



Guadalupe CDC

Housing Rehabilitation Program

General Requirements

Name: _____

Phone: _____

E-Mail: _____

Date: _____

	Date Submitted
<input type="checkbox"/> Application	_____
<input type="checkbox"/> Proof of all household income	_____
<input type="checkbox"/> Social Security Cards/Photo ID/Driver's License (All household members)	_____
<input type="checkbox"/> Proof of disability	_____
<input type="checkbox"/> Signed release for income verification	_____
<input type="checkbox"/> Proof of property ownership	_____
<input type="checkbox"/> Evidence that household income is sufficient to maintain ownership	_____
<input type="checkbox"/> Proof that homeowner's insurance, property taxes and any/all special assessments are current	_____

For questions contact Guadalupe CDC at (480) 505-5395 | (480) 505-5382

www.guadalupecdc.org



Guadalupe CDC

Housing Rehabilitation Program

This program is intended to provide safe and decent housing to the Town of Guadalupe residents by offering funding options to assist homeowners with the rehabilitation or modification of their home. The program is open to all residents who live within the incorporated boundaries of the Town of Guadalupe.

Eligibility Requirements

- Property must be located within the incorporated boundaries of the Town of Guadalupe
- Property must be feasible for rehabilitation under the time and monetary constraints of the program
- The property must be owner occupied as a primary residence
- Property must be free of liens that unduly restrict the marketable ownership interest, such as liens and non-occupants named on deed
- Applicants must have a verifiable income that falls below 80% of the area median income. Income verification is valid for a period of six (6) months. Upon expiration of income verification information, applicants must complete and submit a new income verification package.
- The applicant cannot have assets that total more than \$25,000 (e.g. cash, stocks, bonds, money accounts, IRA, etc.) This is exclusive of the home they live in, two vehicles, and personal property necessary for daily living.
- Applicant must provide proof of current homeowner's insurance
- Homes of historical value may only be eligible upon favorable review by the State Historical Preservation Office
- Generally, homes built within the last 25 years, as well as properties that have already received rehabilitation assistance from Guadalupe CDC, until after the expiration of prior forgivable grant periods have concluded, are ineligible for rehabilitation
- Properties with a building code issue are generally not eligible for rehabilitation. However, if the issue is relating to a correctable building condition that HRG funds can correct under the requirements of the program, then the property may be deemed eligible
- Applicant must be current with their mortgage payments (if applicable) and taxes. Properties may be encumbered by mortgage in first position so long as a financial institution or other such mortgage company holds that mortgage; however, there must be sufficient equity remaining to justify placing the lien for rehabilitation deferred payment loan in second position. Properties encumbered by mortgages held by individuals or partnerships are not eligible for the program

Housing Repairs and Modifications

The Guadalupe CDC Housing Rehabilitation Program covers the following repairs and modifications. The maximum grant is \$20,000 per household. Please select the following pertaining to your needs:

Roofing

HVAC/Air Conditioning

Plumbing

Electrical

Bathroom

Kitchen

Windows/Doors

Preferences

Preference will be given to households applying for funding that meet one of the following criteria:

1. Veterans and senior's (62 years of age or older)
2. Disabled (a legally recognized physical/mental/emotional condition that limits the performance of daily living skills)
3. Have minor child(en) age 18 and under related to head of household residing in the residence

Income Verification Requirements

Gross income will be used to calculate income for all members of the household. Required documents to verify income will include, but are not limited to:

1. Bank Statements, including checking and savings accounts
2. Paycheck stubs including tips, commission and bonuses
3. Social Security
4. Welfare Assistance
5. Alimony and Child Support
6. Minors Income specifically disability payments

Median Income Guidelines

HUD income limits, which are calculated for metropolitan areas and counties in Arizona as well as the state as a whole, establish eligibility for a variety of housing programs. The HUD limits are based on median income figures, adjusted for family size and geographical variations in the cost of housing.

HUD considers families at the 80% of the area median income level to be “low income” and families at 50% of the area median income level to be “very low income”.

Persons in Family

2023 Income Limit Category	1	2	3	4	5	6	7	8
Very low (50%) Income Limits	32,750	37,400	42,100	46,750	50,500	54,250	58,800	61,750
Extremely Low Income Limits	19,650	22,450	25,250	30,300	35,140	40,280	45,420	50,560
Low (80%) Income Limits	52,400	59,850	67,350	74,800	80,800	86,800	92,800	98,750

Temporary Relocation Assistance

The Guadalupe CDC recognizes that at times during housing rehabilitation projects, temporary relocation may be required, especially if the completion of the identified repairs imposes a health and safety risk to the occupants. When temporary housing is warranted, arrangements will be made for the period of time estimated by the contractor to complete repairs. Budgetary restraints and the lack of available temporary housing within the town, may limit the participant’s ability to temporarily relocate.

The Town will take the following steps to minimize the displacement of persons from their homes during rehabilitation:

1. The first alternative is to stage reconstruction activities to allow participants to remain during the rehabilitation.
2. As a second alternative, the Guadalupe CDC will encourage the homeowner to seek relocation from family or friends during the course of rehabilitation.



