



Homeowner Pre-Application for Housing Repair

City of El Dorado CDBG Project

Questions? Call **(316) 321-9100**

Ask for help with the **City of El Dorado CDBG Pre-Application.**

Return completed applications by **August 22,, 2016**

Mail:

City of El Dorado Engineering Department
220 E. 1st Street
El Dorado, KS 67042

In Person:

City of El Dorado Engineering Department
216 N. Vine Street
El Dorado, KS 67042

Email: amanda@eldoks.com

1. INFORMATION ABOUT YOU:

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Are you the head of household? YES NO

If not, who is? _____

2. INFORMATION ABOUT YOUR HOME:

When was your home built? _____

How many bedrooms in your home? _____

How many stories is your home? _____

3. **The City of El Dorado Community Development Block Grant** project will provide financial assistance to qualifying Low to Moderate income households for home rehabilitation. As grant administrators for the project SCKEDD is required to verify income qualifications for all applicants within the household.

Note: a qualifying household income level is the combined adjusted gross income, from all sources, for all individuals within the household, excluding full time students.

2016 LMI Income Guidelines	
1 person household	\$36,550
2 person household	\$41,750
3 person household	\$46,950
4 person household	\$52,150
5 person household	\$56,350
6 person household	\$60,500
7 person household	\$64,700
8 person household	\$68,850

Income limits are based on household size and are outlined in the chart shown here:

4. INFORMATION ABOUT YOU & YOUR FAMILY.

Please list every member of your household that lives at this address, starting with yourself.

Name:	_____							
Birth date:	_____	Race:	_____					
Employer:	_____	Monthly Income:	_____					
Gender:	Male	Female	Student?	YES	NO	Disability?	YES	NO
Name:	_____							
Birth date:	_____	Race:	_____					
Employer:	_____	Monthly Income:	_____					
Gender:	Male	Female	Student?	YES	NO	Disability?	YES	NO
Name:	_____							
Birth date:	_____	Race:	_____					
Employer:	_____	Monthly Income:	_____					
Gender:	Male	Female	Student?	YES	NO	Disability?	YES	NO
Name:	_____							
Birth date:	_____	Race:	_____					
Employer:	_____	Monthly Income:	_____					
Gender:	Male	Female	Student?	YES	NO	Disability?	YES	NO
Name:	_____							
Birth date:	_____	Race:	_____					
Employer:	_____	Monthly Income:	_____					
Gender:	Male	Female	Student?	YES	NO	Disability?	YES	NO

Use the back side of this page for additional household member.

5. PLEASE CIRCLE ALL ASSISTANCE OR INCOME THAT YOU OR ANY FAMILY MEMBER LIVING AT THIS ADDRESS RECEIVED IN THE PAST YEAR.

GA	SOCIAL SECURITY	SSI/SSA	TANF	FOSTER CARE
VA	CHILD SUPPORT	ALIMONY	PENSION	UNEMPLOYMENT

6. INFORMATION ABOUT REPAIRS YOUR HOME NEEDS:

What are the major items of repair that you feel your home needs? Remember this is not a remodel program. The goal of the program is to make your home safer.

7. WHAT TO EXPECT:

In January 2017 the State of Kansas will be awarding Community Development Block Grants to cities in Kansas that are in need of housing rehabilitation. The City of El Dorado has determined that if awarded the grant, they are planning to allocate funds to Owner Occupied single family homes in which the owners meets low-to-moderate income levels. Of this award money, each home may be able to receive up to a maximum of \$25,000 per rehabilitation. Additionally the grant will cover all incidental costs such as inspections, lead paint testing, radon testing, etc.

Below is a list of what you should and should not expect during the course of this project:

- **The only acceptable proof of income for the CDBG program is the most recent years filed income tax return such as IRS form 1040, 1040A or 1040EZ.**
- If a grant is awarded to the City of El Dorado and I am selected to participate in the program, I will be required to furnish copies of my household's previous year's filed tax returns. In the event that I or a family member may be exempt from filing income tax returns, I will be required to certify to that fact and submit supporting social security paperwork. (Note: Use the *Interactive Tax Assistant* available on the IRS website to determine if you are required to file a tax return. <http://www.irs.gov/>)
- Completing this application does not guarantee that I will receive housing repair assistance.

- Even if I am income-eligible, I may still be denied assistance after the housing inspection. I understand the CDBG program is unable to serve some homes needing extensive repairs because of program regulations regarding cost-effectiveness.
- Any housing repair assistance I receive will be determined by the project inspector. I do not get to decide which items are repaired and/or how they are repaired.
- The work on my home will be bid out to eligible contractors. I will not get to choose who does the work on my home.
- Rehabilitation work is inconvenient. There will be workers around my home. I understand that my life as well as the lives of my family and pets may be disrupted by the construction work.
- I will move my possessions out of the way of the contractor as the contractor may deem necessary.
- This is not a remodeling program. The goal of the program is to make my home safer. I will have a limited selection when it comes to paint color or other choices, if these repairs are even eligible.
- I may have to relocate from my home at certain times while work is underway (usually only a day or so). If relocation is necessary, the City's CDBG program will provide me with lodging, of the program's choice, at no cost to me.
- I understand a lien will be filed against my home if rehabilitation work is done. There is no monthly interest or repayment. However, I understand that if I sell or move out of the home within three years of the completion date of the rehabilitation, I will have to repay a pro-rated amount of the cost of rehabilitation.
- I understand that the mortgage, property taxes and homeowners insurance must be current on my house for me to be eligible for assistance.

I UNDERSTAND AND AGREE TO ALL OF THE ABOVE.

HOMEOWNER SIGNATURE

DATE