

Maine State Housing Authority (MaineHousing)
LEAD HAZARD REDUCTION DEMONSTRATION PROGRAM

APPLICANT (MULTI-FAMILY OWNER) APPLICATION AND INFORMATION

Community Action Agency (CAA/Administrator):

Name _____
Address _____
City/State/Zip _____

Questions should be directed to:

Name of Intake Staff: _____
Telephone of Intake Staff: _____
Email of Intake Staff: _____

Return completed and signed applications to the above-named CAA.

Date _____

Applicant Information:

<p>Applicant Name _____ <div style="display: flex; justify-content: space-between; width: 100%;"> First MI Last </div> </p> <p>Date of Birth _____</p> <p>Social Sec # _____</p>	<p>Co-Applicant Name _____ <div style="display: flex; justify-content: space-between; width: 100%;"> First MI Last </div> </p> <p>Date of Birth _____</p> <p>Social Sec # _____</p>
<p>Owner Mailing Address _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Address Home Telephone _____ </div> <div style="display: flex; justify-content: space-between; width: 100%;"> City State ZIP Code Work Telephone _____ </div> </p>	

This section to be filled out if owner's unit is to be enrolled. If owner's unit is not to be enrolled than skip down to the "Property Information."

Total number in house (including you) _____

Name(s) of dependent children	Birthdate	Ages	Blood Lead Levels VEHL's ug/dl

Property Information:

Address of Property to be abated _____

Street
City

County
State
ZIP Code

of Units: _____

Year built: _____ ☐ Unknown

Check property type:

☐ Single ☐ Multifamily

Household Income and Assets:

Owner does not need to complete income/asset information. However, if owner needs assistance above the \$10,000 per unit program limit and owner claims he/she cannot afford to pay the difference between the unit subsidy and total project cost, then owner will be required to provide supporting documentation to demonstrate financial hardship.

Owner Occupant must complete the section below if owner's unit is to be enrolled into the program.

Applicant Employment:

Self-Employed: ☐ Yes ☐ No *If yes, provide 2 years tax returns, including **all** Schedules.*

Employer Name _____ Employer Telephone _____
 Employer Address _____ Position _____
 _____ No. of Years _____

Co-Applicant Employment:

Self-Employed: ☐ Yes ☐ No *If yes, provide 2 years tax returns, including **all** Schedules.*

Employer Name _____ Employer Telephone _____
 Employer Address _____ Position _____
 _____ No. of Years _____

Head of Household Employment:

Self-Employed: ☐ Yes ☐ No *If yes, provide 2 years tax returns, including **all** Schedules.*

Employer Name _____ Employer Telephone _____
 Employer Address _____ Position _____
 _____ No. of Years _____

Gross Income (Owner must provide verification of all income):

	(a)	(b)	(c)
GROSS AMOUNT	APPLICANT	CO-APPLICANT	Head of Household
A. Wages (gross monthly) from Employment	_____	_____	_____
B. Additional Monthly Income From:			
1. Overtime	_____	_____	_____
2. Part-Time Employment	_____	_____	_____
3. Pensions	_____	_____	_____
4. Veteran's Administration Compensation	_____	_____	_____
5. Net Rental Income	_____	_____	_____
6. Self Employment*	_____	_____	_____
7. Child Support	_____	_____	_____
8. Public Assistance (TANF/WIC/GA)	_____	_____	_____
9. Social Security Benefits	_____	_____	_____
10. Unemployment Compensation	_____	_____	_____
C. Other**	_____	_____	_____
D. Gross Monthly Income (Total A, B & C)	_____	_____	_____
E. Total (Line D Multiplied by 12)	_____	_____	_____
F. Gross Household Income (Total E(a)+E(b)+E(c):			_____

*If self-employer, please provide most recent 2 years of completed tax returns including Schedule C.

** Includes bonuses, dividends, interest, royalties, alimony, sick pay, disability, retirement, income from trusts, income from business activities or investments.

IMPORTANT! READ THIS BEFORE SIGNING:

I/we certify that the above statements are true, accurate, and complete to the best of my/our knowledge and belief. This application shall remain with the Administrator to which it is submitted and/or MaineHousing. I/we hereby consent to and authorize the Administrator and MaineHousing, after giving reasonable notice, to enter the improved property to determine that the improvements specified in this application have been completed. I/we understand that the selection of a contractor and the acceptance of the materials used and the work performed is my/our responsibility, and neither the Administrator nor MaineHousing guarantees the quality of workmanship of the property improvements. I/we understand that it may be a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of the United States Criminal Code.

