

**Wayne County
CDBG Housing Rehabilitation Program
Application for Housing Rehabilitation Deferred Loan**

CITY OF ROMULUS - General Applicant Information

Name: _____ Social Security #: _____
 Spouse: _____ Social Security #: _____
 Address: _____
 City: _____ State: MI Zip Code: _____
 Applicant's Age: _____ Spouse's Age: _____
 Home Telephone #: (____) _____ Work Telephone #: (____) _____

Please provide the following information for each ADDITIONAL person currently living at this address:

	Name	Age	Relationship
Person 1	_____	_____	_____
Person 2	_____	_____	_____
Person 3	_____	_____	_____
Person 4	_____	_____	_____

Please indicate the following regarding the family:

- White Asian Female Head of Household
 Black Aleutian or American Indian
 Hispanic

Mortgage or Land Contract Holder:

Current Mortgage or Land Contract Payment: _____ per month
 Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Telephone: (____) _____

Homeowner Insurance

Name of Provider: _____ Policy Number: _____

For Office Use Only

Emergency Action Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No State Equalized Value: \$ _____ Date House was Built: _____ Type of Ownership: <input type="checkbox"/> Warranty Deed <input type="checkbox"/> Quit Claim Deed <input type="checkbox"/> Land Contract (please provide date of land contract) _____ <input type="checkbox"/> Divorce/Judgment	Please indicate any outstanding amounts due below: Property Taxes: \$ _____ Water: \$ _____ Special Assessments Owed: \$ _____ Mortgage/House Balance: \$ _____ Other: \$ _____ Specify: _____
Current Monthly Housing Payment: \$ _____ Current Annual Household Income (from Household Income Worksheet): \$ _____	Income Status <input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate < 30% 30 – 50% 50 – 80%

Household Income Worksheet

Please enter all regular monthly income, for EVERY person over the age of 18 living in the house, in the appropriate columns below. Documentation may be requested at a later date to verify the information provided.

Anticipated Income					
Family Members	Monthly Wages/Salaries	Monthly Benefits/Pensions	Monthly Public Assistance	Other Monthly Income	
				Amount	Specify
Applicant					
Spouse					
Person 1					
Person 2					
Person 3					
Person 4					
Monthly Totals	a.	b.	c.	d.	
Total Monthly Anticipated Income (add a, b, c, and d and enter the result in e.)				e.	
Total Annual Anticipated Income (multiply e by 12 and enter result in f)				f.	

Please enter information about all assets, not including your house, in the table below.

Asset Income			
Family Member	Asset Description	Current Cash Value of Asset (if asset does not generate income)	Actual Annual Income from Asset (if asset generates income)
Net Cash Value of Assets (add all numbers in the column above g)		g.	
If g is more than \$5,000, multiply g by 0.02 and enter the result in h otherwise leave h blank		h.	
Total Actual Income from Assets (add all numbers in the column above i)			i.

Total Annual Income	
Total Anticipated Annual Income from f	
Total Expected Asset Income from h	
Total Actual Income from Assets from i	
Total Annual Income (add f, h, and i)	

Please indicate employment information for applicable persons below

	Employer	Contact Name	Address	Telephone
Applicant				()
Spouse				()
Person 1				()
Person 2				()
Person 3				()
Person 4				()

Homeowner Education Regarding The Occupant Protection Requirements from Lead-Based Paint Hazards

As of September 15, 2000, the U.S. Department of Housing and Urban Development (HUD) requires that efforts are taken to protect the occupants and workers from exposure to lead-based paint dust during Community Development Block Grant (CDBG) funded housing rehabilitation activities (24 CFR 35). Although the primary purpose of the CDBG Housing Rehabilitation program is to correct physical deficiencies within the house, these protection efforts are required at all times and directly related to the amount of federal funds involved in the housing rehabilitation projects.

Please complete the survey below. By completing this information, local administrative and technical staff will be better able to guide you through the Wayne County CDBG Housing Rehabilitation Program. Answers to any of the questions within this section will in no way affect your eligibility to participate in the program.

Is there lead-based paint in my house?

Lead-based paint was banned from use in residential construction in 1978. In general, the older your home, the more likely it has lead-based paint, but if your house was built before 1978, you may have lead-based paint in your home.

The only accurate method for identifying lead-based paint is to have a state-certified lead inspection completed by a certified lead inspector. This inspector can supply an inspection report that indicates all the painted surfaces containing lead-based paint.

What year was your house constructed? _____

If there is lead-based paint in my house, is there a hazardous situation?

