



Dear Applicant,

Thank you for your interest in Home Repair Resource Center's Financial Assistance Programs (FAP). These programs are designed to help you complete important repairs to your home. HRRC will determine what financial assistance options are available and will help to guide you through the process, but you will make the key choices along the way about which financial products, programs, and contractors to use. Depending on the scope and complexity of your project, the process can take from several weeks to several months.

To begin the process, we need to obtain certain personal and financial information as part of your application. The information we ask for is required by HUD, but is also an important part of putting together an accurate and complete range of options for you and your project.

Included with this letter is a checklist of documents that you will need to review and provide to your HRRC counselor as part of the application process. Please review this checklist carefully and make sure you provide all of the documentation – if anything is missing, it may delay your application.

When you meet with your HRRC counselor, they will review these documents with you and answer any questions you have about them.

Also included with this letter are the following:

1. An overview of the current programs, grants, and loans offered as part of the FAP – you may qualify for some of these. Your counselor will review your application and documents and help you to determine your eligibility. As part of that process, your counselor will explain the rules and conditions for each of the applicable programs so that you can make an informed choice.
2. A community resource guide. This is a list of other agencies, programs, and assistance that may be available to you. If HRRC does not offer programs and services to meet your needs, your counselor will help to connect you with other sources of assistance.
3. A model bid packet. Your counselor will help you determine your repair needs – once you know what needs to be done, you can begin seeking bids. HRRC will not select the contractor! We do not endorse or recommend particular contractors, but we do provide a range of information and resources to help you find experienced and professional contractors. Make sure you go through the bid checklist—your HRRC counselor will need copies of written bids, registrations, insurance and bonding information before we can green-light a project.

If you have been referred to us by the court, do not waste time. We cannot report to the court of your progress if there is none. Also, do not delay until the day before court to initiate the process. This is not a favorable way of proceeding in the eyes of the court.

Please let us know if you have questions by calling 216-381-6100.

Sincerely,

HRRC Counselor



2520 Noble Rd. Cleveland Heights, Ohio 44121

216-381-6100

HOME REPAIR RESOURCE CENTER PROGRAMS

216-381-6100 or www.hrrc-ch.org

Challenge Fund- Financing for homeowners who do not qualify for bank loans (due to credit problems or other reasons). HRRC potentially backs bank loan to make financing possible. Maximum \$5,000; secured by a mortgage

Assist 0% * - Grant covers the interest cost of bank financing; makes bank loan like a no-interest loan. Applies to the Challenge Fund or a Conventional Loan, through HRRC's Financial Assistance Program.

Assist Incentive Grant* - \$1000 grant to reduce the cost of four major repairs (roof replacement, heating system, footer drains, full exterior paint and masonry tear down/rebuild).

Deferred Loan Match*- Deferred loan for half of the cost of, roof replacement, heating system, full exterior paint and masonry tear down/rebuild, footer drains, storm or sanitary sewer, or heating system; 0% interest; no monthly payment; loan secured by mortgage.

Senior Grant*- For community members who are 62 years or older. \$1500 grant that is used with our other financial assistance programs that can be used towards the replacement of a roof or furnace.

Senior Home Stability Grant* - 50/50 Grant –Pays half of the cost of a repair up to \$1000. For repairs that positively impact upon the health and safety of seniors. HUD Guidelines apply.

Classes & Advice - Hands-on Classes that build do-self repair skills and repair advice

Tool Library*- Ladders, chain saws, electric snakes and many other hand & power tools to borrow.

Resource Library - How to books, DVD's & videos and handouts; contractor evaluations and contract specifications for specific repairs.

CITY OF CLEVELAND HEIGHTS PROGRAMS -- Information available through HRRC

No Interest Loan* - Loan of \$8500- \$35,000; 0% interest; 15 year term; low monthly payment; no prepayment penalty; loan secured by mortgage

Emergency/Short Term Deferred Loan*- Loan of up to \$7500 for emergency repairs to correct health/safety violations; no payment for up to 2 years while 5% simple interest accrues; Must have owned the home for 3 years.