NOTICE: Consumer reports (Merchant's Report) may be obtained in connection with this Application by the Administrator. If requested, 1) You will be informed whether or not consumer reports were obtained; and 2) If reports were obtained, you will be informed of the names and addresses of the consumer reporting agencies (credit bureaus) that furnished the reports.

Signature of Applicant (Owner)

Date

Signature of Co-Applicant (Co-Owner)

Date

Applicant Demographic Profile

The following information is required by the Federal Government for certain types of loans related to a dwelling or order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish the information, under federal regulations the lender is required to note race or national origin and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check below.

I do not wish to furnish this information

☐ Yes ☐ No

Head of Household (check all that apply)

Sex of Head of Household

☐ Male

☐ Female

of Household Members _____

Single

☐

Married

☐

Elderly

☐

Single Parent with Children

☐

Two Parents with Children

☐

Other (specify) _____

☐

Race:

White

☐

Black/African American

☐

American Indian/Alaska Native

☐

Asian

☐

Native Hawaiian/Other

☐

Pacific Islander

☐

American Indian/Alaskan Native & White

☐

Asian & White

☐

Black/African American & White

☐

American Indian/Alaskan Native & Black/ African American

☐

Other Multi-Racial

☐

Ethnicity:

Hispanic or Latino

☐

Not Hispanic or Latino:

☐

Physically Disabled Head of Household

☐

Yes

☐

No

Displaced Homemaker*

☐

Yes

☐

No

*A displaced homemaker means an adult individual who: has not worked full-time, full-years in the labor force for a number of years but has, during such years, worked primarily without pay to care for the home and family and is employed or under employed and is experiencing difficulty in obtaining or upgrading employment.

Office Use Only

The Gross Income as calculated pursuant to this Application and the Procedural Guide has been verified by the Administrator to be:

\$ _____

Maximum Eligible Income for this applicant is: \$ _____

Percentage of AMI: _____

Dated

Signed by CAA Representative

Name of CAA Representative

NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

PRIVACY NOTICE

MAINE STATE HOUSING AUTHORITY

Safeguarding information in this age of technology presents new challenges for all of us. But at the Maine State Housing Authority, your confidence in us is our greatest asset. For that reason we adhere to strong guidelines to ensure that any private financial information you share with us is protected and held in confidence. Our employees are highly trained and are held to the highest standards of conduct.

Maine State Housing Authority wants you to understand how we gather, use and safeguard information about you to provide you with our products and services. This notice explains our practices for the gathering, sharing and security of information relating to our customers.

Information We Gather

As part of providing you with financial products or services, we gather non-public personal information about you from the following sources:

- Applications, account forms and other information that you provide to us, whether in writing, in person, by telephone, electronically or by any other means. This information may include your name, address and social security number.
- Your transaction with us.
- Information about your transactions with non-affiliated parties.
- Information from a consumer reporting agency.

Information We Share

We do not share any personally identifying information on our current or former customers to any third party, except the following as permitted by law:

With your permission.

- To comply with federal or state laws and other applicable legal requirements.
- To consumer reporting agencies.
- To respond to subpoena or court order, judicial process or regulatory authorities.
- To third parties assisting us in performing our functions or services to you. These third parties are under contract to maintain this information in confidence and not use this information for other purposes. For example, we may share personally identifying information with mailing services, firms that assist us in marketing our products or other financial institutions with whom we jointly market financial products or services. We may share personally identifying information with service providers who help us process your applications or service your accounts. Our service providers include attorneys and other professionals.

Because we do not share non-public information, outside of these exceptions, opting-out is not necessary.

If you are no longer an active customer, we will retain your records for as long as required by law. We will continue to treat your personally identifying information as described in this notice.

Our Security Procedures and Information Accuracy

We restrict access to the personal and account information of our customers to those employees who need to know that information in the course of their job responsibilities. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to protect customer information.

We also have internal controls to keep customer information as accurate and complete as possible. If you believe that any information about you is not accurate, please let us know.

If you have a privacy-related concern, please contact our Compliance Officer, Paula Weber, 207-626-4619 or 1-800-626-4600 ext. 1619.

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INCOME RECERTIFICATION

TO BE COMPLETED ONLY IF THE LOAN DOES NOT CLOSE WITHIN FOUR MONTHS OF APPLICATION.

