

INCOME GUIDELINES – In most cases, income for the purposes of the Rehabilitation Program is defined in the following manner:

For all adult members of the household, income includes all: wages and salaries, interest, net business income, social security, pensions, and periodic payments including transfer payments, alimony, V.A. benefits, educational benefits, income from assets, etc. Income measure is gross income (except for business income).

In order to be eligible for assistance under this program, each household total income must be at or below 80% of the area median. Median household income is based upon statistical data provided periodically by the U.S. Department of Housing and Urban Development (HUD). The following income figures are adjusted for household size and are updated annually.

HUD INCOME LIMITS (2022)

# of People in Household:	1 PERSON	2 PERSONS	3 PERSONS	4 PERSONS	5 PERSONS	6 PERSONS	7 PERSONS	8 PERSONS
Income Limit	\$62,600	\$71,550	\$80,500	\$89,400	\$96,600	\$103,750	\$110,900	\$118,050

FINANCIAL ASSISTANCE – Deferred payment loans are available up to \$35,000. The deferred payment loans are secured through a mortgage note and lien on the property to be rehabilitated, in the same way as they are for conventional loans. Deferred payment loans are at a 0% interest. No payment will be required if you qualify for a deferred loan at the time that the work is done on your property. **The deferred loan will become payable in full if the property is sold or transferred in any manner or the applicant ceased to reside in the property.**

APPLICATION PROCESS – Selection for funding is competitive. Applications will be handled based upon a priority ranking. If a waiting list for assistance exists at the time of your application, your project will be ranked and then added to the list. The OCD will inform you of your position on the waiting list. Please feel free to contact the OCD at any time to get an update on your current position. When it comes time for your application to be processed, if six (6) months have passed since your original application, you will be required to update any information which has changed.

After you return this application, we will schedule a walk-through of the property with you to determine property needs and the likelihood of funding. If eligible, a building will be ranked numerically based upon a priority ranking. Priority ranking criteria are the following: children with elevated blood level; occupant children under six and significant levels of lead hazards. The Program will focus on children under 6 with particular attention to houses with EBL children.

ELIGIBLE IMPROVEMENTS – Correction of all code violations is required for participation in the Housing Rehabilitation Program. Any items determined to be code violations by the Housing Code Inspector and/or Fire Marshal must be included in the Project. Incipient code violations, which are those items which may become code violations in the near future, are also eligible and are highly recommended for inclusion if funds are available. If hazardous materials exist (i.e. asbestos, lead based paint) and are of a concern due to condition, necessary abatement will be part of this project. Cost-effective energy conservation improvements and modifications to improve handicapped accessibility to the unit may also be considered, as appropriate, if

estimate, for the work items to be performed. Any work items which are initiated prior to the Project Manager's inspection will not be eligible for financing under the Rehabilitation Program. The Project Manager will meet with you to secure your approval of the work to be performed.

All lead control specifications will be developed by a state certified supervisor under contract with OCD. Bid specifications will be prepared that meet OCD standards for abatement and management plans, state regulation, and HUD guidelines. Requirements for worker protection will be included in the specifications. Corrections to code violations will be coordinated with the Building Code Inspector and Project Manager. All units within the structure will be required to be brought up to code. Interiors, exteriors, garages, out buildings, soil remediation measures and relocation may be included in the specifications.

BLOOD LEAD TESTING – All children in the home under age six must have a blood lead screening completed and you must send a copy of the blood lead test to OCD along with your application.

LOAN REVIEW COMMITTEE – All loans are subject to approval by the Enfield Loan Review Committee. The Committee is made up of representatives of the community, and evaluates the financing proposed for your rehabilitation work. Some considerations taken into account in the Loan Review Committee approval process include the total of all liens on the home in relationship to its value, the owner's loan to value ratio, status of property taxes, etc. The Committee may also consider exceptions to the financing terms outlined in these Guidelines.

BID PROCESS – As part of this program, the OCD solicits quotes/bids from contractors. If the Project Manager's estimate of the work to be done is less than \$15,000, competitive bids will be solicited. If it is estimated that the work will exceed \$15,000, the work must be put out to public competitive bid. Bidders must attend a pre-bid walk through if determined by OCD. The bidding period is normally two weeks, at the end of which the bids received will be opened and read aloud by OCD staff. You may, if you wish, be present at the bid opening. The bids received will then be compared for consistency with the OCD estimate. The OCD reserves the right to reject any and all bids.

