SOUTHERN HOUSING REGION MANUFACTURED HOUSING REHABILITATION PROGRAM

Please complete the entire application and return it to our office along with all applicable documentation.

COUNTY YOU RESIDE IN? _____ (You MUST complete)

ARE YOU A U.S. CITIZEN OR A QUALIFIED ALIEN?
____YES _____NO (YOU MUST CHECK ONE)

NOTE: A TYPICAL PROJECT OF ROOFING, SIDING AND WINDOWS MAY COST APPROXIMATELY $50,000 - $70,000. Effective immediately, all lead-based paint hazard repairs will be granted to eligible applicants and those costs will not need to be paid back.

The actual cost of each project will vary depending on the scope of work and the size of the home. The program cannot reimburse for work that has already been completed.

You must income qualify for the program and there must be enough equity in the home to complete all the repairs. If you have questions regarding your available equity, please contact us prior to submitting the application.

Return application to:

Southern Housing Region
CDBG Rehabilitation Program
201 Corporate Drive
Beaver Dam, WI 53916
Phone: 800-552-6330 Fax: 920-887-4250
Email: smaier@msa-ps.com

SHR

EQUAL HOUSING OPPORTUNITY

SOUTHERN HOUSING REGION
MANUFACTURED HOUSING PROGRAM APPLICATION

Office Use Only: Application Number _____ Date Received _____

All information contained in this application is strictly confidential.
Please fill out all pages (front and back).

Applicants Name: _____ Age _____

Co-Applicants Name: _____ Age _____
(Note: If you have a fiancé' or significant other living with you, please list here.

Current Street Address: _____
Street Address City State Zip

Mailing Address: (if different) _____
Street Address City State Zip

Phone Number: (Home): _____ (Work): _____ (Cell): _____

Email Address: _____

May we contact you via email? (*circle one*) Yes No

May we contact you at work? (*circle one*) Yes No

TOTAL NUMBER OF PEOPLE LIVING IN THE HOME: _____

LIST ALL PEOPLE WHO LIVE IN THE HOME AT LEAST 50 % OF THE TIME (INCLUDING CHILDREN):

Name	Disabled?	Full-Time Student?	Birth Date	Relationship to You
	☐ Yes ☐ No	☐ Yes ☐ No		Self
	☐ Yes ☐ No	☐ Yes ☐ No		
	☐ Yes ☐ No	☐ Yes ☐ No		
	☐ Yes ☐ No	☐ Yes ☐ No		
	☐ Yes ☐ No	☐ Yes ☐ No		
	☐ Yes ☐ No	☐ Yes ☐ No		
	☐ Yes ☐ No	☐ Yes ☐ No		
	☐ Yes ☐ No	☐ Yes ☐ No		

You are not required to answer the questions below. If you choose not to answer them, please check here._____

Sex of Applicant: _____Male _____Female

Head of Household: _____Male _____Female

Marital Status of Applicant: ____Single ___Married ___Divorced ___Separated ___Widowed

Racial/Ethnic Background, Check One:

_____ White
_____ Black/African American
_____ Asian
_____ American Indian/Alaskan Islander
_____ Native Hawaiian/Other Pacific Islander
_____ Hispanic
_____ American Indian/Alaskan Native & White
_____ Asian & White
_____ Black/African American & White
_____ American Indian/Alaskan Native & Black/African American
_____ Balance of Other

Is this your primary residence? ☐ Yes ☐ No

What type of property is this?

☐ Mobile Home (Sits on a permanent chassis with wheels and can be transportable.)

☐ Manufactured Home (Prefabricated houses that are constructed in a factory and then assembled at the building site in modular sections.)

Do you own the land the home is on? ☐ Yes ☐ No

If you own the land, are the property taxes paid up to date? ☐ Yes ☐ No

Age of home _____

Name(s) on Property Title, if applicable _____

LIST ALL DEBT AGAINST PROPERTY (Example: Mortgages, Land Contract, Lines of Credit, Judgments)

Name of Lender	Loan Number	Original Amount	Balance Due	Term (# of years)	Interest Rate	Type of Loan (WHEDA, VA, Land Contract, Bank, etc.)