Applicant Name: _____ Co-Applicant Name: _____
First MI Last First MI Last

Property Address: _____

STATE OF MAINE

COUNTY OF _____, Ss

_____, _____, and _____

being duly sworn, depose and say that his/her/their Gross Income as calculated
pursuant to the Income Eligibility Worksheet, Pages 1 and 2 is now:

\$ _____

Date: _____

Signature of Applicant

Date _____

Signature of Co-Applicant

Date _____

Signature of Head of Household

Subscribed and sworn to before me on

(Seal)

Name:

Notary Public/Attorney-at-Law

Commission

Expires: _____

Notaries Public must have each person signing raise his or her hand and licit an affirmative response to the following oath:
"DO YOU (SWEAR/AFFIRM) UNDER PENALTY OF LAW THAT YOU HAVE READ AND UNDERSTOOD THIS INCOME
RECERTIFICATION AND THAT THE STATEMENTS WITHIN ARE TRUE BASED UPON YOUR PERSONAL
KNOWLEDGE (SO HELP YOU GOD)?"

Maine State Housing Authority (MaineHousing)
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AFFIDAVIT FOR MULTI-FAMILY OWNER(S)

Each person signing this Affidavit for Multi-Family Owner(s), being duly sworn, deposes and says that:

1. The building(s) and apartment unit(s) for which I am requesting a Loan under the Maine State Housing Authority Lead Hazard Reduction Demonstration Program (the "Program") is located within the State of Maine at the following address (collectively, the "Program Units"):

(Street)

(Town)

2. The Program Unit(s) are owned by me.
3. For a period of no less than three years beginning on the date on which the Loan is closed, I agree to lease at least 50% of the Program Units to tenants with a household income at or below 50% of the area median income as established by United States Department of Housing and Urban Development ("HUD") guidelines and which guidelines I acknowledge are maintained by the Administrator, and I agree to lease the remaining Program Units to tenants with household incomes at or below 80% of the area median income as established by HUD. If for any reason the 50/50 area median income requirement explained above cannot be met, I will obtain a "waiver" from the Program Administrator.
4. During the three year term I agree to screen prospective Program Unit tenants to determine income eligibility so that the income requirements described in Section 3 above are satisfied, and I agree to verify tenant income eligibility with the Program Administrator to confirm that the Section 3 income requirements are being satisfied as often as may be required by the Program Administrator.
5. When leasing Program Units during the three year term I agree to give priority to income eligible families with children under the age of six years.
6. I agree to advertise vacant/vacated Program Units on the MaineHousingsearch.org website. I agree to include in the advertisement that the Program Unit has been lead abated, priority will be given to those families with children under the age of 6 years, and the household must be income eligible for the Program Unit.
7. I understand I must submit a new tenant income verification form to the Program Administrator when a change in tenancy occurs during the three year term. Additionally, I will comply with Program Administrator's request to complete and submit an Annual Verification of Grant Compliance form.
8. I understand that any misrepresentation or misstatement in this Affidavit or any other document executed in connection with the Program Loan issued to me will constitute a breach of this Affidavit and entitle the Maine State Housing Authority MaineHousing to take appropriate proceedings against me. **I may be subject to Criminal Penalties for any misrepresentation, misstatement made in connection with this Affidavit or failure to abide by the requirements contained in this Affidavit.**
9. I understand that MaineHousing, the Program Administrator, any mortgage insurer or guarantor or any of their representatives may wish to investigate or to verify the matters set forth in this Affidavit or in other documents provided in connection with the my application for a Program Loan, and I hereby permit such investigation or verification.
10. I understand that upon sufficient notice, MaineHousing or agents of the Program Administrator shall have the right of entry to the Program Units and the right to inspect all Program work done, material, equipment and fixtures furnished, installed or stored in and about the Program Units.

11. In the case of co-owners, statements made throughout this Affidavit in the singular include the plural.

Date: _____

Signature of Applicant

Date: _____

Signature of Co-Applicant

State of Maine
_____,ss.

Personally appeared the above-named _____ being
duly sworn stated under oath that the facts set forth herein are true based on his/her personal knowledge and
information contained in records in his/her custody and control.

