
Project: Homes
88 Carnation Street
Richmond, VA 23225

Application Deadline: August 19th, 2022

Office Use Only Date Application Received: _____

Applicant Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Primary) _____ (Secondary) _____

Email Address: _____

Birth date: _____ Date of Application: _____

Has client received service from project: HOMES (ElderHomes) before? Yes No

-If yes, what programs? Rehab Weatherization Renew Crew Other Date (s) _____

Number of Bedrooms: _____ Number of Bathrooms: _____

Marital Status: Married Single Divorced Widowed

Sex: Male Female Over 62: Yes No Veteran: Yes No

Race (please check all that apply): Black or African American White

American Indian or Alaskan Native Asian Native Hawaiian or Pacific Islander

Ethnicity: Hispanic/Latino Origin NOT Hispanic/Latino Origin

Does Client Receive Disability: Yes No

Co-Applicant Information:

Co-applicant Name: _____

Phone: (Primary) _____ (Secondary) _____

Birth date: _____ Email Address: _____

Sex: Male Female Over 62: Yes No Veteran: Yes No

Race (please check all that apply): Black or African American White

American Indian or Alaskan Native Asian Native Hawaiian or Pacific Islander

Ethnicity: Hispanic/Latino Origin NOT Hispanic/Latino Origin

Does Client Receive Disability: Yes No

Application Deadline: August 19th, 2022

Please list all members in household, including SELF: (Use the back of the application if necessary)

Name	Date of Birth	Relationship to Homeowner (Wife, Grandson, Niece, etc.)
		HOMEOWNER

List all sources of income SEPARATELY:

Directions: Applicants may have more than one source of income. Please list these sources as **separate** entries on the lines below. Note: Project:HOMES requires proof of income for all **household**, not just homeowners. Also note: Twice monthly refers to client that are paid on the 1st and 15th of each month. **Gross Monthly Household Income of All Residents (Please use income before taxes and deductions are taken out):**

Household Size	1	2	3	4	5	6	7	8
Annual Income	\$56,400	\$64,450	\$72,500	\$80,550	\$87,000	\$93,450	\$99,900	\$106,350

*The Annual Income Limits for this program are Effective April 1st, 2022:

1. Applicant source of income: _____
 Weekly Bi-weekly Monthly Twice Monthly Gross Yearly (before taxes): \$ _____
2. Additional source of income: _____
 Weekly Bi-weekly Monthly Twice Monthly Gross Yearly (before taxes): \$ _____
3. Additional source of income: _____
 Weekly Bi-weekly Monthly Twice Monthly Gross Yearly (before taxes): \$ _____
4. Additional source of income: _____
 Weekly Bi-weekly Monthly Twice Monthly Gross Yearly (before taxes): \$ _____
5. Additional source of income: _____
 Weekly Bi-weekly Monthly Twice Monthly Gross Yearly (before taxes): \$ _____
6. Additional source of income: _____
 Weekly Bi-weekly Monthly Twice Monthly Gross Yearly (before taxes): \$ _____

Total **Monthly** Household Income: \$ _____ Total **Annual** Household Income \$ _____

Application Deadline: August 19th, 2022

Applicant Information (Please check the appropriate box)

1. Do you **own your own home**? YES NO
2. If disabled or over the age of 65 do you have a **real estate tax exemption**?
 YES, I have real estate tax exemption NO, I do NOT have an exemption
3. Are your **property taxes** paid to date? YES NO N/A
4. Do you have **homeowner's insurance**? YES NO
5. Is there a **mortgage or reverse mortgage** outstanding on the property?
 Mortgage Reverse Mortgage Neither
6. If there is a **mortgage** on the property, is it current? Note: project:HOMES regulations allow clients to be **up to** two payments behind on their mortgages (including the current month). Yes No
7. Which of these **deposit accounts** do you own? (you will need to provide documentation for each account)
 - Checking Account Yes No How many: _____
 - Savings Account Yes No How many: _____
8. Do you own any **rental property**? YES NO
9. Are you listed as the **owner** of any property **in addition your primary residence**? (Including family homes, vacant lots) YES NO
10. Do you own any **stocks, bonds, certificates of deposit, or money market accounts**? YES NO
11. Do you have an **Individual Retirement Account (IRA) account**? YES NO
12. Do you have a **401(k) account or Keogh account**? YES NO
13. Do you have a **life insurance policy** with a cash value available to you before death? (*For example, surrender value of a whole life or universal life policy*). YES NO
14. Do you own any personal property held as an **investment**? (This would be something with an assessed value, for example: land (including vacant or unrented lots), boats, or antiques). YES NO
 a. If yes, please specify the investment: _____
15. Within the past 3 months, have you received any **lump-sum or one-time receipts** (Inheritances, lottery winnings, insurance settlements, or other amounts not intended as periodic payments). *Note: Please do not include government stimulus payments in your answer.* YES NO

Please list Homeowner's Insurance Company Information:

Insurance Company (Example: Nationwide, Farmers, Allstate, etc.) _____

Policy period (Example: Jan 1, 2022- Jan 1, 2023): _____

Please list Mortgage information:

Name of Mortgage Company or Lien Holder	Is mortgage included in a bankruptcy plan?	Monthly Payment	Mortgage Balance

Application Deadline: August 19th, 2022

PLEASE READ CAREFULLY BEFORE SIGNING

Attention: It is a criminal offense under Section 1001 of title 18 of the code of the United States to make willful false statements or misrepresentation of any information provided in completion of this application.