**If your home was purchased within the last year, please attach a copy of your appraisal.

HOMEOWNERS INSURANCE

Name of Insurance Co.: _____ Name of Agent: _____

Policy Number: _____ Expiration Date: _____

Phone Number of agent: _____

Address of agent: _____

In order to be eligible, your income must be below the following limits for the county you reside in:

Household Size	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
Columbia	$60,100	$68,700	$77,300	$85,850	$92,750	$99,600	$106,500	$113,350
Dodge	$56,950	$65,100	$73,250	$81,350	$87,900	$94,400	$100,900	$107,400
Jefferson	$62,550	$71,500	$80,450	$89,350	$96,500	$103,650	$110,800	$117,950
Kenosha	$65,700	$75,100	$84,500	$93,850	$101,400	$108,900	$116,400	$123,900
Ozaukee	$60,700	$69,400	$78,050	$86,700	$93,650	$100,600	$107,550	$114,450
Racine	$58,450	$66,800	$75,150	$83,450	$90,150	$96,850	$103,500	$110,200
Rock	$53,800	$61,450	$69,150	$76,800	$82,950	$89,100	$95,250	$101,400
Sauk	$57,750	$66,000	$74,250	$82,500	$89,100	$95,700	$102,300	$108,900
Walworth	$66,600	$76,100	$85,600	$95,100	$102,750	$110,350	$117,950	$125,550
Washington	$60,700	$69,400	$78,050	$86,700	$93,650	$100,600	$107,550	$114,450

IMPROVEMENTS NEEDED (Check all that apply)

☐	Roof	☐	Insulation	☐	Interior Walls
☐	Exterior/Siding/Painting	☐	Furnace	☐	Water Heater
☐	Plumbing	☐	Foundation	☐	Doors
☐	Wiring/Electrical	☐	Windows	☐	Porch
☐	Chimney Repair	☐	Other (explain)		

****Only work that is considered essential and necessary will be permitted. All Lead Based Paint Hazards will need to be corrected. Hazards will be determined upon an initial project assessment of your entire home. All Lead Based Paint hazard repair costs will be granted and will not be included in your loan.**

COMPLETE THE FOLLOWING INCOME/ASSET QUESTIONNAIRE FOR ALL HOUSEHOLD MEMBERS OVER 18 YEARS OLD

Circle Y for Yes, N for No	Income Source	Documentation Required
1. Y N Start Date: _____	Employment receiving wages, salary, overtime pay, commissions, fees, tips, bonuses, and/or other compensation Employer: _____ Phone #:_____ Fax #: _____ Email address:_____ Mailing address:_____	Will need most recent **3 months** of check stubs _____ Name
Start Date: _____	Employer: _____ Phone #:_____ Fax #: _____ Email address:_____ Mailing address:_____	_____ Name
Start Date: _____	Employer: _____ Phone #:_____ Fax #: _____ Email address:_____ Mailing address:_____	_____ Name

2. Y N	Self employed (Describe type of business) _____	Will need copies of last 3 years of Federal Income Tax Form 1040 and applicable Schedules
3. Y N	Unemployment benefits and/or Worker's Compensation.	Will need most recent 3 months of check stubs
4. Y N	Social Security, Supplemental Security Income (SSI) or Disability.	Send most recent benefit statement
5. Y N	Periodic payments from trusts, annuities, inheritance, retirement's funds or pensions, insurance policies. If yes, list sources and whose name is on account: 1)_____ 2)_____	Send most recent documentation $_____ $_____
6. Y N	Income from real or personal property i.e.: interest or dividends	$_____
7. Y N	Alimony/spousal maintenance payments.	Will need most recent 3 months of check stubs
8. Y N	I am entitled to receive Child Support Payments. **If yes, then answer the following**: ☐ I am currently receiving child support payments. (check one) ☐ Weekly ☐ Bi-weekly ☐ Monthly ☐ I am not receiving any child support payments but it is court ordered that I do.	Will need last 3 months of what you have received **and** copy of court order $_____ $_____
9. Y N	Income from a source other than those listed above. If yes, list sources: 1)_____ 2)_____	Will need last 3 months of what you have received $_____ $_____