Before me,

Print Name: _____

Notary Public/Attorney at Law

Commission expires: _____

Maine State Housing Authority (MaineHousing)
LEAD HAZARD REDUCTION DEMONSTRATION PROGRAM

APPLICANT INFORMATION FORM

This Applicant Information Form describes program requirements and provides a list of things that you need to know, and need to do before making a commitment for a Lead Hazard Reduction Demonstration Program Loan/Grant from MaineHousing.

HOW THE PROGRAM WORKS:

Maine State Housing Authority's Lead Hazard Reduction Demonstration Program is administered by Community Action Agencies (CAA/Administrator). The CAA will take your application, perform all necessary eligibility verifications, and inspect the work as it is being performed. After you have signed all necessary documents and if all guidelines are met, MaineHousing will fund your loan with funds being held on your behalf.

Maine State Housing Authority uses funds from the U.S. Department of Housing & Urban Development, Real Estate Transfer Tax and other state and federal funds to provide funding for the program.

GENERAL PROGRAM INFORMATION:

SINGLE FAMILY OWNER OCCUPIED HOMES

- A grant will be provided for income eligible owner occupied single family homes. You will be required to sign several documents, including an application, grant documents, a lead hazard reduction demonstration construction contract and other documents necessary for completion of lead hazard control work. You must also provide proof of your income such as check stubs and complete income tax returns and will need to provide proof that you own the building (e.g. a property deed).
- The maximum grant amount that a single family homeowner can receive is \$16,000. You must use the home you plan to repair as your principal residence and there must be a child under the age of 6 years permanently residing in your home. This amount may not be enough to treat all of the lead hazards in your home. MaineHousing reserves the right to increase the loan amount on a case by case basis, contingent upon available funds. MaineHousing also reserves the right to declare the project too expensive or economically unfeasible and to "walk away".
- In addition to the lead hazard reduction demonstration grant funds, additional grant money is available to conduct Healthy Homes Rating System (HHRS) environmental assessments in Program homes and related Healthy Homes (HH) interventions in select units receiving lead hazard reduction interventions. Healthy Homes interventions will address indoor allergens, household injury risks, mold, radon and other home-based environmental health hazards as identified by the HHRS. The maximum allowed funding pre HH intervention is \$3,238.

MULTIFAMILY PROPERTY OWNERS

- Deferred/forgivable loans will be provided to owners of rental properties. The maximum number of rental units a for-profit or non-profit owner can enroll is ten. The maximum loan amount an owner can receive is 10,000 per unit or \$100,000. Owners who have enrolled 10 unit limits under a separate grant are eligible to enroll an additional 10 units, which can consist of different properties. Owners will be required to lease the enrolled units to low-income families for a period of three years and must sign an affidavit and loan documents promising such. If costs exceed \$10,000 per unit, owners must pay the difference. If owners can't or refuse to pay the difference, MaineHousing reserves the right to "walk away". The cost of lead paint inspections and abatement design will be funded by MaineHousing for eligible rental units and not included in the loan amount. MaineHousing may also help with the costs of tenant relocation during the lead hazard control work.
- Owners will be required to sign several documents, including an application, an affidavit, loan documents, a construction contract and other documents necessary for completion of lead hazard control work. Owners must also provide proof of building ownership (e.g. a property deed).
- Loan terms are as follows: Maximum of \$10,000 per unit, up to a maximum of 10 units or \$100,000, 0% interest, no monthly payments and entire loan is forgiven if you lease the enrolled units to low-income families for a period of three years from date of loan closing. If you transfer title, refinance, foreclosed on, sell the property or break the affordability requirements prior to the maturation of the three year loan term, **the entire loan amount** is due back to MaineHousing.

TEMPORARY RELOCATION

- Owners must advise tenants living in units that are enrolled into the program, that they will have to be relocated during the work. Owners are strongly encouraged to seek vacant units for the temporary placement of families during the work. Tenants may be eligible for grants of up to \$1,200 to help with temporary relocation costs. It is the owner's responsibility to have the rental units vacant and ready for contractor work prior to commencement of work.
- Single family homeowners may be eligible for relocation grants of up to \$1,200 to help with temporary relocation. This money can be used for moving expenses, costs for alternative housing and other relocation related expenses. Homeowners are responsible for having the home vacant and ready for contractor work prior to commencement of work.
- Homeowners and tenants may have to move furniture and belongings out of work areas so that the contractor can perform the work. Homeowners and tenants must find alternative housing for pets.