Lead-based paint alone is not a hazard, however, if the paint is worn down or starts to decompose, it can start generating hazardous lead dust. Lead dust is not visible to the eye. In fact, the State of Michigan requires that a certified lead assessor perform technical tests that indicate the presence of lead dust. The results of this test are documented into a lead risk assessment.

Although you cannot tell if there is a lead hazard present without a state certified risk assessment, there are some circumstance and activities that increase the chances of a hazard being present.

Are there defective interior/exterior surfaces (i.e. chipping or peeling paint)? Yes No

Have you, within the last five (5) years, disturbed a painted surface within your house (i.e. sanded or scrapped the paint)? Yes No

Who is most at risk from exposure to lead dust?

Lead dust can pose a serious danger to everyone living in your house. Kids are the most at risk when exposed to lead dust. Their smaller bodies cannot take as much exposure. Additionally, their bodies and most importantly nervous system are still developing. Lead dust exposure can have permanent negative affects.

The best way to determine whether your children have had a long-term or significant exposure to lead-dust is to get a physician to test the lead levels within the child's blood.

Are there children under age seven (7)? Yes No

Have all children under age seven (7) had their lead blood levels tested by a physician?

Yes No

If no, this may be a requirement to participate in parts of the Wayne County Housing Rehabilitation program.

The City of Romulus requires all children in a household under age 7 to have their lead blood levels tested prior to participation in the Housing rehabilitation program.

If you are interested in having your children's blood-lead levels tested, Wayne County Community Development recommends that you contact your family doctor.

If yes, do any children under seven (7) have Elevated Blood Levels (EBLs)? Yes No

Where can I obtain more information?

Several agencies offer additional information regarding lead-based paint and lead poisoning. Below is a list of agencies to contact to obtain more information regarding lead-based paint.

Detroit Lead Poisoning Control Program
(313) 876-4200

Children's Hospital of Detroit
Lead Clinic
(313) 745-4000

State of Michigan,
Department of Community Health,
Childhood Lead Poisoning Project
(517) 335-8885

CDBG Occupant protection requirements

The lead-based paint hazard protection efforts require the program to be structured into four individual components listed below. *At the appropriate time, you, as the participant, will be asked to sign a “declaration” indicating in which of these four levels you will participate in.*

- 1) **Emergency Cases** – In emergency cases, **only work that will remove the emergency situation will be performed.** Emergency conditions exist only when circumstances directly threaten the health safety of the occupant. ONLY the local community representative may identify an emergency situation. If an emergency situation is determined, the following conditions apply:
 - The occupant/owner will be required to complete and sign an *Emergency Declaration*.
 - The homeowner will receive a pamphlet entitled “*Protect Your Family From Lead in Your Home*”
 - The occupant shall make every effort to not be present on the worksite while emergency work is being performed.
 - At the conclusion of emergency related work, all other work will be subject to the rules and regulations of the non-emergency housing rehabilitation program.
 - Level 2, 3 or 4 protection level will be required on ALL non-emergency related work to be performed on the house.

- 2) **Lead-Based Paint Exempt Activity** – In situations where ALL non-emergency housing rehabilitation activities are limited to exempt activities, as identified by HUD (i.e. no paint will be disturbed, limited roof repairs, furnace replacement, horizontal plumbing or sewer repairs), the following conditions will apply:
 - The occupant/owner will be required to complete and sign a *Lead-Based Paint Exempt Declaration*.
 - The homeowner will receive a pamphlet entitled “*Protect Your Family From Lead in Your Home*.”
 - ALL work being performed on this house is limited to the activities identified in the Declaration.
 - After completion of the exempt repairs, the house will be ineligible for further consideration within the program except when unanticipated emergency conditions arise.

- 3) **Activities under \$5,000** – This component applies to non-emergency housing rehabilitation cases in which ALL work on the house will involve between \$0 and \$5,000 in Federal funds and ANY work disturbs painted surfaces. HUD requires a “do no harm” approach, in which controls are identified and implemented so as to prevent the cause of new lead-hazards resulting from the housing rehabilitation work. The following conditions will apply:
 - The occupant/owner will be required to complete and sign an *Activity Under \$5,000 Declaration*.
 - The owner/occupant will be required to receive lead-based paint brochure.
 - ALL painted surfaces, within EACH room where rehabilitation work will be performed, will be tested for lead content, by a State-certified Lead Inspector prior to the start of any work.

- Appropriate efforts will be planned and implemented to prevent Lead-Based Paint Hazards resulting from the work.
- At the conclusion of all housing rehabilitation activities, acceptable dust clearance levels, as defined by HUD and as documented by a state certified professional, will be required for each room that work was performed.
- The owner/occupant will receive all documentation of these lead-related protection efforts and will be required by state law to fully disclose this information to any future owner of the home.
- Lead-based paint testing will be required in any room or area that work will be performed.
- Voluntary relocation may be involved.