Circle Y for Yes, N for No	**Assets**	Cash Value/Balance	
10. Y N	Checking account(s). If yes, list bank(s): 1)_____ Interest Rate:_____ 2)_____ Interest Rate:_____	Will need last 6 months bank statements OR a signed statement from bank with 6 month average balance.	**Name on Account** _____ _____
11. Y N	Savings account(s). If yes, list bank(s): 1)_____Interest Rate:_____ 2)_____Interest Rate:_____	Will need most current bank statement $_____ $_____	**Name on account** _____ _____

12. Y N	Certificates of Deposit (CD) or Money Market Accounts If yes, list source/bank names and location: 1)_____Interest Rate:_____ 2)_____Interest Rate:_____	Need documentation $_____ $_____	**Name on account** _____ _____
13. Y N	Real Estate: Do you own rental property or land other than the home you live in? If yes, list location and mortgage holder: 1)_____	$_____	Please send copy of property tax & mortgage statement(s)
14. Y N	Stocks, Bonds, or Treasury Bills. If yes, list source/bank names: 1)_____Interest Rate:_____ 2)_____Interest Rate:_____	Need documentation $_____ $_____	**Name on account** _____ _____
15. Y N	IRA/Lump Sum Pension/Retirement/Keogh/401(k), etc. If yes, list source/bank names: 1)_____Interest Rate:_____ 2)_____Interest Rate:_____	Need documentation $_____ $_____	**Name on account** _____ _____
16. Y N	Whole Life Insurance Policy. If yes, how many policies ____ List sources: 1)_____Interest Rate:_____ 2)_____Interest Rate:_____	Need documentation $_____ $_____	**Name on account** _____ _____
17. Y N	Income from assets or sources other than those listed above. If yes, list type(s) below 1)_____ 2)_____	Need current documentation $_____ $_____	

PLEASE ALSO INCLUDE A COPY OF THE FOLLOWING:

1) **Copy of most recent lot Lease agreement**

2) **Copy of your homeowner's insurance policy**

3) **Copy of your homeowner certificate of title for a manufactured home.**

4) **Copy of your most recent mortgage/ loan statement showing your current principal balance and showing you are current on your payments.**

5) **Copy of your most recent Federal Income Taxes along with any schedules. If you do not file taxes, please sign here:_____**

READ EACH ITEM BEFORE SIGNING THE APPLICATION. IF YOU DO NOT UNDERSTAND, ASK FOR ASSISTANCE. Read and initial statements below:

____ I understand the Housing Rehab funds are offered as a loan payable upon resale or transfer of title of the property. The loan will be secured by a mortgage and/or promissory note that I can pay any or all of the balance any time prior to resale of transfer of property.

____ I understand the Southern Housing Program will inspect the property to determine if the house meets Housing Quality Standards determined by the Department of HUD. Based on the inspection, the Southern Housing Program reserves the right to deny funding.

____ I understand I must carry homeowner's insurance on the property and keep the policy in force during the life of the loan. I also understand that I am required to supply proof of insurance annually, any changes in insurance, and confirm annually that this is my primary residence.

____I understand if I intentionally make statements or conceal any information in an attempt to obtain assistance, it is in violation of federal and state laws that carry severe criminal and civil penalties.

____I authorize the Southern Housing Program to verify all information given by me about my property, income, employment, credit, background, and previous landlord(s) to determine my eligibility.

____I authorize and direct all custodians of my records, including my insurance company, employer, and public or private agency, bank, financial institution, or credit data service to release information to the Southern Housing Program

____ Failure to comply with these conditions could result in the withdrawal of the Southern Housing Program participation or the recall of the full amount of the Southern Housing Program loan plus interest.