OTHER REQUIREMENTS

- Homeowner insurance is required for all properties enrolled in the program. Applicants with properties located in a FEMA recognized Special Flood Hazard Area will not be allowed to participate in the program.
- Owners can only hire a qualified, licensed contractor to perform the work and cannot use loan proceeds to pay for his/her own labor or to purchase his/her own materials to perform the work.
- Do not start any work until your application is approved **AND** you have signed required loan documents and other required documents with the Community Action Agency. Any work started prior to loan closing will not be funded by MaineHousing.
- During the work, the contractor will need to use water, electricity and other utilities. The cost for the use of these utilities will be at the expense of the owner.
- Site visits will be conducted by staff from the CAA and MaineHousing during the construction phase.

CONTRACTOR PROPOSALS:

- The CAA will obtain a minimum of three bids from separate, qualified contractors to perform the work. The contractor must be a Maine Department of Environmental Protection licensed lead abatement contractor and or a Lead Smart Renovator (if the type of work allows for a Lead Smart Renovator).
- You should check the contractor's past performance through references and the Better Business Bureau. Your CAA may be able to offer assistance to you.
- The CAA will award the project to the lowest bidder. If you choose a contractor whose bid is higher than another, **you will be responsible** for paying the difference between the low bid and the bid you chose.

CONTRACTS:

- Maine State Housing Authority's Lead Hazard Reduction Demonstration Program requires a standard lead hazard reduction demonstration construction contract to be signed by you and the chosen contractor. The CAA will provide the contract you must use.

CONTRACTOR PAYMENTS:

- No payments will be released to the contractor until the CAA authorizes payment. Final payment will be withheld until the contractor passes a visual inspection and a lead dust wipe clearance test performed by the CAA.
- You, the chosen contractor and the Community Action Agency will enter into an Escrow Agreement. This enables the CAA to hold and distribute the construction funds on your behalf and in accordance with program rules.

RETURNING HOME:

You or your tenants cannot return home until all of the interior work is completed and the dust wipe clearance test passes. There may be additional work that needs to be completed on the exterior of the home. This can be done safely while you or your tenants live in the home.

RESOLUTION OF DISPUTES: The Maine State Housing Authority uses a standard procedure for resolving disputes among the owner, the contractor, and the CAA concerning the rehabilitation of a home. The CAA is initially responsible for resolving disputes. If a dispute arises concerning the provisions of the signed contract or the performance by the parties, contact your CAA immediately and describe your complaint. If your CAA is unable to informally resolve your dispute, your CAA will assist you through the following process.

- *Notice of Dispute.* Within five business days of becoming aware of a dispute that is not readily resolved, the CAA will send MaineHousing a notice of the dispute with a copy of any written correspondence from the complainant. The CAA will also send a copy of the notice of dispute to the complainant. If MaineHousing learns of the dispute first, MaineHousing shall, within three working days send the CAA a notice of dispute along with any correspondence from the complainant. For the most efficient process, contact your CAA first, not MaineHousing.
- *Informal Conference.* The CAA will set up an informal conference to be held within fifteen days from when the CAA becomes aware of the dispute. The CAA will notify all parties of the date, time and place of the informal conference giving reasonable consideration to the schedules of all parties and the severity of the dispute. If the informal conference produces a resolution to the dispute, the CAA will prepare a document signed by all parties involved in the dispute that plainly states the agreed upon resolution.
- *Binding Arbitration.* The lead hazard construction contract and/or the general construction contract between the contractor and you will contain a binding arbitration clause. If the informal conference does not produce a resolution, the CAA will issue a document stating that no resolution was reached and that the parties will participate in a binding arbitration proceeding to be held as soon as possible after the informal conference. Unless the CAA, owner, and contractor otherwise agree, the arbitration shall be conducted in accordance with the construction industry arbitration rules of the American Arbitration Association. The decision of the arbitrator will be final.

**IF YOU DO NOT UNDERSTAND ALL OF THE INFORMATION CONTAINED IN THIS DOCUMENT,
PLEASE CONTACT YOUR COMMUNITY ACTION AGENCY FOR CLARIFICATION BEFORE SIGNING.**

I certify that I have read, understand, and agree to the responsibilities and information contained in this Applicant Information Form.

I certify that I have read, understand, and agree to the responsibilities and information contained in this Applicant Information Form.

APPLICANT (OWNER):

Signature of Applicant

Signature of Co-Applicant

Date

CAA (ADMINISTRATOR):

Signature of CAA Representative

CAA Representative Name

Date