The OCD maintains a list of eligible contractors, and only bids from the contractors on this list will be accepted. You may select contractors whom you wish to bid on the work; however, if they are not on the OCD list they must complete an application prior to bidding on the project to allow the OCD to check references and background. Applications are available at the OCD.

The OCD will fund up to predetermined caps of the lowest responsible credible bidder. The Loan Review Committee reviews each case and approves funding. The OCD will prepare contracts according to OCD models for Owner/Town and Owner/Construction Contractor.

AGREEMENTS – Once you accept the bid, a Memorandum of Agreement will be signed between you and the OCD concerning your participation in the Program. That Agreement addresses such issues as non-discrimination, occupancy, correction of code violations, and so forth. Once you have signed this agreement, a Construction Agreement will be prepared by the OCD and executed between you and the contractor.

At the time that the Construction Agreement is signed, you will be required to close on your loan with the Town. The loan funds will be held in escrow by the Town. The Town will pay the contractor directly upon completion of the work as outlined in the Construction Agreement.

SUMMARY OF LEAD-BASED PAINT REQUIREMENTS AS PER STATE AND FEDERAL REGULATIONS

The OCD will adhere to the following State and Federal regulations and any amendments that may occur in the future:

	Subpart of Rule/Type Program	Construction Period	Requirements
J.	Rehabilitation Assistance		
	1. Property receiving less than or equal to \$5,000 per unit	Pre-1978	<ul style="list-style-type: none"> ❖ Provision of pamphlet ❖ Paint testing of surfaces to be disturbed, or presume LBP ❖ Safe work practices in rehab. ❖ Repair disturbed paint. ❖ Notice to occupants.
	2. Property receiving more than \$5,000 and up to \$25,000	Pre-1978	<ul style="list-style-type: none"> ❖ Provision of pamphlet. ❖ Paint testing of surfaces to be disturbed, or presume LBP ❖ Risk assessment. ❖ Interim controls. ❖ Notice to occupants. ❖ Ongoing LBP maintenance if HOME or CILP.
	3. Property receiving more than \$25,000 per unit	Pre-1978	<ul style="list-style-type: none"> ❖ Provision of pamphlet. ❖ Paint testing of surfaces to be disturbed, or presume LBP ❖ Risk assessment. ❖ Abatement of LBP hazards. ❖ Notice to occupants. ❖ Ongoing LBP maintenance.

Current Assets: List all assets, including but not limited to bank accounts, retirement accounts, investments, real estate, etc.

Type of Asset	Current Balance	Additional Information
Checking Account	\$	
Savings Account	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Current Debts and Credit References: List all loans, installment accounts, and debts now owing or recently paid to banks, loan companies, credit unions, and others. Include alimony, child support, maintenance payments, etc., if applicable. Use additional sheets of paper, if necessary. Include co-applicant information if this is a joint application.

Creditor	Last Four # of Account Number	Debt in Whose Name	Monthly Payment	Balance
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$

Please list all **unusual** monthly expenses (i.e. medical expenses), if any. Attach a separate sheet if necessary.

Homeowners Insurance: Homeowners must have current insurance and maintain insurance over the life of the loan for a property to be eligible for rehabilitation. The Town of Enfield should be listed on the policy as an additional party or loss payee.

Attach a copy of your Certificate of Insurance which you can obtain from your Insurance Agent. If your property is in Zone A of the FIRM (Flood Insurance Rate Map), then you will be required to provide flood insurance.

I currently have active insurance on my property and I agree that if I am approved for the Housing Rehabilitation Loan Program, I will contact my Insurance Agent to add the Town of Enfield as an additional party or loss payee.

I agree I disagree

Additional Information Needed:

• Purchase Date of Property to be Rehabilitated:

• Are there any young children with elevated blood lead levels (EBL) residing in the building? Yes No

• Are there any children under six residing in the building? Yes No

**Any children under six must have a blood lead test sent with your application.

• Has the property ever been tested for lead-based paint? Yes No

If yes, when? Did it test positive? Do you have a code or lead order?