____ I understand there is a $125 fee for a title search, a $35.99 fee to record your mortgage and $600 in project review fees. These fees are included in the loan.

____ I understand if a loan closing has not been done for my project within 12 months of the income verification, my income will need to be re-verified to ensure I still income qualify.

____ I understand that if the awarded bid is $50,000 or more, my project will need approval from the Department of Administration.

CONFLICT OF INTEREST		
Do you have any family or business ties to any of the following people? Yes____ No____		
Douglas Richmond, County Board Chair	Steven Balsiger, Board Member	Liz Miller, Board Member
Shonna Neary, Columbia County (Lead)	Tim Henney, Board Member	Keith F. Miller, Board Member
Nate Olson, Dodge County	Derek Granquist, Board Member	Susan Schweitzer, Board Member
Michael Luckey, Jefferson County	Denise Brusveen, Board Member	Nate Moll, Board Member
Andy Buehler, Kenosha County	Tess Carr, Board Member	Jennifer Wagner, Board Member
Andrew Struck, Ozaukee County	Brad Cook, Board Member	Rich Bailey, Board Member
Hope Otto, Racine County	Connor Hartje, Board Member	Joel Winograd, Board Member
Andrew Baker, Rock County	Matthew Bremer, Board Member	Harold Schwoerer, Board Member
Lisa Wilson, Sauk County	John R. Miller, Board Member	David Faust, Board Member
Gene Bobier, Walworth County	James Stilson, Board Member	Henry St. Maurice, Board Member
Washington County Representative	Amy Schlinkert, Board Member	David Mickelson, Board Member
Jeffrey A. Leckwee, Board Member	Char Holtan, Board Member	Tom Dunn, Board Member
Josiah Wynn, Board Member	Andrew C. Kolberg, Board Member	
Kari Justmann, Project Manager Funding	Susan Maier, Administrator	

If yes, list name of person and disclose the nature of the relationship:

APPEAL PROCESS

Any applicant may appeal the decision of the CDBG Program Administrator by submitting, in writing, a request for reconsideration and the reason for the request to the Program Administrator. If the applicant appeals the Program Administrator's decision, the CDBG Housing Committee will review the appeal. If the applicant would like to appeal the CDBG Housing Committee's decision, the applicant may appeal to DOA/DEHCR. DOA/DEHCR will review for consideration and a written response will follow to the applicant. DOA/DEHCR's determination on the appeal is final.

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I/We, the undersigned owners of the described property, have applied for a loan and hereby authorize you to release to the Southern Housing Region the requested information: 1) previous and past employment history including employer, period employed, title of position, income and hours worked 2) disability payments, social security and pension funds and 3) any information deemed necessary in connection with a consumer credit report or a real estate transaction.

I/We, the undersigned owners of the described property, certify that the above statements are true, complete and accurate to the best of my/our knowledge, and understand that false information given may lead to disqualification from this program. I fully understand that it is a federal, state and local crime punishable by fine or imprisonment or both, to knowingly make any false statements concerning the facts of the application.

I/We hereby authorize the Southern Housing Region to obtain verification of any information contained in this application from any source named hereinto for the confidential use in determining my/our eligibility. We have given our permission to the Southern Housing Region to request and receive information required to verify employment, mortgages, deed, trust accounts, savings accounts, credit accounts, financial status and any other information necessary to complete application for a loan.

I/We authorize a Lead Hazard Review of my/our property. I/We agree that results will be used to determine the scope of my project and that soil sampling will not take place.

No provision of marital property agreement (including a Statutory Individual Property Agreement Pursuant to Sec. 766.587, Wis. Stats.), unilateral statement classifying income from separate property under Sec. 766.59, or court decree under Sec. 766.70 adversely affects the creditor unless the creditor is furnished with a copy of the document prior to the credit transaction or has actual knowledge of its adverse provisions at the time of obligation is incurred.