Lead Safe Grant*- Grant of up to \$9,500 to remove lead hazards; household must include a child 5 years old or younger; no repayment required. **Clients are able to apply for this program at HRRC.**

For Seniors (age 62 or older) or Disabled Homeowners:

Exterior Paint Grant* - Grant of \$3500 towards the cost of painting; lead-licensed contractor must do painting; applicant must pay costs above the grant (can finance through other programs)



Deferred Loan* - Loan with payment deferred until house is sold or title transferred; no monthly payment; loan maximum is \$35,000; 5% interest for first 5 years only; secured by a mortgage

Violation Repair Program Grant* - Grants of up to \$1000 (\$3000 lifetime maximum) for most exterior violations; reimburses seniors for pre-approved repairs (before contracting the repair)

Below are the current income guidelines. You must at or be below the maximum income for your household size. All adults living in the home that receive Wages, Government Benefits, and Unemployment Etc. must be counted. Adults in the household that have no income will be required to provide a notarized statement to that fact.

2019 Gross Income Limits

Household Size*	Very Low Income	Low Income	Moderate Income
1	\$15,500	\$25,800	\$41,300
2	\$17,700	\$29,500	\$47,200
3	\$21,330	\$33,200	\$53,100
4	\$25,750	\$36,850	\$58,950
5	\$30,170	\$39,800	\$63,700
6	\$34,590	\$42,750	\$68,400
7	\$39,010	\$45,700	\$73,100
8	\$43,430	\$48,650	\$77,850
9	\$47,850	\$51,600	\$82,550
10	\$52,270	\$54,550	\$87,250
11	\$56,690	\$57,500	\$92,000
12	\$60,450	\$60,450	\$96,700

FY 2019 Median Family Income \$ 73,700 Effective Date June 1, 2019

*For households larger than 12, go to: www.huduser.gov or contact : Brian Iorio at (216)291- 4845 or biorio@clvhts.com .



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FAP/SRP Application

Document Checklist

Income Documents

- Two months of paystubs for every working household member, or
 - Most recent benefit award letter (Social Security, etc.....), or
 - Pension statement & continuation letter (Ask your Pension Administrator for this)
- Copies of 2 most recent Federal Income Tax Returns and all W-2 and 1099 forms for those years (if you are not required to file, contact your HRRC counselor for a IRS form 4506T)

Expense Documents

- Most recent mortgage statement(s) and payment statement(s) for all mortgages
- Two months of bank statements (all accounts)
- Most recent Utility bills (Gas &

Application Forms

- Budget worksheet.** When completing the budget worksheet make sure you include everything and are as exact as possible. The more accurate the budget is, the faster we can process the application.
- Counseling Authorization.** This document explains the terms of counseling, and provides authorization for HRRC to begin counseling services. Please review this form. Your HRRC counselor will answer any questions you have about it. You will need to sign this document to receive HRRC counseling services.
- Privacy Policy** – This document explains HRRC's privacy policy.
- Lead Form** – This form confirms that you have been made aware of the hazards of lead based paint. And have been given a



Electric)

lead booklet which also describes the hazard and remediation methods.

Insurance Documents

A copy of your current homeowner's insurance declaration page (This is sent once a year telling you about your coverage; you can obtain a copy from your insurance agent) This also applies to any rental or other real property owned.

Third party Authorization - This form allows for open communication between the lender and your counselor when necessary, for the completion of a project where bank financing is included in the work plan.

INFORMATION SHEET **Referred By: _____ Date: _____

Household/Home Information ___ LMI ___ AMI

Last Name: _____ First Name(s): _____ / _____

Address: _____ Single ___ Double ___ Year Built _____

Phone: (home) _____ (work) _____ / _____ Note: _____

Email address: _____

Ages: ___ / ___ Date of Birth: ___ / ___ Soc. Sec. #: ___ / ___

Marital Status: _____ # of Dependents ___ Ages: _____

Others in Home (do they contribute?): _____

Repair Work (explain MPS process)

Cited? ___ yes ___ no If violations remain, status: ___ Inspections ___ Housing Court

Work to be Done (if ASSIST-need contractor ID #)	Cited?	Contractor Selected	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Bids: _____ **Total Cost \$** _____

