

# Dear Applicant:

Enclosed is the application you recently requested for the HomeCents Program. We have also attached a brochure that outlines the various features of this program.

This service provides homeowners with low, O% to 2% percent loans of up to \$25,000 for essential home rehabilitation. The repayment amount and the length of the loan term will vary according to your income. The program is for low and moderate-income families and individuals.

It is very important that you fully and honestly complete the application because that will determine your eligibility for this service. If at any time you need help with the application feel free to call us at 746-5431 and we will provide assistance. Ask for Kevin

Although Red River Valley Community Action administers the HomeCents Program, the City of Grand Forks – Office of Urban Development will be your loan portfolio manager if you are approved for a loan. They have established default and subordination policies and all loan payment will be made to their office.

Please feel free to contact us at any time with any questions you may have. We are here to help.

Thank you.



# RED RIVER VALLEY COMMUNITY ACTION HomeCents PROGRAM APPLICATION

is

Please ar complete	_	estions. Applic	cations will not	be proce	essed until all nec	essary infor	mation is
	of loan requ ou will need from contra		your project. A	_ (Pleas ctual loa	e enter your best an amounts will b	estimate of e based on e	the estimates
1.	APPLICA	ANT AND HO	USEHOLD IN	FORM	ATION:		
	Name:						
	Street Ad						
	City or To		Zip Code				
	Home Pho	one:		Work #	-	ş	
			ist dependents a embers residin		other members liv r household.	ving in your	home.
N	lame		Social Secur	ity#	Date of birth	Age	
R	ace:						
	White Black	□ Multi □ Other	□ Asian	□ Nat	ive American		
D	isabled:						
	Yes	□ No					

2. HOUSING TYPE: (check one)
<ul> <li>() Single Family Dwelling</li> <li>() Other – (please see note below.)</li> </ul>
<ul> <li>Note: If "Other" box is checked, please contact RRVCA to determine the eligibility of your home.</li> </ul>
Legal Property Description:
Year home was built:
Is your home of historical significance? Yes or No (circle one)
Do you live within the target area? Yes or No (circle one)
How many years have you owned your home?

3. TOTAL AN	NUAL INCON	ME:		
your reside Security m	ence. Please inc	clude; copy(s) of curr nt, Disability stateme	ent Federal Incom	n years of age residing in ne Tax Return, Social previous two months, or
PROVIDE INCOL OLDER. VERIFI			USEHOLD MEM	IBERS 18 YEARS OR
SOURCE OF INCOME	Head of Household	Spouse	Other household	Other household
			member	member
Rental Income				
Interest & Dividends				
Business Income				
Pension or Retirement				
Social Security or SSI				
Employment				
Other (Unemployment, etc.)				
TOTAL				
ASSETS – VERIFI	CATION REQU	IRED (Cash assets may	not exceed \$50,00	0)
TYPE	VALUE	NAME & ADDRESS O	F INSTITUTION OR	PROPERTY SITE
Checking Acct.				
Savings Acct.				
CD's / Money				
Markets				
Stocks				
Current Home				

Value

TOTAL

Any Additional Property Owned

()	Own my home. (Free Please include a legal	e & clear) ly recorded copy of deed.
()	I pay a mortgage payi Name:	
	City & Zip	Monthly payment: \$
()	Contract for Deed. (Name of original own	Must be registered with deeds office. Enclose copy). her:
	City & Zip	Monthly payment: \$
()		Annual amount:
()	Property insurance: (Must be current) Name of insurer: Address:	included in mortgage payment () yes () no
	City & Zip:	Monthly payment: \$
()	property. Name:Address:	ment / home improvement loans secured by this
	City & Zip:	Monthly amount: \$
Are you delinquent or loan or obligation? (C		mortgage, property taxes, any Federal debt or other Yes No
If yes, please specify:	12	
Monthly Household Heat: \$	expenses per month \$	annual
Electric: \$	per month \$	annual
A copy of electric and	per month (include I heat usage for 12 con may call XCEL Energy	e copy of one month's usage). secutive months must be included. To obtain at 1-800-895-4999.