NOTICE TO BORROWERS: This notice to you is required by the Right to Financial Privacy Act of 1978. The Department of Housing and Urban Development, Federal Housing Administration or Veterans Administration have a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to HUD, FHA, or VA without further notice or authorization but will not be disclosed or released by this institution to another government agency without your consent except as required by law.

I/We certify that all information contained in this application is true and complete to the best of (my) (our) knowledge and belief. It is understood that this information is given for the purpose of obtaining financial assistance through the Southern Housing Region and will be used for no other purpose.

All household members above 18 years of age Sign and date below:

____________________________________ ____________________________________

____________________________________ ____________________________________

____________________________________ ____________________________________

____________________________________ ____________________________________
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Homeowner Rehabilitation Process Overview

Read each item below. If you have questions, please contact the program administrator. Read and sign below.

1. Homeowner submits an application along with all documents required for processing. Application will not be processed until all of the required documentation has been submitted to the program administrator.

2. Administrator determines if the homeowner is income eligible. Verification of all income and assets will be completed via third party or check stubs and statements and income taxes. Income includes gross income plus interest or earnings from any type of asset such as savings, checking, investment accounts, bonds, other property, etc.

3. Administrator determines if the property is eligible. The administrator will take into consideration the following items:
    - How much equity you have in your property by looking at how much you owe on the property compared to the estimated fair market value that is listed on the property tax statement.
    - Mortgage balance(s) and whether you are current in making payments.
    - Confirm that property taxes are paid. All applicants with delinquent property taxes must satisfy that debt before any loan is approved. Emergency loans may be an exception.
    - The applicant is responsible for clearing any liens, judgments, title ownerships or payment of taxes in order to proceed.
    - Properties must be owner occupied and must be the owner's principal place of residence.
    - If there is a land contract, the land contract holder must sign the loan. The land contract must be legally binding and properly recorded.
    - If the occupant has a life estate, all owner(s) of the property must sign the loan.

4. Administrator will request a title search on the property. A title search will confirm ownership and reveal debts against the property. When the title search reveals unusual information, a legal opinion of ownership or financial obligation is requested of legal counsel.

5. Inspection and specification preparation. The inspector meets with the homeowner to inspect the property and determine the eligible rehab. The program requires that repairs that affect the occupant's health and safety must be addressed and all code violations will be given top priority. Other types of repairs cannot be completed unless all health and safety repairs are also addressed. No cosmetic work or new construction is permitted unless the new construction is for overcrowding or handicap accessibility. No work may begin on the project until the mortgage has been signed and recorded and the contract(s) between the homeowner and contractor have been signed. Funds cannot be used to reimburse for work that has already been completed.

6. If the project includes lead-based paint work, soil testing for a septic system, asbestos or mold remediation, additional inspections will be required. These items may require special testing procedures in order to complete the inspection process. These tests will be conducted by a company that is specialized and certified in that area of work.

7. Homeowner to obtain bids for the rehab work. Homeowners are expected to obtain three bids for each area of work. All bids must be mailed, delivered in person, emailed or faxed to the grant administrator.

8. Review of bids and loan approval.
    - Bids reviewed and contractors selected. The homeowner reviews the bids with the program administrator. The homeowner may choose the lowest, responsible and reasonable bid or a bid that is within 10% of the lowest, reasonable and responsible bid. The homeowner may select any contractor he or she chooses, but if he/she does not want to choose the contractor with the lowest bid or the bid within 10% of the lowest bid, the homeowner must escrow the difference at the time the loan is closed. Typically, the administrator will make 3 attempts to request bids. If a bid is not obtained during those attempts, the program may not be able to proceed.

    - Loan Approval. The administrator will take into consideration the overall condition of your property compared to the estimated fair market value. There must be sufficient equity in the home to cover the existing liens and the home repair loan. If the bids for all the work would have a negative equity effect or exceed 120% of the after rehab value, then some of the repairs may be eliminated from the scope of work. The repairs will be prioritized according to the code violations and health and safety repairs. Those repairs must be completed before the other work will be approved. The administrator will estimate the increase in market value (no more than 30% of the repair costs) as a result of the home repairs and take this into consideration when calculating equity.

