# The Neighbor Project

THE NEIGHBOR PROJECT 32 S. BROADWAY AURORA, IL 60505 PHONE: 630-906-9400

### **Safety First Guidelines and Application**

## **ASSISTANCE AVAILABLE:**

Eligible City of Aurora homeowners may receive funding in the amounts of up to \$4,999 3-year forgivable loan, and for certain activities, additional funding of up to \$5,000 in the form of a deferred loan, shall be made by the Corporation to the Owners pursuant to the requirements of the Program for the rebate of costs of emergency or life and safety hazards for the Property.

Although The Neighbor Project administers this program, the program is funded by the City of Aurora. Homeowners who participate in the Program will be required to sign an agreement with the City of Aurora. In order to receive funds, all improvements need to be completed, verified by a follow-up inspection by The Neighbor Project and validated with detailed receipts within six months following the date of program agreement execution.

Funding is available in the amounts of up to \$4,999 3 year forgivable loan, and for certain activities, up to \$5,000 of additional funding in the form of a deferred loan, which shall be made by the Corporation to the Owners pursuant to the requirements of the Program for the rebate of costs of emergency or life and safety hazards for the Property. To participate in the program, the homeowner will agree to following:

- 1. A forgivable lien (second trust deed) for the cost of the repair to be attached to his/her property up to \$4,999, and deed restrictions for homeownership and property shall be forgiven after 3 years from the date of the project completion.
- 2. A lien (third trust deed) for the cost of the repair to be attached to his/her property in excess of \$4,999, and deed restrictions for homeownership and property until such time as the homeowner no longer owns or occupies the property or refinances and takes cash out.
- 3. If all Program conditions are met for each lien, the liens will be released and all covenants will re-convey upon property transfer.
- 4. If the property owner does not elect to live in the home as an owner occupant or sells the home following project completion within the first three years after project completion, 100% of the forgivable loan will be immediately due and payable to the City of Aurora.
- 5. If the property owner does not elect to live in the home as an owner occupant or sells the home following project completion, 100% of the deferred loan will be immediately due and payable to the City of Aurora.

# Provided that all Program conditions are met, a participating homeowner may also re-pay the loan early and without penalty.

# **ELIGIBLE SAFETY-RELATED REPAIRS ARE LIMITED TO:**

### Category A - Eligible activities that may not exceed \$4,999

-Furnace repair or replacement

-Electrical upgrades

-Plumbing improvements

-Porch repair or replacement

-Gutters, downspouts, and fascia repair or replacement

-Septic motor repair or replacement

-Well motor repair or replacement

-Exterior door repair or replacement

-Radon remediation

-Improvements to driveway, as long as additional, eligible improvements to household are also completed -Other improvements to be considered on a case by case basis and must be improved by the Aurora Neighborhood Development Department

# Category B - Eligible activities that may not exceed \$10,000

-Boiler repair or replacement

-Lead paint remediation

-Lead pipe replacement

-Mold remediation

-Asbestos remediation

-Replacement of sewer lines

-Roof repair and replacement

-Other improvements to be considered on a case by case basis and must be improved by the Aurora Neighborhood Development Department

# **APPLICANT ELIGIBILITY:**

- Applicants must complete a detailed application form providing information and allowing income and ownership verification.
- Applicants must allow an inspection of the entire property both before and after the work is done
- Property must be located within the City of Aurora city limits.
- Property must be a single-family residence <u>AND</u> owner-occupied.
- The structure must comply with the proper zoning standards for the parcel of land, and cannot be located within a flood plain zone.
- The structure must have a clear title. Clear title is defined for the program to be one, which states clearly who the property owner is. Examples of an unclear title which may be reason for denial include but are not limited to the following: excessive liens, ownership that is subject to change due to tax sale, contract purchaser, etc.

Applicants must have a household income less than 80% of median family income (see HUD Guidelines below).