Household

Name: _____
Last Name First Name SSN Age M/F

Name: _____
Last Name First Name SSN Age M/F

Address: _____

City: _____

Home Telephone: _____

Business Telephone: _____

Housing Program

Please Choose One

Home Repair

3 BD Room

4 BD Room

Do You Own Property?

Yes No

This information is necessary and all questions must be answered to determine your home/property eligibility for the program for which you are applying for.

Home Ownership

Do you own a second home or Property?

Yes No

Do you have a Mortgage on your home?

Yes No

What is the year your home was built?

Are there any liens or judgments placed against your property?

Yes No

Have you ever received assistance from any Housing Agency?

Yes No

If Yes, Who from _____ When? _____

Household Information

List all members of the household

- | | | |
|----------|--------------------|--------------------|
| 1. _____ | <small>M/F</small> | <small>DOB</small> |
| 2. _____ | <small>M/F</small> | <small>DOB</small> |
| 3. _____ | <small>M/F</small> | <small>DOB</small> |
| 4. _____ | <small>M/F</small> | <small>DOB</small> |
| 5. _____ | <small>M/F</small> | <small>DOB</small> |
| 6. _____ | <small>M/F</small> | <small>DOB</small> |
| 7. _____ | <small>M/F</small> | <small>DOB</small> |
| 8. _____ | <small>M/F</small> | <small>DOB</small> |

Federal Data Collection Requirements

Please check the correct boxes that best describe your household

Race/Ethnicity

- Native American/Alaskan Native
- Asian/Pacific Islander
- African American/Black
- Hispanic
- Caucasian

Status

- Disabled
- Family (5 or more)
- Female Head of Household
- Male Head of Household

Please remember to complete all parts of the application. Attach all verification: of income, proof of ownership of your home and other back-up documentation/materials before sending in this application. Once the application is submitted you will receive a written notification. **Thank you for your cooperation.**



Name

Gross Monthly Income

Source

Address

List all members who are Employed 18 yrs and over

Name	Gross Monthly Income	Source	Address

List Your Total Monthly Payments: Car Loans, Credit Cards, etc.

Liabilities

Include any other income you receive

_____ \$ _____	Monthly Medical Expenses	\$ _____	_____ \$ _____
_____ \$ _____	Monthly Rent	\$ _____	_____ \$ _____
_____ \$ _____	Child Care Expense	\$ _____	_____ \$ _____

APPLICANT CERTIFICATION STATEMENT AND SIGNATURE

The Guadalupe Community Development Corporation (GCDC) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs:) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact The Guadalupe Community Development Corporation at 480-505-5378. Reasonable accommodations for the handicapped will be made upon request.

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission. If a person believes he or she was denied assistance in violation of this law, they should contact the Federal Trade Commission, Washington, D.C. 20580.

The Fair Housing Act prohibits discrimination in real estate related transactions, or in the terms of conditions of such a transaction, because of race, color, religion, sex, disability, familial status, or national origin. The Federal agency that is responsible for enforcing this law is the U.S. Department of Housing and Urban Development. If a person believes they have been discriminated against in violation of this law, they should contact the U.S. Department of Housing and Urban Development, Washington, D.C. 20410 or call (800) 669-9777.

We understand that persons employed by The Guadalupe Community Development Corporation and its elected or appointed officials, are expressly ineligible for the assistance if they have any direct relationship to implementation of GCDC program activities. The Guadalupe CDC will assist with the correct filing of a conflict of interest disclosure.

We understand that an applicant who is a relative of an employee, either appointed or elected, of The Guadalupe CDC must declare a conflict of interest (real or apparent) according to applicable regulations. The Guadalupe CDC will assist such an applicant in properly declaring a conflict of interest.

Applicant's Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____





Consent: I consent to allow The Guadalupe Community Development Corporation to request and obtain income information for the purpose of verifying my eligibility and level of benefits for Housing Rehabilitation Program.

Signatures:

Head of Household

Date

Spouse

Date

Other Family Member 18 and Over

Date

Other Family Member 18 and Over

Date

Other Family Member 18 and Over

Date

Other Family Member 18 and Over

Date

Other Family Member 18 and Over

Date



**Guadalupe
CDC**

Affordable Housing

MEMORANDUM OF UNDERSTANDING

Rehabilitation Grant Recapture Agreement

The undersigned single-family residence owner(s) has/have received information about the housing construction project being conducted in the Town of Guadalupe, by Guadalupe Community Development Corporation. It is understood that federal funds will be provided to pay for the construction of my residence and that the final dollar amount expended will not be known until the completion of the work is done. I agree to sign and abide by the terms of this Five-Year Forgivable Grant Agreement. I acknowledge of these documents. Residents Forgivable Grant will be based on 20 percent per year for five years from the date of the Recapture Agreement.

Homeowner

Date

Guadalupe CDC Housing Consultant

