

The Lancaster County Redevelopment Authority is offering a program for qualifying Low- and Moderate- Income homeowners to assist with infrastructure improvements required by the municipality. These repairs can include items such as the installation or repair of sidewalks, installation of sewer laterals, and installation of water lines.

There must be proof of requirement for the improvement from the borough to qualify. The home must be a single-family home which is your primary, year-round residence, in addition to meeting the income qualification.

The program is structured as a grant and will cover up to 50% of the project cost, with a maximum of \$3,500.00 in grant assistance per household. Any cost incurred in excess of this amount shall be the responsibility of the homeowner.

All information provided as part of the application process will be confidential. The borough will not have access to income information provided as a part of this application process. If interested, please complete, and return the included application to:

Lancaster County Redevelopment Authority
Attention: Rebeca Santos
28 Penn Square, Suite 200
Lancaster PA 17603

Please reach out with any questions,

Rebeca Santos
717-394-0793 Ext. 209
rsantos@lchra.com

2023 Application for
Homeowner Assistance Program

Date: _____

Property Owner Information

Name: _____

Address: _____

Phone Number: _____

Yes No Does Applicant own and reside in this property on a year-round, permanent basis?
(attach a copy of your property deed or current property tax bill as proof of ownership)

Household Composition

Indicate total number of persons residing at this address: _____

(indicate name, relationship and ages of all persons residing at this address)

<u>Name</u>	<u>Relationship</u>	<u>DOB</u>
_____	<i>Applicant</i>	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Race/Ethnicity (this section to be completed by Applicant)

(This information is being requested for federal reporting requirements only. You are not required to answer these questions but your response will be appreciated.)

Is applicant/head-of-household Hispanic? Yes No

Is applicant/head-of-household female? Yes No

Is applicant/head-of-household elderly? Yes No

Indicate Race of applicant/head-of-household (indicate most appropriate category)

- | | |
|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Black/African American & White |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> American Indian/Alaskan Native & White |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> American Indian/Alaskan Native & Black |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Asian & Asian |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Other Multi-Racial |

Disability Status (this section to be completed by Applicant)

Is any member of the household disabled? Yes No

Household Income

Determine the total annual income for all persons over the age of 18 residing at this address. Income includes gross wages before taxes, Social Security, Supplemental Social Security (SSI), retirement pensions, welfare, child support and/or alimony, veteran’s benefits, unemployment compensation, and workman’s compensation. Annual income must be determined based on the current periodic income of each household member projected forward for a year. Income from assets, including cash held in savings accounts, checking accounts, certificates of deposit, savings bonds, mutual funds or money market accounts; and the equity value of real estate (other than the applicant’s primary residence), must be included in calculating annual income if the total value of all assets exceeds \$5,000.

(Attach copy of current pay stubs; benefit statements; federal tax returns, etc. as proof of income.)

Indicate the range that best describes Applicant’s annual household income.

- | | |
|--|--|
| <input type="checkbox"/> Less than \$50,550 per year | <input type="checkbox"/> Less than \$83,700 per year |
| <input type="checkbox"/> Less than \$57,750 per year | <input type="checkbox"/> Less than \$89,500 per year |
| <input type="checkbox"/> Less than \$64,950 per year | <input type="checkbox"/> Less than \$95,250 per year |
| <input type="checkbox"/> Less than \$72,150 per year | <input type="checkbox"/> Income: \$_____ |
| <input type="checkbox"/> Less than \$77,950 per year | |

Construction Proposal

Describe the work to be completed. Include specific linear footage of water, sewer line or curbing; square footage of sidewalks; and unit prices as appropriate. (Attach a copy of the contractor’s proposal describing the scope of work, the cost and the specifications to be followed.)

The total Project Cost is: \$ _____

The amount of Grant Funds requested is: \$ _____

Contractor’s Name: _____

Contractor’s Address: _____

Owner Certification

In submitting this application for grant assistance through the Redevelopment Authority of the County of Lancaster, I/we certify that:

- 1. the information stated in this application regarding annual household income is true, complete and correct;
- 2. I/we are the owner(s) of record of the property described in this application and reside in this property as our principal residence
(send copy of deed or current property tax bill with application);
- 3. No construction contract for the work described in this application has been or will be entered into prior to the approval of this application.

I/we further understand that I/we are legally responsible for the accuracy and the completeness of the statements and representations made in this application and that any false statements or misrepresentations may subject me/us to legal action and penalties in accordance with federal law and the regulations of the US Department of Housing and Urban Development.

I/we further understand that the Redevelopment Authority has no obligation to grant funds requested in this application until and unless (1) this application is approved by the municipality and the Redevelopment Authority in accordance with the program eligibility guidelines as established in a Memorandum of Understanding between the Municipality and the Redevelopment Authority, and (2) the proposed improvements are completed in accordance with the Contractor’s proposal and local ordinances and requirements. It is understood that any changes to the Contractor’s proposal must be approved by the Municipality and the Redevelopment Authority in order to be reimbursed through this program.

Owner Signature

Date

Co-Owner Signature

Date

This marks the end of the homeowner section of the application.

Please return application and supporting documents by mail to:

Lancaster County Redevelopment Authority

Attn. R. Santos

28 Penn Square, Suite 200

Lancaster PA 17603

Page 6 is for Redevelopment Authority and Municipal use only.

Review and Determination of Eligibility (to be completed by Redevelopment Authority)

Total Household Size: _____

Actual Total Annual Household Income: \$ _____

Maximum Income for Eligibility: \$ _____

After review of the information presented by the Applicant, the Authority determines that the Applicant is ____ ELIGIBLE ____ INELIGIBLE for grant assistance through the Homeowner Assistance Program.

If the Applicant has been determined eligible, the Municipality certifies that, in accordance with the terms and conditions of the Memorandum of Understanding between Municipality and the Redevelopment Authority of the County of Lancaster,

1. To the best of its knowledge and belief, the information and representations made in this Application are true, complete and correct;
2. The proposed improvements represent only those required by the Municipality and will be completed in accordance with local ordinances and requirements; and that;
3. The proposed project cost is reasonable.

Upon issuance of a Certificate of Completion, we hereby request the Redevelopment Authority of the County of Lancaster to issue a check made payable to

_____ for 50% of the actual project cost (in an amount not to exceed \$3,500.00).

Municipal Representative

Date

Redevelopment Authority of the County of Lancaster

The Redevelopment Authority of the County of Lancaster approves a grant for the Applicant specified in this application. Upon receipt of an approved Certificate of Completion, we will issue payment to the contractor for the lesser of 50% of the actual project cost or \$3,500.00. All change orders that result in an increase in the project cost must be approved by the Redevelopment Authority in order to be reimbursed.

Rebeca Santos, Program Coordinator

Date