Family Size	1	2	3	4	5	6	7	8
Income Limit	\$49,950	\$57,050	\$64,200	\$71,300	\$77,050	\$82,750	\$88,450	\$94,150

# Household 2019 Income Limits, per HUD Guidelines (June 1, 2019)

Failure of the applicant to abide by these criteria and qualifications is grounds for termination of eligibility and The Neighbor Project may request that any financial assistance already provided be immediately repaid in full with interest

If you have received assistance from <u>The Neighbor Project</u> or the <u>City of Aurora Division of Neighborhood</u> <u>Redevelopment (either as down payment assistance or home repair assistance)</u>, or <u>Rebuilding Together</u> <u>Aurora</u>, for housing repairs within the last 3 years or 36 months you are not eligible for the Safety First program. The 36 month period is counted from the date of the payment of the repairs. Once you have exceeded the 3 years or 36 months you may re-apply for assistance.

# **APPLICANT CHECKLIST:**

The fol	lowing items MUST be submitted in order to apply; applications without the following items will
automa	atically be denied, due to lack of information. If your application is approved, you will be required to
sign a p	program agreement which includes a lien against your property for the value of assistance.
Con	npleted Safety First Application with signatures;
	of of ownership by one of the following sources: Title, Deed, Warranty Deed, Quit Claim Deed
	surance Paperwork or Mortgage does NOT qualify as sufficient documentation); if you do not have a copy
-	your Deed, you may contact the Kane County Recorder of Deeds Office for a copy. They are located at 719
•	th Batavia Avenue; Building C; in Geneva, IL 60134; phone #: 630-232-5935.
	of of Homeowner Insurance Policy
	<b>RRENT</b> Mortgage Statement. Applicants must be up-to-date on payments.
	<b>RRENT</b> Electric or Gas Receipt, with the name of the owner/applicant on it.
	of of household income for <u>all household members 18 years and older</u> . The following documentation is
req	uired (provide copies – do not provide original documents):
	Copy of W2 forms for the most recent year (2018) for ALL household members who file; the W2 forms
	are a part of the income tax packet when you do your taxes.
	Copy of tax returns for the most recent year (2018) (if you do not have a copy or do not file, please request
	a transcript directly from the IRS for submittal with your application - IRS Form 4506-T - official IRS
	documentation is required, please be sure you send your IRS Form 4506-T to the proper address on the
	back of the page);
	Copy of income documentation from <u>all income sources</u> . This includes copies of award letters from
	income sources, such as :
	1) Social Security – Letter that states how much each person receives
	2) Public Aid – Letter that states how much each person receives
	3) Retirement and / or Pension Benefits – Letter that states how much each person receives
	4) Unemployment Compensation, Child Support, Rental Income, etc.) – Letter that states how much each
	person receives, or copy of rental contract or letter from tenant stating rent amount
	ALSO, two months of employment documentation (paycheck stubs) for all employed household
	members must be submitted. Most RECENT Paycheck stubs for the last two months for all employed.

Picture Identification/Driver's License for all household members over age 18.

# PLEASE DOUBLE-CHECK TO BE SURE YOU HAVE INCLUDED EVERYTHING LISTED ABOVE.

THE NEIG	HBOR PROJECT SAFETY	FIRST APPLICATION			
	Applicant Informa	tion			
Name:					
Date of birth:	Phone:				
Current address:					
City:	State:	ZIP Code:			
YesWonthly payment:How long at property?					
	<b>Employment Inform</b>	ation			
Current employer (If more than one emp	ployer use extra sheets if necessary):				
Employer address:		How long?			
Phone:	E-mail:	Fax:			
City:	State:	ZIP Code:			
Position:	Hourly Salary:	Annual income:			
	<b>Reason for Applica</b>	tion			
Describe necessary repairs:					
	Spouse Informati	on			
Name:					
Date of birth: SSN: Phone:		Phone:			
Spouse Employment Information					
Current employer:					
Employer address:		How long?			
Phone:	E-mail:	Fax:			
City:	State:	ZIP Code:			
Position:	Hourly Salary:	Annual income:			
List All Mem	bers of the Household (Use	Extra sheets as necessary)			
Name	Relationship	Age			

