

Town of Easton

Home Repair Program



Information & Application Packet



Easton Home Repair Program

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Easton Home Repair Program

Overview

Thank you for your interest in the Easton Home Repair Program. This program is offered by the Town of Easton Affordable Housing Trust to assist homeowners at low and moderate income levels. Assistance is provided to help owners to continue to afford to live in their current homes.

QUICK SUMMARY:

- This program awards cash assistance in the form of grants of up to \$4,500 to assist qualifying homeowners with the cost of home repairs.
- Grants need not be repaid provided that homes undergoing repair are not sold within one year of receipt of grant.
- Applicants must meet income eligibility requirements and the homes undergoing repair must meet assessed value requirements.
- Applicants must submit three recent quotes from qualified contractors for the work proposed.
- Work must be approved by the Town – building permits closed out or, if permits not required, work certified as satisfactory – before final payments are released.
- In the initial round of grants, the program will assist at least eight households.
- Participants in this program are selected based upon the Town's assessment of need and the urgency of the repair for which assistance is requested.

DETAILS:

Complete program details are contained in this package. Please read carefully, especially concerning your eligibility and the requirements of program participants.

CONTACT US:

The program is administered by Easton's Department of Planning & Community Development. For further information or with questions, please contact:

Wayne Beitler, Community Planner
(508) 230-0645 or wbeitler@easton.ma.us

Easton Home Repair Program

Eligibility

- Owners of existing homes on parcels located entirely in the Town of Easton, MA are eligible for this program. A home undergoing repair funded through this program must be the domicile and principal residence of the applicant.
- Combined annual income for applicant household members is required to be at or below the income limits listed below¹.

Household Size	1	2	3	4	5	6
Income Limit	44,750	51,150	57,550	63,900	69,050	74,150

- Applicants must be current on mortgage payments or own their homes outright.
- Individuals who have a direct relationship to the Easton Affordable Housing Trust Board or who have a spouse, sibling, parent or child with such a relationship are not eligible to participate in the Program.
- The current assessed value for homes undergoing repair in the Program must be at or below the median assessed value as listed below². Current assessed values are available from Easton's Assessors' Office.

Single-Family House	\$362,800
Two-Family House	\$320,800
Condominium	\$161,109

- Repairs funded through the Program must be intended to improve home functionality or occupant health and safety. Cosmetic improvements will not be funded. The Easton Affordable Housing Trust will determine the eligibility of repairs in its sole discretion.

¹ Income is determined using the method in the HUD Section 8 program (defined at 24 CFR 5.609). Income limits are subject to change based upon receipt of new data.

² These values are subject to change

Easton Home Repair Program

Grants

- Grants provided through the Program are intended to cover or reduce the cost of home repairs, helping owners to continue to afford to live in their current homes.
- Grants may be offered in any amount up to \$4,500 at the sole discretion of the Easton Affordable Housing Trust. Total project costs must not exceed \$10,000. In cases where the total project cost is less than \$4,500, the participant household is NOT entitled to any cash amount difference between the actual grant amount and the maximum grant amount.
- Structures undergoing repair funded through the Program must not be subject to a determination by a government authority that the structure is either condemned as unfit for human occupancy or an imminent threat to public health and safety.
- For condominiums, grants may be used to fund: interior repairs; exterior repairs when such repairs are not the responsibility of a condominium association; and special assessments to the qualifying homeowner for major capital improvements in the condominium development. Applicants living in condominium units will be required to provide written documentation from their condominium association to substantiate their application.

Easton Home Repair Program

Application & Selection Process

1. When received, applications are dated and checked for completeness. Applications are considered complete when all required items on the Application Checklist are submitted.
2. Applicants will be notified of any missing items by email or phone call first and then by letter if no response has been received after 5 days.
3. Complete applications are reviewed to determine that applicant households are eligible to participate
4. Applicants deemed ineligible will be notified in writing and may contact the program in writing to comment on the determination. Determinations will be reviewed provided that comments are received before the application deadline.
5. Applications received after the application deadline will not be considered.
6. Participants are selected based on their apparent level of need and the apparent urgency of the repair for which assistance is requested. Selection is made by a majority vote of the Easton Affordable Housing Trust. Personally-identifiable information will not be included in materials submitted to the Trust for review. The decisions of the Trust may, by necessity, be relative and subjective. Participant selection is made at the sole, final discretion of the Trust.
7. In the event that a selected participant is unable to have repairs completed within the allotted time frame, does not comply with guidelines, or withdraws for any other reason, another qualified applicant *may* be offered the grant opportunity. If the returned grant is for a larger amount than the next selected participant qualifies for, the grant will be reduced accordingly. If the returned grant is smaller than the newly-selected participant qualifies for and no additional program funds are available, only this smaller grant amount will be made available.
8. Additional grants may be offered on a first-come, first-served basis to new applicants if funds are available after all applicants submitting applications by the application deadline have been considered.