I certify that the information provided is accurate to the best of my knowledge. Nothing requested has been omitted or misrepresented in this application. I understand that my eligibility for assistance from project:HOMES depends on verification of income. I also understand that should I provide inaccurate information on this application, I may be required to repay any funds spent on my/our home, and may be charged with a criminal offense.

Signature of Applicant

Date

Signature of Co- Applicant

Date

Required Documentation (Attach Copies for file)

1. Proof of **household income for every household member over 18 years old**- (social security benefit letter, paystubs, pension, statements, etc.)
2. Copy of **Driver's license or State ID for every household member over 18 years old**
3. **Current Real Estate Tax Bill** with receipt OR **Mortgage Statement**
4. Recent **bank account statements** (6 months of savings and checking) **for every household member over 18 years old**
5. **Declaration Page from Homeowner's Insurance**
6. Please provide evidence of any **Additional Assets** (Includes: 401 (k) or IRA balances, any Cash Value in Life insurance, etc.)

REQUIRED Additional Documentation for Renters

1. **RENTER with a legal disability**: Notarized Statement from Property owner
2. Copy of the **Lease**
3. Copy of **Utility Bill**

If you are a renter, the Ownership Declaration page is not needed.

Eligibility Determined & Completed By:

Signature (project:HOMES Intake Officer)

Date

Application Deadline: August 19th, 2022

HOUSEHOLD INFORMATION

Conditions that may be recognized as serious health and safety standards include: **leaking roof, rotten/broken floors, steps and porches in need of repair and failure of plumbing, electrical or heating systems.**

Some requested repairs may not fall within the guidelines of the Emergency Home Repair Program. The Rehabilitation Specialist will assess the repairs and get a final approval from administration to proceed with the work order.

Important: Any repairs to a property will be determined by the amount of funding available at the time of application. It is possible that a home may require an amount of work beyond the scope of the emergency program. If this is the case, the rehab specialist will determine what repairs can and cannot be made. **Homes that have fallen too far into disrepair may be declined from the emergency program.**

Are you currently experiencing (please check yes or no):

Home Condition	Yes	No	Please Explain
Roof Leak			
Damaged or missing gutters			
Chimney issues			
Inoperable or leaking plumbing			
Electrical hazards			
Heating issues			
Flooring (decayed or deteriorated framing)			
Safety issues: <ul style="list-style-type: none">• No railings• Need grab bars• Broken stairs• Doors that don't work/lock• Bathroom modifications for disabled clients			
Broken windows (cracks in glass, broken glass, or unable to open window only).			
Code enforcement citations			

Additional Notes: _____

Application Deadline: August 19th, 2022

OWNERSHIP DECLARATION

Please check one:

I do hereby attest and affirm that I am the homeowner of record for the residence listed below.
-OR-

I do hereby attest and affirm that I am the legal renter/lessee of record for the residence listed below. *Note: Please have the property owner complete and attach the supplemental ownership declaration and include it with your application.*

Applicant Name (Please Print) _____

Signature _____

Co-Applicant (Please Print) _____

Signature _____

Property Address: _____

Certification for Access to the Property:

I certify that I will allow project:HOMES and project:HOMES Contractors access to my/our property in order to have the home rehabilitated.

Applicant Signature

Date

Co-Applicant Signature

Date

A. Please list an additional contact person in case we cannot reach you:

Contact Name: _____

Contact Relationship to Homeowner: _____

Contact phone: _____

Contact email: _____

Application Deadline: August 19th, 2022

CONTRACT OF UNDERSTANDING

- I understand that project:HOMES does not have any liabilities under this Program. The contractor hired by project:HOMES Community Development Block Grant Home Repair Program (CDBG) is to be held responsible for his/her work according to our agreement.
- I understand that project:HOMES is only administering this Program. By so doing, project:HOMES does not assume any liability or make any warranties concerning the quality of work performed.
- To help in program implementation, project:HOMES has a Rehabilitation Specialist to assure maximum satisfaction between applicant and contractor. I agree to work with the Rehab Specialist and the Contractor to get the greatest benefit from the program.
- Project:HOMES reserves the right to deny service to a client if any household member is uncooperative, threatening, or abusive to any project:HOMES staff member or contractor.

I hereby affirm that I have read and agree to my responsibilities in the Community Development Block Grant Home Repair (CDBG) Program:

Applicant Signature

Date

Co- Applicant Signature

Date

Address

City, State, Zip Code

Application Deadline: August 19th, 2022

Supplemental Owner Declaration

Note: This form is required for all applications where a rental property is being considered for service. This form is to be completed by the landlord/legal owner of the property listed below.

Please **initial** next to each declaration:

_____ I do hereby attest and affirm that I am the **homeowner of record** for the residence listed below.

_____ I do hereby attest and affirm that I give **permission to the lessee** to participate in the CDBG home repair program at the residence listed below.

_____ I agree to abide by the Repayment Clause if the home is sold or rented to a person with no legal disability.

_____ I certify that I will allow Project: Homes and Project: Homes Contractors access to my/our property in order to have the home rehabilitated.

Owner Name (Please Print) _____

Co-Owner (Please Print) _____

Property Address: _____

WITNESS the following signature (s):

_____ Owner (Signature)

_____ Co-Owner (Signature)

_____ Co-Owner (Signature)

STATE OF VIRGINIA/City of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 2021

by _____.

(Owner)

My commission expires: _____

DATE

NOTARY PUBLIC

Application Deadline: August 19th, 2022