Purchase/Financing/Value

Years Owned: _____ Type Purchase: _____



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Purchase Price \$ _____ Amount Down \$ _____ Amount Financed \$ _____

Current Mortgage Holder: _____ Interest Rate ____ % (fixed __ variable __)

If refinanced (date/amount refinanced/reason/# times) _____

Included in Mortgage: property taxes _____ property insurance _____

Titleholders (list all): _____

Title clear? _____ If no, list all other Mortgages/Liens (original amount/balance/purpose/lender):

County Tax Value: \$ _____ Other Value \$ _____ specify: _____

Income Property

Years Owned: _____ Type Purchase: _____

Purchase Price \$ _____ Amount Down \$ _____ Amount Financed \$ _____

Current Mortgage Holder: _____ Interest Rate ____ % (fixed __ variable __)

If refinanced (date/amount refinanced/reason/# times) _____

Included in Mortgage: property taxes _____ property insurance _____

Titleholders (list all): _____

Title clear? _____ If no, list all other Mortgages/Liens (original amount/balance/purpose/lender):

County Tax Value: \$ _____ Other Value \$ _____ specify: _____

Rental Income \$ _____ Per month

Expenses: Taxes _____ Per Half Utilities _____ Services _____

Employment Information

Head of House Employer: _____

Address: _____

Position: _____ # Years _____

Notes—job security/layoff/seniority/job reference and phone etc.:

If new job, previous employer (position/time there/reason for leaving):



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Spouse Employer: _____

Address: _____

Position: _____ # Years _____

Notes—job security/layoff/seniority/job reference and phone etc.:

If new job, previous employer (position/time there/reason for leaving):

Income Information

Head of House	Average Gross/pay	Average Net/pay	Gross/year	Net/Month
# pays per year _____ \$ _____	\$ _____	\$ _____	\$ _____	
Other pay (overtime/bonus etc.) Source: _____ amount included: \$ _____				
List special deductions (loans etc.): _____				
<i>Calculation:</i>				total \$ _____

Spouse	Average Gross/pay	Average Net/pay	Gross/year	
# pays per year _____ \$ _____	\$ _____	\$ _____	\$ _____	
Other pay (overtime/bonus etc.) Source: _____ Amount included: \$ _____				
List special deductions (loans etc.): _____				
<i>Calculation:</i>				total \$ _____

Other Income:	Source	Documentation	
1)	_____	_____	\$ _____
2)	_____	_____	\$ _____

TOTAL NET/MONTH \$ _____

Gross Annual Income	Note: for household size of _____, maximum income is \$ _____
Projected Current Year Gross: \$ _____	Applicant is AMI _____ LMI _____



Income Stability

Has applicant(s) income been reasonably steady the past 5 years? If not, explain:

Credit History

Is applicant's credit established and satisfactory: yes ___ no ___

If credit is satisfactory and application is for the Challenge Fund, reason for guarantee: _____

If applicant has credit problems, check all that apply:

___ previous slow pay (paid or being paid regularly) ___ current slow pay on credit (or some w/no payments)
___ suits ___ judgments ___ bankruptcy (___ Chapter 7) (___ Chapter 13: completed? ___/___%)

Explain what happened to cause credit problems, when problems began, what will prevent reoccurrence, and note creditors involved. If bankruptcy, note if/when discharged (and if Chapter 13, percent of debt paid):

Miscellaneous Information

Assets

Checking Account: ___ If yes, location _____

Savings Account: ___ If yes, location _____ balance: \$ _____

(include credit union) location _____ balance: \$ _____

Retirement Pension/Savings, if yes specify: _____

Other Assets (own another property etc.): _____

Automobile

Make/Year of car _____ paid for ___ car loan/lease ___

Make/Year of car _____ paid for ___ car loan/lease ___

Medical Insurance

Yes ___ No ___ If yes, provided: through work ___ pay on own ___ other _____

Are all in household covered? _____

Monthly Debt Obligations (mortgages, loans, charges, tax payments—all bills):

Creditor	Pay/Mo.	Balance	Original	Purpose	Current
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____



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_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	\$ _____	_____	_____

