

Clearfield City 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, condominiums and mobile homes do not qualify.

HOUSEHOLD SIZE	MAXIMUM INCOME
1 Person	\$56,300
2 Persons	\$64,350
3 Persons	\$72,400
4 Persons	\$80,400
5 Persons	\$86,650
6 Persons	\$93,300
7 Persons	\$99,700
8 Persons	\$106,150

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:

- ✓ Requested 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.

- ✓ Optional 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 and Repayment:

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 sells, changes title, refinances, or moves or sells within two (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.

Conflicts of Interest:

Applicants must disclose all potential conflicts of interest in regards to any household member or family/friends working for Clearfield City or Davis Community Housing Authority.

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.

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			Date:		
Applicant's Name (Last)	First	(MI)	Home Phone ()		
Address (include Zip Code):			Number of Years Owned:		
Name and Address of Employer:			Self-Employed: YES NO		
Business Phone No. ()	No. of Yrs. On Job:		Yrs. In this line of work:		
Name and Address of Previous Employer (if less than 2 yrs.)		No. of Yrs. on job	Business Phone: ()		
Co-Applicant Information:					
Applicant's Name (Last)	First	(MI)	Home Phone ()		
Address (include Zip Code):			Number of Years Owned:		
Name and Address of Employer:			Self-Employed: YES NO		
Business Phone No. ()	No. of Yrs. on Job:		Yrs. In this line of work:		
Name and Address of Previous Employer (if less than 2 yrs.)		No. of Yrs. on job	Business Phone: ()		
Household Members:					
Name	Relationship	Date Of Birth	Age	Sex	Social Security Number
	Head Of Household				

Does any **member of the household** work for Clearfield City or Davis Community Housing Authority?
Yes / No

Do you have **family or friends** that work for Clearfield City or Davis Community Housing Authority?
Yes / No

NOTE: All household members 18 years and older must supply the information listed below:

Monthly Income

Source	Applicant	Co-Applicant	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		Recreational Items	
Savings Account		Home Equity	
Stocks/Bonds, IRA'S		Other	
Other		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				
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:

- ✓ Requested Repairs (**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.

- ✓ Optional Repairs:
 - New landscaping
 - New attached garage
 - New driveway

I certify under penalty of perjury that the information in this application is true and correct to the best of my knowledge. I hereby authorize the Davis Community Housing Authority to verify all information provided using whatever verification methods and documentation as necessary. I understand that false or misleading information provided by me may cause this application to be denied and or legal action may be taken against me. I understand that if any false or misleading information provided in this application is discovered after the work is completed that I will be held personally and financially liable for the cost of the work performed plus interest at twelve percent (12%) per annum plus any additional attorney's fees.

In addition, I hereby certify that I have not received any financial assistance from other Clearfield City Grant Program(s) within the last twelve (12) months.

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

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)

REQUIRED INFORMATION:

Information for Government Monitoring Purposes	
<p>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.</p>	
Applicant/Mark all that apply	Co-Applicant/Mark all that apply
<p>Ethnicity:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <p>Race/National Origin:</p> <ul style="list-style-type: none"> <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Other/Multi-Racial <p>Sex:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Male <input type="checkbox"/> Female <p>Marital Status:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. single, divorced, widowed) <p>Disability:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No 	<p>Ethnicity:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <p>Race/National Origin:</p> <ul style="list-style-type: none"> <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Other/ Multi-Racial <p>Sex:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Male <input type="checkbox"/> Female <p>Marital Status:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. single, divorced, widowed) <p>Disability:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No