Applicants who disagree with the administrator's calculations for determining equity may appeal the decision by providing a market analysis by a licensed Real Estate Agent or an appraisal by a licensed appraiser. These documents must be no more than six months old and should take into consideration the repairs being considered.

9. Loan closing.
    - Lending documents will be executed. Mortgages and promissory notes are recorded with the local county Register of Deeds. Loans are deferred with no interest or payment until you no longer own or occupy the property as your primary place of residence. The mortgage information is forwarded to the homeowner's insurance carrier and a certificate of insurance is kept on file. Participants must keep their property insured as long as they have the home repair mortgage.
    - Contract(s) signed. The homeowner enters into a written contract(s). Contractors are given 4 – 6 months to complete the work. Sometimes the timeline is extended if the work cannot be done within 4 – 6 months due to weather restrictions. A good example might be the replacement of a septic system. The contract is between the homeowner and the contractor, not the Grantee or program administrator. The homeowner is ultimately responsible for supervising and monitoring the contractors and the quality of their work.

10. Payments and inspection of completed work. Payment request forms and lien waivers will be submitted to the program administrator by the contractor(s) signifying part or all of the work completed. The inspector will schedule an appointment with the homeowner to determine if the work has been completed satisfactorily. The homeowner will also be responsible for making inspections necessary to protect their interest. In lieu of an in person inspection, pictures of the completed work can be submitted. The owner will be asked to sign a payment request signifying their acceptance of the work and approving the amount to be paid to the contractor. Approved payments will be made directly to the contactor.

11. Project completion. The homeowner will receive a letter of completion once the project is complete. A closeout letter will be sent when the rehab is complete. Applicants will be reminded that they must carry homeowner's insurance and that their property taxes must be kept current. Periodic examinations are made on all loans to verify insurance coverage and tax payments. Notices are sent to homeowners when violations in the terms of the mortgage are discovered.

12. Loan repayment. The loan is due in full when the homeowner no longer owns or occupies the property. One spousal transfer will be allowed at continued terms. If property transfers to heirs, repayment is not required if: (a) the heir is within current Program Income limits, and (b) resides in the mortgaged dwelling as his or her principal residence.

13. Loan default. When a homeowner has been found to be in violation of the terms of the mortgage, a notice is sent with procedures for remedy. All attempts are made to resolve the situation with the homeowner. Remedy of the violation or repayment of the loan is the preferred way to settle and all reasonable ways that still meet the requirements set forth by the State are considered. When a reasonable solution cannot be reached with the homeowner, advice is sought with the legal counsel and the loan committee.

14. Subordinations. When a homeowner wishes to refinance a superior mortgage and does not intend to pay off the CDBG mortgage, their refinancing lender will most likely require that the CDBG mortgage subordinate or allow the refinancing lender to be in a superior position to the CDBG mortgage. It is important to tell the lender about the CDBG mortgage when you apply for a refinance loan. The CDBG loans do not automatically subordinate and you will be required to submit a request for subordination.

15. Grievance Procedure. All applicants or participants have the right to file an appeal / grievance when there is a disagreement or dissatisfaction with a decision by our agency. The appeal process is initiated by filing a written letter regarding the grievance within fifteen (15) business days of the service decision. A copy of the grievance procedure has been provided in this application.

16. Abusive Behavior. Myself or any other members of the household, relatives, etc. may not engage in any abusive behavior towards the contractor(s) or program staff. "Abusive behavior" includes, but is not limited to, kicking program administration staff or contractors off the property, use of profanity, yelling, any threatening or intimidating actions or continually being disruptive with staff. I understand that myself, the program staff and the contractor need to maintain a viable path forward throughout the project. Violation of the provision may result in cancellation of the project.

By signing below, you are agreeing that you have read and understand these terms. Please keep a copy of these terms for your records.

_____ _____

Signature **Date** **Signature** **Date**