Total monthly debt \$ _____

• Are State/Federal taxes current? _____ If not, status ? _____

• Co-signed Loans (if balances): For whom/purpose _____

Creditor _____ Balance \$ _____ Current/paid well ? _____

Taxes CH Income Tax \$ _____ Balance, if any \$ _____

Property Taxes \$ _____ (if not paid in mortgage)

Total Taxes \$ _____

Utilities Average/month Balance

Gas (Dominion) \$ _____ \$ _____ Budget payment: yes ___ no ___

Telephone/Internet Service \$ _____ \$ _____

Electricity \$ _____ \$ _____

C.H. Water \$ _____ \$ _____

Regional Sewer \$ _____ \$ _____

Total Utilities \$ _____

Insurance - Amount/month

Homeowners Insurance \$ _____

Life Insurance \$ _____

Disability Insurance \$ _____

Automobile Insurance \$ _____

Medical Insurance \$ _____

Total Insurance \$ _____

Living Expenses

\$ _____ Groceries/Household Supplies (everything at grocery store)

\$ _____ Car Repairs _____ Gas for Car _____



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- \$ _____ Clothing: Adult _____ Children _____
- \$ _____ Child Care/Babysitting/Preschool
- \$ _____ Children's Expenses (Activities / Allowance / Bus Fare / Recreation / School Supplies / Lunches)
- \$ _____ Cable T. V.
- \$ _____ Cell Phones
- \$ _____ School Tuitions (including help for kids in college)
- \$ _____ Bus Fare/Parking at Work
- \$ _____ Adult Spending (work related—lunches etc.)
- \$ _____ Medical (doctor/dentist/co-pays/deductibles)
- \$ _____ Prescriptions/Medications
- \$ _____ Dry cleaning/Laundry
- \$ _____ Drug Store Items (if not in groceries)
- \$ _____ Hair Care
- \$ _____ Gifts (birthdays/all religious holidays, etc.)
- \$ _____ Newspapers/Magazines
- \$ _____ Contributions (religious/other)
- \$ _____ Recreation
- \$ _____ Household Misc. (pet expenses/minor repairs/
license plates/driver's license, etc.)
- \$ _____ Misc., *if applicable* (cigarettes/alcoholic beverages/
adult pocket money/lottery spending, etc.)

\$ _____ Living Expenses + \$ _____ Debt (page 1) = Total Expenses \$ _____

SUMMARY OF INCOME & EXPENSES

Net Income - Debt/Expenses/Savings = Funds Available

NET INCOME:	Source	Average/month	Total NET INCOME	\$ _____
_____		\$ _____	minus -Total EXPENSES	\$ _____
_____		\$ _____	Net Cash:	\$ _____
_____		\$ _____	-set aside for Savings	\$ _____
_____		\$ _____	= Funds Available	\$ _____

I/we have reviewed the information herein and it is correct to the best of my/our knowledge. I/We authorize you to discuss the information with the bank, with HRRC's Loan Review Committee, and with Housing Inspections or Housing Court, if applicable.



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Signature _____ Date: _____

Signature _____ Date: _____

Lead Certification

Applicant's Name:

Address: _____ single-family two-family

(If double, tenant form to be completed)

Lead-based Paint Warning: "Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not taken care of properly. Lead exposure is especially harmful to children and pregnant women."



1. Year house built _____ Prior to 1978? yes no

2. Are there children in the household age 5 or younger? no yes

Child's name (if age 5 or younger)

Has testing been done?

Existing elevated blood lead level?

yes no
 yes no
 yes no

yes no
 yes no
 yes no

3. Has paint testing, a lead inspection, or a risk assessment been performed at the property?

Paint testing yes no Lead Inspection yes no Risk Assessment yes no

(For any "yes" response, a copy of the report must be provided to Home Repair Resource Center as part of the application.)

To Home Repair Resource Center:

I/we certify that the above information is true; that I/we have been told about the dangers of lead-based paint and have been given a copy of the booklet "Protect Your Family From Lead in Your Home" from the EPA; and, if there are children in the household age 5 or younger.

Signed: _____

Date:

Authorization for Counseling

This documents the certification that I, _____, am applying to be a client of Home Repair Resource Center (HRRC), a HUD approved housing counseling agency, for the following service(s).

