



## Application Instructions

An Application Form is enclosed with these Program Guidelines. Applicants are strongly encouraged to review the application form carefully and fully along with the attached official notices, privacy statement, and authorization forms prior to beginning the application.

In addition to the application, the City of Goldsboro is also required by the Department of Housing and Urban Development (HUD) to obtain the following documentation from each applicant. **Documentation should be from the current year.** Please do not submit outdated information, as this will delay the application review process.

**Any documentation submitted to the City of Goldsboro is kept strictly confidential.**

<b>Application Checklist: CDBG Housing Rehabilitation Program</b>	
<input type="checkbox"/>	Last 3 paycheck stubs of anyone living in your home that is employed.
<input type="checkbox"/>	Proof of any supplemental income such as child support, retirement, rent income, supplemental security income, commissions, overtime pay, severance pay, etc.
<input type="checkbox"/>	Last 2 years 1040 tax forms, if required to file.
<input type="checkbox"/>	Last 2 months checking/savings account statements.
<input type="checkbox"/>	Current mortgage statement, if applicable.
<input type="checkbox"/>	Current homeowners' insurance policy.
<input type="checkbox"/>	Current utility bill (electric, water, etc.)
<input type="checkbox"/>	Driver's license or State Issued ID.
<input type="checkbox"/>	General Warranty Deed
<input type="checkbox"/>	Receipt that taxes on property have been paid (no more than 1 year delinquent)

Once you have gathered all the above documents and completed the attached application form (beginning on the next page), please submit your application to Community Relations & Development Staff at City Hall.

**Please Note: Eligibility does not guarantee the receipt of financial assistance.**

<b>Case No:</b> <i>(Office Use Only)</i>		<b>Type of Assistance:</b>	0% Interest, Deferred Forgivable Loan
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**Instructions:** Please complete all fields in this application form to the best of your ability. If you have any questions, please contact the Community Relations & Development Staff at (919) 580-4359 or (919) 580-4318.

## Section 1. Property Condition

**Type of Assistance Requested (Primary Needs):** Considering the condition of your home, which **building systems** are in moderate to severe need of repair? Please select all that apply. (Later in the review process, a licensed contractor will visit your home to determine if any other building systems are in need of repair.)

<input type="checkbox"/> Foundation & Floors	<input type="checkbox"/> Roof	<input type="checkbox"/> HVAC/AC
<input type="checkbox"/> Interior Walls	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Windows/Doors
<input type="checkbox"/> Exterior Walls	<input type="checkbox"/> Electrical	<input type="checkbox"/> Egress (Exits)

**Other Needs:** Using the space below, please briefly describe any other major repair needs you have. Please refer to the Program Guidelines for more information on Eligible Rehabilitation Activities.

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## Section 2. Applicant & Household Information

<u>Applicant / Head of Household</u>		<u>Spouse/Partner/Other</u>	
Name:		Name:	
Present Address:		Present Address:	
City/State/Zip:		City/State/Zip:	
Telephone Number:		Telephone Number:	
Marital Status:		Marital Status:	
Date of Birth:		Date of Birth:	
Age:		Age:	
Sex:		Sex:	

<b><u>Applicant / Head of Household</u></b> (Continued)			<b><u>Spouse/Other</u></b> (Continued)		
Race:			Race:		
Social Security No.:			Social Security No.:		
Email Address:			Email Address:		
Name of Employer:			Name of Employer:		
Address of Employer:			Address of Employer:		
City/State/Zip:			City/State/Zip:		
Years Employed:			Years Employed:		
<b><u>Other Household Information</u></b>					
Total number of persons living in the household:					
Have you ever applied for or received assistance from any HUD funded program? (Y/N)					
Has the home previously been improved by use of a Federal Grant and/or a Federally subsidized loan for housing improvements? (Y/N) If yes, please provide date.					
<b><u>Section 3. Property Information</u></b>					
Homeowners Insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Insurance Company:		
Is this your Primary Residence?			Permanent Foundation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Owner-Occupied?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Deed in Name of:		
Address of Owner (if different from above):					
Heir to Property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Name of Heir:		
Address of Heir (Street/City/State/Zip):					
Date of Ownership?			Date of Occupancy?		
Year Built:	No. Rooms:		No. Bedrooms:	No. Baths:	
Family Room/Den:	Living Area:		SF Garage/Carport:	AC:	
Other Real Estate:			Value:		
Is there an existing mortgage on the property?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name/Address of Mortgage Lender:					
Original Mortgage Amount (\$):			Unpaid Balance (\$):		