Easton Home Repair Program

Funding Process & Guidelines

- Applicants will be notified by Easton's Department of Planning and Community Development of the decision of the Affordable Housing Trust on their application.
- Participants are given 90 days to have the subject work completed. At the discretion of the Easton Affordable Housing Trust Fund or its designee, extensions of up to 90 days may be granted. Extensions will be granted only when circumstances outside of a participant's control have prevented work from being completed before their deadline. The participant may be required to provide documentation to demonstrate that good-faith efforts toward project completion are underway.
- Up to one third of an awarded grant may be applied to contractor deposits before the start of work. An additional one third of an awarded grant may be used for contractor payments while work is underway. For projects with total costs exceeding \$4,500, any amount exceeding \$4,500 must be applied to deposits or charges incurred before the project is complete before grant funds are used.
- Work must be approved by the Town – building permits closed out or, if permits not required, work certified as satisfactory – before final payments are released.
- Invoices from participants' contractors may be submitted for direct payment from the Town. Three or more weeks may be needed for checks to be issued. In consultation with program staff, participants may instead choose to pay contractors from their own funds, and submit copies of invoices/receipts with proof of payment (usually a copy of the front and back of a cancelled check) for reimbursement. Note that program staff or their designee must review project progress or completed work, as applicable, before contractors are paid.
- Applicants must provide access to their property upon reasonable notice to program staff and program contractors to confirm that work is completed satisfactorily and in accordance with contracts and applicable regulations.
- Grants offered through this program are not intended to improve the resale values of homes. To ensure compliance with this requirement, dischargeable liens must be placed upon the subject home. If any home upon which work funded through this program is sold within 12 months of the execution date of the lien, the entire grant must be repaid to the Easton Affordable Housing Trust Fund. Participants must notify the Easton Office of Planning & Community Development if their home is listed for sale within 12 months of the final grant payment.

Easton Home Repair Program

Fair Housing Notice

- Fair housing law at state and federal levels prohibits discrimination in housing on a number of characteristics, including race, religion, color, sex, sexual orientation, familial status, age, handicap, marital status, national origin, genetic information and ancestry. An applicant who believes that he or she has been discriminated against in the selection or funding process may contact: the Massachusetts Commission Against Discrimination (617) 994-6000; and/or the United States Department of Housing and Urban Development (617) 994-8300.

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Application & Forms

Easton Home Repair Program

Application Checklist

Use this to confirm that you have provided all application materials before submitting.

Required Forms from this packet:

- Application
- Applicant(s) Certification

Required Documentation (one copy of each):

- At least one photograph of item or area to be worked upon
- Three quotes from licensed, insured, and bonded contractors for the work to be performed (special Assessments from Condo Associations do not require quotes).
- Federal tax returns for two most recent years filed for all members of the household over the age of 18 (do not send Mass. state taxes).
- W2 and/or 1099-R forms for two most recent years filed for all members of the household over the age of 18.

(continued)

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Application Checklist (continued)

If applicable (one copy of each):

- Five (5) consecutive pay stubs ending within one month of application for all jobs (check/ direct deposit stubs). Must include five stubs whether paid weekly, bi-weekly etc. Provide for all salaried employed household members over 18. For unemployment, copies of unemployment checks or DOR verification stating benefits received.
- Statement or receipt demonstrating current status of mortgage.
- Proof of student status for dependent household members over age of 18 and full-time students.
- Social Security: official statement of monthly amount received for year in review and statement of total amount received for latest tax year.
- Pension: statements indicating amount received for year in review and statement of total amount received for latest tax year.
- Last consecutive three months statements and documents that indicate the payment amounts from all other sources of income of all members listed on the application, such as alimony and/or child support, Workman's Compensation, alimony, disability or death benefits and any other form of income - on organization letterhead
- Documentation regarding current interests in real estate other than domicile & principal residence.
- No Income Statement, signed and notarized, for any household member over 18 with no source of income

NOTE: Additional documentation may be required as a condition of participation in this program. Your application and all related materials you provide will be reviewed by Easton's Department of Planning & Community Development, the Easton Affordable Housing Trust, the Program's consultant and the Program's attorney.