What	is your family status?	What i	What is your head of household?		
	Head of Household/Spou Head of Household/Spou None of the above	•		Female Male	
What Ethni	would you consider your city? Hispanic or Latino Not Hispanic or Latino	<ul> <li>What would you consider your R</li> <li>White</li> <li>Black/African American</li> <li>Asian</li> <li>American Indian/Alaska Native</li> <li>Native Hawaiian/Other Pacifi</li> <li>American Indian/Alaska Native</li> <li>White</li> </ul>	ve c Islande	r D	American Indian/Alaska Native <i>AND</i> White Asian <i>AND</i> White Black/African American <i>AND</i> White American Indian/Alaska Native <i>AND</i> Black/African American Other

### Signatures

By my signature, I hereby allow The Neighbor Project of Illinois to verify all the information given on this Safety First Program Application. This means that The Neighbor Project of Illinois may contact my employers, banks and other savings institutions, the Social Security Administration, Public Aid, and any other sources from which my household receives either earned or unearned income.

I certify that all statements made on this application are true and correct to the best of my knowledge and belief. I understand that any willful misstatement of material fact will be grounds for disqualification.

I have read, or have had explained to me, the following guidelines under which assistance is provided, and accept the provisions therein.

I agree to defend, indemnity and hold harmless, the City of Aurora, its official, commissioners and employees from liability and claim for any damages. I agree to defend, indemnity and hold harmless, the Joseph Corporation of IL, its official, commissioners and employees from liability and claim for any damages. I understand the conditions set forth in this application, and I agree to abide by them. I declare under penalty of perjury that the statements I have made in this application are true and correct.

Signature of applicant:	Date:
Signature of spouse:	Date:

FHH:	AMI: LBP Pamphlet given: 2019 HUD Income Limits (6/1/19)							
	Household of 1 people	Household of 2 people	Household of 3 people	Household of 4 people	Household of 5 people	Household of 6 people	Household of 7 people	Household of 8 people
30% of AMI	\$18,750	\$21,400	\$24,100	\$26,750	\$30,170	\$34,590	\$39,010	\$43,430
50% of AMI	\$31,200	\$35,650	\$40,100	\$44,550	\$48,150	\$51,700	\$55,250	\$58,850
80% of AMI	\$49,950	\$57,050	\$64,200	\$71,300	\$77,050	\$82,750	\$88,450	\$94,150
More than 80% AMI	More than \$49,950	More than \$57,050	More than \$64,200	More than \$71,300	More than \$77,050	More than \$82,750	More than \$88,450	More than \$94,150

# <u>City of Aurora</u> <u>Request for Use of Social Security Number</u>

#### Why do we collect your Social Security Number?

The Illinois Identity Protection Act, 5 ILCS 179/1 *et seq.*, requires local governments to implement an Identity Protection Policy that includes a statement of the purpose for requesting and using an individual's Social Security Number (SSN).

#### What is the purpose of this request for your Social Security Number?

You are being asked for your SSN for one or more of the following reasons: [Identify specific purpose(s) appropriate for the City of Aurora]

 Court order or subpoena;
 Law enforcement investigation;
 Debt collection;
 Internal verification;
 Administrative purposes; and/or
 Other:

#### What do we do with your Social Security Number?

We will only use your SSN for the purpose for which it was collected. We will **<u>not</u>**:

- Sell, lease, loan, trade, or rent your SSN to a third party for any purpose;
- Publicly post or publicly display your SSN;
- Print your SSN on any card required for you to access our services;
- Require you to transmit your SSN over the internet, unless the connection is secure or your SSN is encrypted; or
- Print your SSN on any materials that are mailed to you, unless State or Federal law requires that number to be on documents mailed to you, or unless we are confirming the accuracy of your SSN.

Name: (print)

Signature:

Date:

# Questions, concerns or complaints may be directed to:

City of Aurora, Neighborhood Redevelopment Division, 51 E. Galena Blvd, Aurora, Illinois 60505 (630) 256-3320