4) **Activities Between \$5,000 and \$25,000** – This component applies to non-emergency housing rehabilitation cases in which ALL work on the house will involve between \$5,000 and \$25,000 in Federal funds and ANY work disturbs painted surfaces. HUD requires an “identify and control lead hazards” approach, in which all lead-based paint hazards, within the house and on the property, are identified and controlled. The following conditions will apply:

- The occupant/owner will be required to complete and sign an *Activity Between \$5,000 and \$25,000 Declaration*.
- The owner/occupant will be required to receive lead-based paint brochure.
- Through this component, a complete Lead Inspection/Lead Risk Assessment for the property will be performed by a state certified professional(s).
- **ALL** lead hazards will be controlled by, at a minimum, an interim control method. Additionally, this work will have priority and will be completed before any other work is started on the house.
- At the conclusion of both the lead-hazard control related activities and again after the conclusion of all housing rehabilitation activities, acceptable dust clearance levels, as defined by HUD and as documented by a state certified professional, will be required for each room that work was performed.
- The owner/occupant will receive all documentation of these lead-related protection efforts and will be required by state law to fully disclose this information to any future owner of the home.
- Lead-based paint testing will be required on the entire property, and any hazards identified must, at a minimum, be removed temporarily.
- Voluntary relocation may be involved.

At all times, the primary purpose of Wayne County CDBG Housing Rehabilitation Program is the physical rehabilitation of the housing units. As required by HUD regulation (24 CFR 35) these efforts are being undertaken only as protective measures from lead-based paint hazards and at no time are meant to assume neither the responsibilities nor the primary activities of a lead-based paint abatement program.

In cases where too many lead hazards exist in the house, your local community may refer you to a lead-based paint abatement program prior to any work being performed.

Wayne County Housing Rehabilitation Loan Subordination Policy

General Requirements

Subordination requests will only be considered if the homeowner is in a dire situation, such as a medical emergency or the possibility of losing the home, or if the re-mortgaging is only to pay off the mortgage balance to reduce the homeowner's monthly mortgage payment and no additional monies will be received by the homeowner.

Homeowner Requirements

Provide the local community with updated financial information to determine eligibility.

Provide full and complete information as to the terms and conditions of the re-mortgaging, including the value of the property, the balance due on any mortgage which is prior in position to that of the community's lien and the value of any subsequent and resulting mortgage or other liens which would appear first in priority before the community.

Provide the community with a certified appraisal from the mortgagee as to the value of the property.

Provide the community with a written request for a subordination agreement, stating the reason for the request.

Provide the community with a letter from the new mortgage company stating it will not take second position for pay-off and include the amount of the new mortgage.

Community Requirements

The community will submit to the County a written request indicating their support of the lien subordination, along with the above data collected from the homeowner.

The County will respond in writing within 10 days of receipt of community's request, provided that no additional information is required from the community, Mortgage/finance Company or homeowner.

City of Romulus Subordination Policy

The City generally **will not** agree to subordinate its position. In some cases, if the **existing homeowner** wishes to refinance only the current outstanding balance due and owing on a mortgage for the purpose of securing a lower interest rate or a hardship exists in which the refinancing is necessary to pay back taxes on the property, a subordination may be obtained with the Mayor's permission.

Subordination policy and agreement may be obtained from the Community Development Dept.

Owner Request For Repairs

Please list in order of your preference the work that you would like to see done to your house. Please keep in mind that the Wayne County Housing Rehabilitation Program will be performing other work, not necessarily included in this list, in an attempt to bring the house up to code.

In addition, your home will be inspected by the local community for code violations. These code violations will take precedence over your requested repairs.

Priority #	Description Of Work	Location Of Work

Penalty For False Or Fraudulent Statements:
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 falsifies . . . or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

I (WE) HEREBY CERTIFY that all the information supplied in this application is TRUE AND COMPLETE to the best of my (our) knowledge and do GRANT PERMISSION to the County of Wayne to obtain PROOF (including the verification of financial accounts) of any information contained herein in order to determine program eligibility.

I (WE) FURTHER grant permission to the County of Wayne to undertake the following: make inspections of the property described above; estimations and bidding by private contractors; and inspections of the property for program monitoring purposes by any governmental agency.

SIGNATURE: _____ DATE: _____

SPOUSE/Co-Owner: _____ DATE: _____

G:\CDBG\program\MANUALS\Housing Rehabilitation Manual\2001\Forms\Application 020501.doc