



City of Lima Department of Housing and Neighborhoods

50 Town Square, Lima, Ohio 45801-4900
Tel: 419.221.5146

Housing Repair Programs Application Packet

Dear Applicant:

Thank you for inquiring about City of Lima Housing Repair Programs. Our programs provide no-cost home repair or rehabilitation loans for eligible homeowners that may include plumbing, electrical, roof, furnace, ADA modifications, water heater, insulation, and other needs.

Loan eligibility is based on household income and varies depending on the program.

This application packet includes the following:

- The City of Lima Department of Housing and Neighborhoods Housing Repair Programs Flyer, which provides a description of our current programs and annual household gross income limits.
- The Application Checklist
- The Application for City of Lima Housing Repair Programs. The application must be completed in its entirety, and include all supporting documentation from **all household members who are 18 years and older**.

Should you need additional forms, or have additional questions about our programs, please contact the City of Lima Housing Loan Originator at the number listed below.

Sincerely,

City of Lima Department of Housing and Neighborhoods

Laurel McGee, Housing Loan Originator

Phone: 419.221.5147

Office Hours: Monday – Friday 8:00am to 5:00pm

Email: laurel.mcgee@cityhall.lima.oh.us



DEPARTMENT OF HOUSING & NEIGHBORHOODS

HOUSING REPAIR PROGRAMS



HOME Update

A repair loan program designed to assist resident homeowners by repairing major health and safety violations, up to a maximum of \$24,000. The home must meet City of Lima Property Maintenance Code Standards at completion of repairs.

Emergency Repair

A repair program designed to assist resident homeowners by repairing emergency major health and safety issues, up to a maximum of \$5,000.

Safe at Home

A repair program designed to assist resident homeowners over the age of 60 or with a disability. Eligible repairs include: handrails, grab bars, smoke & CO detectors, doorknobs and deadbolts, door repairs, security lighting, and minor bathroom modifications.

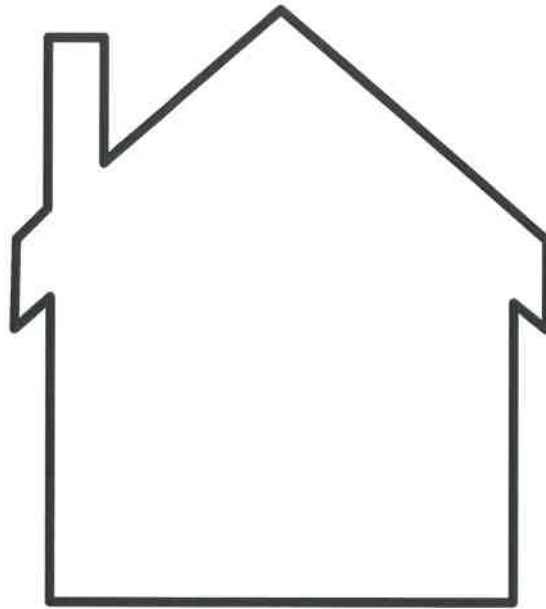
Better Together

A repair loan program designed to assist resident homeowners with health and safety repairs, and Lima Property Maintenance Code violations, up to a maximum of \$35,000.

The City of Lima Housing Repair Programs provide no-cost home repairs or rehabilitations for eligible homeowners. Repairs may include plumbing, electrical, roof, furnace, ADA modifications, water heater, insulation, and other needs. Eligibility is based on income and varies depending on household size.

For More Information, contact the Department of Housing and Neighborhoods at 419.221.5146.

FIX YOUR HOME WITH NO-COST REPAIR ASSISTANCE



ADA Modifications

Handrails
Grab bars
Accessible Bathtubs

Electrical System Upgrades

Circuit breakers
Wiring
Outlet / switch replacement

Heating & Cooling

Insulation
Water heater
Furnace

Exterior Repairs

Roof
Siding
Windows

Plumbing System

Upgrades
Bathroom fixtures
Water Lines
Sewer Lines

INCOME GUIDELINES

HH Income	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons
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Income Chart for HOME Update and Emergency Repairs

50% of Median	\$25,950	\$29,650	\$33,350	\$37,050	\$40,050	\$43,000	\$45,950
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Income Chart for Safe at Home and Better Together

80% of Median	\$41,550	\$47,450	\$53,400	\$59,300	\$64,050	\$68,800	\$73,550
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Household income cannot exceed the amounts listed on the income chart. The repayment amount for the loans reduce at the rate of 20% per year if the homeowner maintains insurance coverage*, retains ownership, and resides in the home for a period of 5 years. To determine eligibility for these loans, applicants must complete the Loan Application with supporting documents including:

- Recorded deed to the property
- Current homeowner's insurance policy (*or documentation that homeowner's insurance will be secured after repairs are made)
- Household income documentation (employer information, benefit information, bank account information)
- Better Together applicants must also complete a 2.5 hour property maintenance training program



City of Lima

Department of Housing and Neighborhoods

50 Town Square, Lima, Ohio 45801-4900
Tel: 419.221.5146

Housing Repair Programs Application Checklist

_____ The total gross income for the Applicant's household is within the program income guidelines.

_____ The applicant owns the home, lives in the home, and the home is located within the incorporated boundaries of the City of Lima.

_____ The applicant has not received prior funding from City of Lima Housing Repair Programs within the last ten (10) years from the date of the application.

_____ The applicant is current on all property taxes, or on a property tax payment plan.

_____ The home is covered under a current homeowner's insurance policy, or the applicant has provided documentation that homeowner's insurance will be secured after repairs are made. Applicant must provide proof of insurance with the application or have the insurance provider send a declaration page or intent to provide insurance once repairs are made to the attention of: **Housing Loan Originator.**

_____ The applicant is current on all mortgage payments.

_____ The applicant has provided a copy of the recorded deed to the property.

_____ The applicant has provided current income verification from all sources of income, including pay stubs, child support payments, a current award letter / benefits letter if receiving income from Social Security or other government programs.

Recipients of SSA & SSI need to attach your most recent award letter, which states that their monthly benefits are for the current year. If you do not have one, you will need to contact Social Security and ask them to send you one; SSA/SSI 800-772-1213 or www.ssa.gov.

For Child Support verification, please provide payment records for at least the past 3 months by accessing your account at <http://jfs.ohio.gov/ocs>. If you are unable to access your account, please call 1-800-860-2555.

ALONG WITH THE APPLICATION AND VERIFICATION FORMS, PLEASE SUBMIT:

1. Copy of the Deed to your property
2. Proof of Homeowners' Insurance
3. Property taxes must be current. The City of Lima will verify if Property Taxes are current through the Allen County Auditor's website. If recent payments have been made, please provide a copy of your paid receipt.
4. Mortgage payments must be current. The City of Lima will verify using the Mortgage Verification form.

I understand the information contained on this form will be used in determining my/our eligibility for my/our request for a loan under the City of Lima Housing Repair Programs and hereby certify the information is true and correct to the best of my knowledge and belief. I understand that I may be required to complete other forms and supply additional information in the processing of this application. I authorize the City of Lima to obtain verifications, employment verification, account balances and credit reports. I authorize the City of Lima official to enter onto my property and inspect the interior and/or exterior of structures for purposes of processing this application.

SIGNATURE OF APPLICANT(S) _____ DATE _____

_____ DATE _____

How did you hear about the City of Lima Housing Programs?

(circle) Newspaper - TV - Radio - Word of Mouth - Social Media - Other _____

If you have questions when filling out this application, call 419-221-5147





MUST BE FILLED OUT COMPLETELY

FOR OFFICE USE ONLY	
REC'D _____ # _____	
INSPECTION DATE _____	
D _____ U _____ E _____ DATE _____	

1st APPLICANT

LAST NAME	FIRST NAME	INITIAL	SOCIAL SECURITY #	BIRTH DATE
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2nd APPLICANT

LAST NAME	FIRST NAME	INITIAL	SOCIAL SECURITY #	BIRTH DATE
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MARITAL STATUS _____ ADDRESS _____ ZIP _____

PHONE (home) _____ (work) _____ (cell) _____

EMAIL ADDRESS _____

Other occupants and ages in household - DEPENDENTS

FULL NAME	AGE	RELATIONSHIP

Other occupants and ages in household - NON-DEPENDENTS

FULL NAME	AGE	RELATIONSHIP

Do you own the home at the address shown above? () YES () NO
 How long have you occupied the home? _____ YEARS
 Is this a single family dwelling? () YES () NO
 If not single family, how many units? _____
 Number of bedrooms _____

DEMOGRAPHICS	
Ethnicity (Choose One)	
()	Hispanic or Latino
()	Not Hispanic or Latino
Race (Choose those that apply)	
()	American Indian or Alaskan Native
()	Asian
()	Black or African American
()	Native Ahwaiian or Pacific Islander
()	White