4. EXPENSES: Please check all that apply:

# 5. LIABILITIES:

Liabilities	Monthly Payments
Name:	Payment Amount:
Address:	\$
	Months remain:
Account #	Unpaid balance:
	\$
Name:	Payment Amount:
Address:	\$
	Months remain:
Account #	Unpaid balance:
	\$
Name:	Payment Amount:
Address:	\$
	Months remain:
Account #	Unpaid balance:
	\$
Name:	Payment Amount:
Address:	\$
A	Months remain:
Account #	Unpaid balance:
	\$
Name:	Design out Amounts
Address:	Payment Amount:
Address.	Months remain:
Account#	
Account#	Unpaid balance: \$
Name:	Payment amount:
Address:	\$
	Months remain:
Account #	Unpaid balance:
· <del></del> ··	\$
Alimony/child support payments owed to:	\$
7 11 11 11 11 11 11 11 11 11 11 11 11 11	
Job-related expense (child care, etc.)	\$
	ll be used for statistical purposes only and will no
be used in determining eligibility:	(please check all that apply)
	11 7/
Caucasian African American	Native American

T

	_Hispanic	Other _	Over 62 years of age	
<b>7</b> <sub>∗</sub>	•	ctor will take into	are needed for your home. Please understand the consideration your ideas listed below in determining	
Com	ments:			

#### 8. ACKNOWLEGEMENT AND AGREEMENT

The undersigned specifically acknowledges and agrees that: (1) the loan requested by this application will be secured by the mortgage or deed of trust on the property described in this application; (2) the property will not be used for any illegal or prohibited purpose or use; (3) all statements made in this application are made for the purpose of obtaining the loan indicated herein; (4) the property will be owner occupied as indicated in this application; (5) verification or re-verification of any information contained in the application may be made at any time by the lender either directly or through a credit reporting agent, from any source named in this application, and the original copy of this application will be retained by the lender, even if the loan is not approved; (6) the lender will rely on the information contained in the application and I/we have a continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I/we have represented herein should change prior to closing; (7) in the event my/our payments on the loan indicated in this application become delinquent, the lender may, in addition to all their rights and remedies, report my/our name(s) and account information to a credit reporting agency.

### 9. BORROWERS' CERTIFICATION

The Undersigned certify the following:

- 1. I/We have applied for a home improvement loan from the City of Grand Forks. In applying for the loan, I/We completed a loan application containing various information on the purpose and the amount of the loan, employment and income verification, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
- 2. I/We understand and agree that the City of Grand Forks reserves the right to change the loan preview process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
- 3. I/We understand that I/We have the right to appeal if the application is denied. I/We also understand that I/We have the right to attend the Review Committee's meeting when my/our application is being reviewed.

4. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to
knowingly make any false statements when applying for this loan, as applicable under the
provisions of Title 18, United States Code, Section 1014.

## 10. AUTHORIZATION TO DISCLOSE INFORMATION

I (we) hereby authorize Red River Valley Community Action to disclose our social security numbers or any other information deemed necessary in conjunction with the application to the City of Grand Forks.

Homeowner's signature	Date
Homeowner's signature	Date
Co-signer signature(Contract for Deed)	Date

BORROWERS' AUTHORIZATION

To Whom It May Concern:

- 1. I/We have applied for a home improvement loan from the City of Grand Forks through their agent Red River Valley Community Action. As part of the application process, the City of Grand Forks and the mortgage insurer (if any), may verify information contained in my/our loan application and in other documents required in connection with the loan either before the loan is closed or as part of its quality control program.
- 2. I/We authorize you to provide to the City of Grand Forks and Red River Valley Community Action any and all information and documentation they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; liabilities information; and copies of income tax returns.
- 3. The City of Grand Forks and Red River Valley Community Action may address this authorization to any party named in the loan application.
- 4. A copy of this authorization may be accepted as an original.

Borrower's signature	Date	Co-Borrower's	Co-Borrower's signature			
To be completed by the intervie	Interviewers name					
This application was taken by:		Interviewers signature				
☐ Face-to face interview			interviewers signature			
│ □ Mail		Interviewer's p	Interviewer's phone number			
Name and Address of Interviewer's	Employer	Application Complete: Date				
Traine and Tradiess of Interviewer 5	Application Complete.					
	Signature:					
For internal use only:  □ Loan approved □ Loan denied						
Loan amount \$ No. of months \$per mont Signature of Loan Approval Official Date:				per month		