Monroe County Home Improvement Program

REQUIRED DOCUMENTATION CHECKLIST

The first box contains a list of all documents that are required at the time of initial application. The second box contains a list of additional documentation that may be requested at a later date. Please note that program regulations require that income documentation be no older than six months old at the time that program funds are expended, therefore, it may be necessary to resubmit documentation upon request.

DOCUMENTATION REQUIRED AT TIME OF APPLICATION SUBMISSION

- ☐ MOBILE HOME OWNERS - Submit a Bill of Sale and proof that any lot rent is paid current
- ☐ DRIVER'S LICENSE and/or IDENTIFICATION CARD for all household members age 18 and over
- ☐ SEPARATION/ DIVORCE DECREE - Submit cover and pages indicating property awards and dependent care
- ☐ FEDERAL INCOME TAX RETURN - Pages 1 and 2 of most recent year Federal return
- ☐ TWO CURRENT, CONSECUTIVE BANK STATEMENTS with all pages for all checking, savings, retirement, investment, etc. accounts for all household members 18 and older
- ☐ EMPLOYMENT - Submit a copy of three (3) most recent, consecutive payroll check stubs for each employed household member age 18 and older
- ☐ UNEMPLOYMENT - Submit documentation of benefits received for any unemployed household member age 18 and older
- ☐ SOCIAL SECURITY BENEFITS - Submit a copy of current year Award Letter(s) for all household members receiving benefits for Social Security, Social Security Disability or Supplemental Security Income
- ☐ PENSION, DISABILITY, WORKMENS' COMPENSATION, etc. - Submit a copy of two (2) most recent statements, checks, etc. to document current payments
- ☐ CHILD SUPPORT - Submit Child Support History for the last 6 weeks or court documents indicating support

ALL OF THE ABOVE DOCUMENTATION, TOGETHER WITH THE FOLLOWING DOCUMENTATION WILL BE REQUESTED DURING THE REVIEW PROCESS

- ☐ PUBLIC ASSISTANCE, submit a copy of Budget Letter
- ☐ A COPY of the "DECLARATION PAGE" of your HOMEOWNER'S INSURANCE showing:
  - Agent's name and phone number
  - Amount of dwelling coverage
  - Policy expiration date
- ☐ CURRENT MORTGAGE STATEMENT documenting that account is current and all payments are made to date
- ☐ DEATH CERTIFICATE - if anyone listed on your deed is deceased
- ☐ FEDERAL INCOME TAX RETURN – all pages of current year federal tax returns for all household members

8100 City Place • 50 West Main Street • Rochester, New York 14614
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EQUAL HOUSING OPPORTUNITY

CHERYL DINOLFO
COUNTY EXECUTIVE

Monroe County

Community Development Administration

HOME IMPROVEMENT PROGRAM APPLICATION PACKAGE

Thank you for expressing interest in Monroe County's Home Improvement Program (HIP). Each year, through the use of federal funds, Monroe County is able to help income-eligible homeowners repair and revitalize their homes.

Enclosed please find the program brochure, which contains program eligibility requirements, as well as the application and a checklist of acceptable documentation for determination of program eligibility. Before completing the application, please note the following program requirements:

- All household members aged 18 and over are required to provide verification of income and assets as outlined on the application. Incomplete income documentation will delay the application approval process. Any written statements of explanation need to be signed, dated and notarized.
- Homeowners are required to include verification that the mortgage is current with no past due owing and that all property taxes are paid up to date.
- Mobile home owners are required to provide a bill of sale or other proof of ownership and verification that lot rent is paid with no past due owing. If you have a mortgage, please provide verification that it is current with no past due owing.
- Regulations require that the value of the property may not exceed the current HUD limit for a single-family home of $138,000 (effective 06/06/2016.) You will not be eligible to participate if the current assessed value of your property exceeds this amount.
- All applicants are required to carry and provide proof of homeowner's insurance. At contract, homeowners are required to add Monroe County as a loss payee to their homeowner's insurance policy.

Upon completion, please sign and date the application and return it to the attention of "Home Improvement Program," at the address below. Applications are processed on a first-come, first-served basis and need to be fully documented before projects can proceed.

Monroe County welcomes your participation in the Home Improvement Program. For additional program information, please call 753-2033 with any questions you may have.

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MONROE COUNTY
HOME IMPROVEMENT PROGRAM (HIP)
APPLICATION

Please see attached **Required Documentation Checklist** and be sure to submit applicable items with this application. Failure to do so will delay review and approval of your application.

Homeowner Information:

Applicant Name: _____

Other Owner(s) if any: _____

Property Address: _____, _____, NY _____
(Street) (Town/Village) (Zip Code)

Phone Numbers: (Home) _____ (Work) _____ (Mobile) _____

Email Address: _____

Please list the name, relationship and phone number of an alternate contact person.

Name: _____ Relationship _____ Phone Number: _____

Number of people residing in home: _____ Number of years you have owned this home: _____

Have you ever received assistance through the Monroe County Home Improvement Program before? ☐ Yes ☐ No Date: _____

Property Information:

Home is a: ☐ One Family ☐ Two Family ☐ Mobile Home Number of Bedrooms _____

Are property taxes paid? ☐ Yes ☐ No Do you have homeowner's insurance? ☐ Yes ☐ No

Is there a mortgage on the property? ☐ Yes* ☐ No * Lender Name: _____ Balance: _____ Maturity Date: _____

Describe the repairs and/or improvements you are requesting: _____

_____

Both Pages Must Be Completed

[Over]

Household Income Information:

Provide information below for all persons, including yourself, who reside in the home. Attach additional pages if more room is needed.

	Full Name	Relationship To Homeowner	Date of Birth	Describe Any Disabilities	Source(s) of Income (Wages, self-employment, social security, unemployment, retirement, child support, alimony, public assistance, disability, veteran's benefits, worker's compensation, trusts and income from assets)	Gross Monthly Income (See Required Documentation Checklist and attach applicable documentation listed)
1						
2						
3						
4						
5						
6						
7						

Do you have liquid assets (cash, savings, certificates of deposit, stocks, bonds, etc.) with a cash value of $40,000 or more? ☐ Yes ☐ No

If yes, provide approximate cash value of liquid assets: _____

I (We) hereby certify that I (we) am (are) the owner(s) and occupants of this property, and that to the best of my (our) knowledge, all information herein is true and correct. Monroe County is hereby authorized to verify any of the above information in any appropriate manner and to inspect the property prior to approval and following the completion of work. I (We) understand that payment of financial assistance is subject to satisfactory completion of approved work.

Signed (Applicant) _____ **Date:** _____

Signed (Co-Applicant) _____ **Date:** _____

NOTE: Upon approval, participants are required to sign a Note and Mortgage to ensure repayment of the home improvement assistance if ownership of the property is transferred or if the property is no longer the primary residence of the participants within five (5) years of receipt of grant funds.

Information in this section is for statistical purposes only and will not affect eligibility. Please check one of the following in regard to your race or ethnic origin.

☐ White (non-Hispanic) ☐ Black (non-Hispanic) ☐ Native American ☐ Asian/Pacific Islander ☐ Hispanic (all races) Other _____

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