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Application

Applicant Legal Name _____

Phone Number _____ E-mail Address _____

Address _____ Zip _____

Co-Applicant Legal Name _____

Phone Number _____ E-mail Address _____

Address _____ Zip _____

I learned of this program from (check all that apply):

Website: __ Advertisement: __ Other: __

Please provide specifics (for any source): _____

Do you own the unit/property? No Yes

Is the property your primary residence? No Yes

Do you own additional real estate? No Yes

(if yes, please attach a tax bill showing assessed value)

Is there a mortgage on the property? No Yes, balance: _____

Application Deadline: Wednesday, April 30, 2014

(Postmarked by April 29 or delivered to Town Offices by Noon on April 30)

Return completed application and all required documentation to:

Wayne Beitler
Department of Planning & Community Development
Easton Town Offices
136 Elm St.
Easton, MA 02356

If you have questions, please call or email Wayne Beitler: (508) 230-0645 or
wbeitler@easton.ma.us

Easton Home Repair Program

List all members of your household including yourself:

	Names of all Persons Residing in Dwelling (First Name, Middle Initial, Last Name)	Relation to Head	Date of Birth
Head		(self)	
2			
3			
4			
5			

Income

List all income of all members over the age of 18 listed on application residing in the dwelling, such as wages, child support, Social Security benefits, all types of pensions, employment, Unemployment Compensation, Workman's Compensation, alimony, disability or death benefits and any other form of income; including rental income from property. Adults with no income are required to submit a statement to this effect. If you need additional space, please attach another sheet.

	Source of Income	Address & Phone# of Source	Amount per Year
1			\$
2			\$
3			\$
4			\$
TOTAL			\$

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Proposed use of funds - Please describe: the problems you are having that require correction; the work that is needed; and how this grant would be helpful to you (and/or the others in your household). If you need additional space, please attach up to one additional sheet.

Total Project Cost - Provide an estimate of the cost. Attach three quotes from licensed contractors. Special Assessments from Condo Associations do not require quotes. You may include the cost of building permit fees. (Maximum total project cost: \$10,000)

\$ _____

Grant Amount Requested - Please provide the total amount of grant funds you are seeking from this program. (Maximum grant: \$4,500).

\$ _____

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Applicant(s) Certification

I/We certify that our household size is ____ persons, as documented herein.

I/We certify that our total household income equals \$_____, as documented herein.

I/We certify that the information in this application and in support of this application is true and correct to the best of My/Our knowledge under full penalty of perjury. I/We understand that false or incomplete information may result in disqualification from further consideration.

I/We certify that I am/We are not related to members of the Easton Affordable Housing Trust; and that I/we do not have a spouse, child, sibling or parent related to the members of the Easton Affordable Housing Trust.

I/We understand that if contractors do not complete the capital improvements within 90 days after the notification of qualification, I/We forgo the opportunity to benefit from the grant.

If I/We list the property for sale or rent within 12 months of the receipt of the final payment of this grant, I/We agree to notify Easton's Office of Planning & Community Development. If I/We sell or rent the property within 12 months of the execution date of the dischargeable lien, I/We agree to repay all grant funds received. I/We agree to voluntarily place a dischargeable lien on my/our property to ensure compliance with these provisions.

I/We agree to repay all grant funds received through this program to the Easton Affordable Housing Trust Fund should any information I/We supply to the program prove to be false or deliberately misleading, including all application materials.

I/We understand that if I/We are selected to receive a grant, I/We must continue to meet all eligibility requirements of the program until the completion of the related capital improvements. I/We understand that I/We must be qualified and eligible under any and all applicable laws, regulations, guidelines, and any other rules and requirements.

Your signature(s) below give(s) consent to Easton's Department of Planning & Community Development or its designee to verify information provided in this application. The applicant agrees to provide additional information on request to verify the accuracy of all statements in this application. No application will be considered complete unless signed and dated by the Applicant/Co-Applicant.

Applicant Signature

Date

Co-Applicant or Applicant's Spouse's Signature

Date