Give the name and address of the person, institution or bank who holds the mortgage, note or contract on the home:

Present Balance: \$ _____ Estimate of Value: \$ _____ MIV _____ YEAR BUILT _____

List repairs or improvements which may be necessary to update or correct health or safety hazards:

EMPLOYMENT INFORMATION

1st APPLICANT

2nd APPLICANT

OCCUPATION _____

OCCUPATION _____

EMPLOYER'S NAME _____

EMPLOYER'S NAME _____

EMPLOYER'S ADDRESS _____

EMPLOYER'S ADDRESS _____

GROSS PAY PER MONTH \$ _____

GROSS PAY PER MONTH \$ _____

DATE STARTED _____

DATE STARTED _____

MONTHLY INCOME INFORMATION

Gross wages for 1st Applicant	\$ _____
Gross wages for 2nd Applicant	\$ _____
Pensions or Annuities	\$ _____
Social Security	\$ _____
Child Support	\$ _____
Income from Other Adults	\$ _____
Rental Income (gross)	\$ _____
Other Income (Explain)	\$ _____
<hr/>	
TOTAL Gross Monthly Income	\$ _____

ASSETS

Checking	\$ _____
Savings	\$ _____
Automobiles	\$ _____
U.S. Savings Bonds	\$ _____
Other Real Estate (Present Market Value)	\$ _____
Stocks, Bonds, Other	\$ _____
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TOTAL Assets	\$ _____

MONTHLY HOUSING EXPENSE

Mortgage Payment	\$ _____
House Insurance	\$ _____
Property Taxes	\$ _____
Utility Costs:	
Gas/Heat	\$ _____
Electric	\$ _____
Water/Garbage	\$ _____
TOTAL Housing Costs	\$ \$ _____

OTHER MONTHLY EXPENSES

Name of Account	Monthly Pmt.	Balance
Automobiles		
_____	\$ _____	\$ _____
Loans or Other Notes		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Charge/Installment accounts		
_____	\$ _____	\$ _____
<hr/>		
Other Monthly Expenses		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
TOTAL Other Monthly Expenses		\$ _____

If more room is needed, please place additional information on the back of the application form.

REQUEST FOR VERIFICATION OF EMPLOYMENT

APPLICANT

WHERE DO YOU WORK

Name _____
Address _____
City, State, Zip _____
Social Security # _____

I understand that the City of Lima will need to verify the information provided in the Housing Repair Loan application in order to ascertain my/our eligibility to participate in the program. I hereby authorize the release of information, including employment history, credit history and other appropriate information necessary for the processing of my/our application.

Signature of Applicant _____ Date _____

***** APPLICANT - DO NOT WRITE BELOW THIS LINE *****

RETURN IT WITH THE APPLICATION TO THE
CITY OF LIMA DEPARTMENT OF HOUSING AND NEIGHBORHOODS

The requested information in this Verification of Employment is for the confidential use of the City of Lima, Ohio, and its Agents in processing the Housing Repair Loan Application. We will appreciate your cooperation in supplying the information requested below.

Sincerely,

City of Lima
Department of Housing and Neighborhoods
50 Town Square
Lima, Ohio 45801
Phone: 419-221-5147
email: laurel.mcgee@cityhall.lima.oh.us

Laurel McGee
Housing Loan Originator

Position Held _____

Compensation: (Actual amounts received past 12 mos.)

Dates of Employment _____

Base Salary or Wages _____

Hourly Rate of Pay _____

Overtime _____

Approximate Hours Per Week _____

Commissions _____

If seasonal employment, please indicate layoff period. _____

Bonus _____

TOTAL _____

Probability of Continued Employment _____

Information provided by: _____

Signature _____ Title _____

REQUEST FOR VERIFICATION OF ACCOUNTS

APPLICANT

YOUR BANK

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

SOCIAL SECURITY # _____

I understand that the City of Lima will need to verify the information provided in the Housing Repair Loan Application in order to ascertain my/or eligibility to participate in the program. I hereby authorize the release of information, including employment history, credit history and other appropriate information necessary for the processing of my/our application

SIGNATURE OF APPLICANT _____ DATE _____

***** APPLICANT DO NOT WRITE BELOW THIS LINE *****

RETURN IT WITH THE APPLICATION TO THE CITY OF LIMA DEPARTMENT OF HOUSING AND NEIGHBORHOODS

The requested information in this Verification of Accounts is for the confidential use of the City of Lima, Ohio and its Agents in processing the Housing Repair Loan Application. We will appreciate your cooperation in supplying the information requested below.