Have you ever been obligated on a home loan, or a home improvement loan, which resulted in foreclosure, deed in lieu of foreclosure, or judgement? (Y/N)		( ) Yes	( ) No	
If yes, please provide the Name & Property Address of Lender:				
Do you own any other real estate?		( ) Yes	( ) No	
If yes, please list address(es):		Property # 1:		
Property # 2:		Property # 3:		
<b>(Section Below - Office Use Only. Skip to Section 4. Income Information)</b>				
Tax Map:		Parcel Number:		
Tax Value of Property Per Tax Statement (\$):		Female Head of Household?		
Remaining economic life of structure:				
If new resident, has applicant occupied home 90 days or longer?				
Estimated cost of general property improvements included in request for assistance:				
Type of Assistance Needed:				
<b>Section 4. Income Information</b>				
<b>Annual Income.</b> "Annual Income" is defined in 24 CFR Part 5 as the gross amount of income of all adult household members that is expected to be received during the coming 12-month period.				
	<u>Head of Household</u>	<u>Spouse/Partner or Other Income Producer</u>	<u>Other Income Producer</u>	<u>Other Income Producer</u>
Job # 1:				
Job # 2:				
Job # 3:				
Social Security:				
Retirement:				
Public Assistance:				
V.A.:				
Rent Income				
Interest/Investments:				
Other Income # 1:				
Other Income # 2:				
Totals (Sum Column):				
<b>Total Calculated Income of All Persons in Household (\$):</b>				

## **Section 5. Dependents & Other Information**

### **Dependent # 1**

Name:

Age:

Relationship:

Social Security Number:

If over eighteen (18), please explain dependency:

### **Dependent # 2**

Name:

Age:

Relationship:

Social Security Number:

If over eighteen (18), please explain dependency:

### **Dependent # 3**

Name:

Age:

Relationship:

Social Security Number:

If over eighteen (18), please explain dependency:

### **Dependent # 4:**

Name:

Age:

Relationship:

Social Security Number:

If over eighteen (18), please explain dependency:

### **Other Income Producing Household Members**

Name:

Social Security Number:

Name:

Social Security Number:

### **Nearest Relative Not Living With You**

Name:

Relationship:

Address:

Telephone:

Name:

Relationship:

Address:

Telephone:



## CDBG Housing Rehabilitation Program

### PERSONAL INFORMATION RELEASE AUTHORIZATION

To Whom It May Concern:

I/We hereby authorize the release of any personal and financial information requested, including:

Employment and income records

Checking account & savings deposit records and balances

Mortgage loan balance and payment history

A photographic copy of this authorization may be deemed to be the equivalent of the original and may be used as a duplicate original.

#### Acknowledgment

I acknowledge that I have received a copy of CDBG Housing Rehabilitation Program Privacy Statement.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Signature

# CDBG Housing Rehabilitation Program

## PRIVACY STATEMENT

We recognize and respect the privacy expectations of today's consumers and the requirements of applicable federal and state privacy laws. We believe that making you aware of how we use your non-public personal information ("Personal Information"), and to whom it is disclosed, will form the basis for a relationship of trust between us and the public that we serve. This Privacy Statement provides that explanation. We reserve the right to change this Privacy Statement from time to time consistent with applicable privacy laws.

In the course of our business, we may collect Personal Information about you from the following sources:

- From applications or other forms we receive from you or your authorized representative;
- From your transactions with, or from the services being performed by, us, our affiliates, or others;
- From the public records maintained by governmental entities that we either obtain directly from those entities, or from our affiliates or others; and

### Our Policies Regarding the Protection of the Confidentiality and Security of Your Personal Information

We maintain physical, electronic, and procedural safeguards to protect your Personal Information from unauthorized access or intrusion. We limit access to the Personal Information only to those employees who need such access in connection with providing products or services to you or for other legitimate business purposes.

### Our Policies and Practices Regarding the Sharing of Your Personal Information

We may share your Personal Information with our affiliates, such as insurance companies, agents, and other real estate settlement service providers. We also may disclose your Personal Information:

- to agents, brokers or representatives to provide you with services you have requested;
- to third-party contractors, mortgage lenders, insurance agents, or service providers who provide services on our behalf; and
- to others who provide products or services that we believe you may find of interest.

In addition, we will disclose your Personal Information when you direct or give us permission, when we are required by law to do so, or when we suspect fraudulent or criminal activities. We also may disclose your Personal Information when otherwise permitted by applicable privacy laws such as, for example, when disclosure is needed to enforce our rights arising out of any agreement, transaction, or relationship with you.

One of the important responsibilities of some of our affiliated companies is to record documents in the public domain. Such documents may contain your Personal Information.

\*APPLICANT COPY\*