Pre-purchase Counseling
(Plan to purchase a Home)
(Budget/Credit Counseling)

Post-purchase Counseling
(Plan to get repairs on home)

Foreclosure Intervention/Prevention Counseling
(Educates homeowners who are in default by assisting them to take steps to prevent foreclosure)



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(Plan to re-finance)

Tool Loan Program
(Income eligible program for Cleveland Heights Residents)

Project Repair Classes
(Hands-on classes for teaching home repairs)

Financial Assistance Programs
(Loan program for major home repairs – Cleveland Height residents only)

I am voluntarily submitting personal information and identification of various documents and other financial information necessary for review and analysis of my case by HRRC financial/foreclosure counselor.

I understand that HRRC counselors and staff are not attorneys and do not provide legal advice or services.

I understand and acknowledge that counseling I received from HRRC is advice only. I am solely responsible for my decisions about my finances. HRRC does not guarantee a successful result.

I agree that HRRC is authorized to do any/all of the following:

- Run my/our credit report
- Submit my/our file for review
- Open my/our file for review for program monitoring and compliance
- Make follow-up contacts with me for program evaluation purposes

I acknowledge that I have received a copy of HRRC’s Privacy Policy Statement.

HRRC DISCLOSURE: HRRC does not have any financial relationships with any for-profit or non-profit organizations. I/we understand I am not obligated to receive any other services offered by HRRC or its exclusive partners as a condition of participating in counseling.

CLIENT: _____ CLIENT: _____

DATE: _____ DATE: _____

Received over the telephone by HRRC Counselor, _____ Date: _____

Notes or Comments: _____



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CUSTOMER CREDIT AND TITLE INFORMATION EXCHANGE RELEASE

Regarding the Loan Application of:

To: _____ Bank

You are hereby authorized and directed without notice to discuss and exchange credit information with Home Repair Resource Center staff concerning the Bank's acceptance or declination of financing. By furnishing the information requested by this letter, you shall not be construed to be a Consumer Reporting Agency within the meaning of the Fair Credit Reporting Act.

Applicant's Signature

Date: _____

Applicant's Signature

Date: _____

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Privacy Policy



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The Home Repair Resource Center (HRRRC) has developed this privacy policy to assure our clients that personal information collected will be treated with a high level of confidentiality, and will only be used for program related purposes.

HRRRC strictly protects the security of your personal information and honors your choices for its intended use. HRRRC has established and maintains reasonable procedures to protect the confidentiality, security and integrity of your personal information. HRRRC carefully protects your data from loss, misuse, and unauthorized access. Your personal information is never shared outside the agency without your written authorization.

HRRRC will not sell your personal identifiable information to anyone.

HRRRC will send you unsolicited information including emails, flyers, event announcements, and newsletters, unless you advise us that you do not want to receive these types of correspondence.

If you have any questions about our privacy policy, please call our office at 216-381-6100.

The Home Repair Resource Center reserves the right to change this policy whenever deemed necessary without prior notification.

Client Signature

Date

Client Signature

Date



Model Bid Packet

All projects under HRRC's Financial Assistance Program and/or Senior Repair Program require at least three documented bids.

A documented bid includes the following:

- The contractor's name, physical address, and telephone number
- A written and itemized scope of work, including the work to be done, the quality/type of materials to be used, and a breakdown of the materials and labor involved.
- Agreement by the contractor to obtain all necessary permits and to do all work in compliance with local code.
- Specification of what, if any work will be subcontracted, and the name, address, and telephone number of all subcontractors to be used.
- Estimated start date and completion date.
- A copy of the contractor's registration with the City of Cleveland Heights.
- A copy of the contractor's general liability insurance policy and workers' compensation coverage, and/or that of any subcontractors, if applicable.
- A copy of the contractor's bond.

Addendums: Addendums are supplemental to the estimate and are for verification of specific issues within the scope of the project. The addendum does not take the place of a written estimate. Copies of the addendums are available from your counselor and are specific to major repairs. (Roofs, Driveways, Painting, Carpentry Repairs, Masonry Etc.)