Sincerely,

City of Lima
Department of Housing and Neighborhoods
50 Town Square
Lima, OH 45801
Phone: 419-221-5147
email: laurel.mcgee@cityhall.lima.oh.us

Laurel McGee
Housing Loan Originator

SAVINGS ACCOUNT

Account # _____
Balance _____

Account # _____
Balance _____

CHECKING ACCOUNT

Account # _____
Balance _____

Account # _____
Balance _____

CERTIFICATE OF DEPOSIT

Account # _____
Balance _____
Maturity Date _____

Account # _____
Balance _____
Maturity Date _____

INFORMATION PROVIDED BY:

SIGNATURE _____ TITLE _____ DATE _____

REQUEST FOR VERIFICATION OF BENEFITS

APPLICANT

BENEFIT PROVIDER

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

SOCIAL SECURITY # _____

I understand that the City of Lima will need to verify the information provided in the Housing Repair Loan application in order to ascertain my/our eligibility to participate in the program. I hereby authorize the release of information, including employment history, credit history and other appropriate information necessary for the processing of my/our application.

SIGNATURE OF APPLICANT _____

DATE _____

******* APPLICANT - DO NOT WRITE BELOW THIS LINE*******

RETURN IT WITH THE APPLICATION TO THE CITY OF LIMA
DEPARTMENT OF HOUSING AND NEIGHBORHOODS

The requested information in this Verification of Benefits is for the confidential use of the City of Lima and its Agents in processing the Housing Repair Loan Application. We will appreciate your cooperation in supplying the information requested below.

Sincerely,

City of Lima
Department of Housing and Neighborhoods
50 Town Square
Lima, OH 45801
Phone: 419-221-5147
email: laurel.mcgee@cityhall.lima.oh.us

Laurel McGee
Housing Loan Originator

A.	Welfare Assistance (per month)	\$ _____
B.	Social Security Income: Gross Amount	\$ _____
	Medicare Deduction	\$ _____
	Net Amount	\$ _____
C.	Supplemental Security Income (per month)	\$ _____
D.	Military or Veteran Pension (per month)	\$ _____
E.	Pension (per month)	\$ _____
F.	Other Income (per month)	\$ _____

SIGNATURE _____

TITLE _____

DATE _____

REQUEST FOR VERIFICATION OF MORTGAGE

APPLICANT

WHO HAS YOUR MORTGAGE

NAME _____

NAME _____

ADDRESS _____

ADDRESS _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

SOCIAL SECURITY # _____

I understand that the City of Lima will need to verify the information provided in the Housing Repair Loan application in order to ascertain my/our eligibility to participate in the program. I hereby authorize the release of information, including employment history, credit history and other appropriate information necessary for the processing of my/our application.

SIGNATURE OF APPLICANT _____ DATE _____

*******APPLICANT - DO NOT WRITE BELOW THIS LINE*******

RETURN IT WITH THE APPLICATION TO THE
CITY OF LIMA DEPARTMENT OF HOUSING AND NEIGHBORHOODS

The requested information in this Verification of Mortgage is for the confidential use of the City of Lima, Ohio and its Agents in processing the Housing Repair Loan Application. We will appreciate your cooperation in supplying the information requested below.

Sincerely,

City of Lima
Department of Housing and Neighborhoods
50 Town Square
Lima, OH 45801
Phone: 419-221-5147
email: laurel.mcgee@cityhall.lima.oh.us

Laurel McGee
Housing Loan Originator

***IF THERE IS A FEE TO BE CHARGED FOR THIS DATA, PLEASE CONTACT LAUREL MCGEE AT 419-221-5147 BEFORE PROCESSING. THANK YOU!

MORTGAGE DATA

PRPPERTY ADDRESS _____

MORTGAGE DATE _____ ORIGINAL AMOUNT \$ _____

MATURITY DATE _____ PRESENT BALANCE \$ _____

TYPE OF MORTGAGE: CONVENTIONAL _____ FHA _____ VA _____

MONTHLY PAYMENT: Principal & Interest \$ _____
Mortgage & Insurance \$ _____
Real Estate Tax Escrow \$ _____
TOTAL \$ _____

ARE PAYMENTS CURRENT? YES _____ NO _____ IF NO, AMOUNT IN ARREARS \$ _____

HAS THIS ACCOUNT BEEN SATISFACTORY? YES _____ NO _____

INFORMATION PROVIDED BY: _____

SIGNATURE _____ TITLE _____ DATE _____