• Have you ever been or are you now in the process of foreclosure? Yes No

• Have you ever had any judgments or other legal proceedings against you? Yes No

• Have you gone through bankruptcy in the past ten (10) years? Yes No

If yes, please explain:

• Are you co-maker, endorser or guarantor for others? Yes No

If yes, please explain:

• Nearest Relative Not Living with You:

Name

Relationship

Address

TOWN OF ENFIELD
OFFICE OF (2120) COMMUNITY DEVELOPMENT
HOUSING REHABILITATION PROGRAM
SINGLE FAMILY, OWNER-OCCUPIED HOUSING

APPLICANT CERTIFICATION

I certify that the above information is true and correct to the best of my knowledge. I also authorize the Town of Enfield to verify any and all information stated above.

I certify that I have received, read and understand the HUD Notification “Protect Your Family From Lead in Your Home”. To locate this form, please go to <https://portal.ct.gov/-/media/DOH/0CDBG-Grants-Manual-Docs-May-2020/76Protect-Your-Family-from-Lead-Pamphlet.pdf?la=en> which informs you of the potential risk of the lead hazard exposure from renovation activity to be performed in your dwelling unit.

I certify that a copy of the Enfield Housing Rehabilitation Program Guidelines was provided and that I have read and understand same. I further certify that I have read, understand and have signed the Memorandum of Understanding for the Rehabilitation Program.

DATE

APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

NOTE: THE APPLICANT(S) MUST BE THE HOMEOWNER ON THE TITLE OF THE PROPERTY. IF THERE ARE MULTIPLE HOMEOWNERS, THEY MUST ALL BE REPRESENTED ON THE APPLICATION AND MUST SIGN ALL REQUIRED DOCUMENTS

**TOWN OF ENFIELD
OFFICE OF ECONOMIC & COMMUNITY DEVELOPMENT
HOUSING REHABILITATION PROGRAM
SINGLE FAMILY, OWNER-OCCUPIED HOUSING**

MEMORANDUM OF UNDERSTANDING

The Town of Enfield's Housing Rehabilitation Program is funded with federal and state monies made available through the Small Cities Community Development Block Grant (CDBG) and is subject to various federal, state and local regulations. It is important that you, the homeowner, understand and agree to the requirements for participation in the Program.

1. I understand that the next step in the qualification process is to have the property inspected by the Town for compliance to building, fire, and housing codes; and, if there is a child with an elevated blood lead level or if there are children under six in a pre-1978 unit, the OCD will follow all State and Federal regulations regarding lead hazard control/abatement. I acknowledge that once the inspection and testing is done, any code violations, including the presence of lead-based paint, must be corrected within a reasonable time whether we receive the OCD funds or not.
2. I understand that any repair or construction work that I intend to do as an owner in the house, from now until OCD funded construction ends, will be submitted to OCD for advance review. I understand that inspections will be scheduled and analyzed with the assumption that the conditions in the property remain the same and may be regarded as credible pre-abatement lead dust and lead hazard conditions.
3. I understand that conditions of this funding will be enforced under a defined contract period which begins from the date of the executed contract between the Town and residential building owner.
 1. The building will be (physically) maintained, with monitoring to be done by Town officials:
 - a. The owner will arrange entry to permit the Town to inspect the property and all units at reasonable times. Tenants will be notified in writing by the owner with entry secured by the owner for inspection, construction work and upon request in a timely schedule.
 - b. Owner measures designated in the lead hazard control/abatement plan (specification) will be undertaken on a timely schedule.
 - c. All code measures will be observed for the full term of the contract.
 - d. The Lead Management Plan spelled out in the Lead Specification will be followed.
4. Personal valuables will not be the responsibility of OCD or the construction contractor. Valuables, such as electronics and jewelry, will be removed from the construction site.
5. An encumbrance will be filed by the Town on the land record for the term of the contract. The deferred loan will become payable in full if the property is sold or transferred in any manner (such as death of the property owner, sale of the home, etc.).
6. Connecticut law allows a household hazardous waste exemption if the total waste of a project is less than 10 cubic yards of waste. I accept responsibility for the waste if it is under 10 cubic yards and if it contains only materials from my project. I will take this material to the Town dump as soon as the contractor turns it over.
7. I understand that once construction begins and until after clearance and I am informed by OCD, I will

- agree that I may have to vacate the premises if the nature of construction warrants such action.
8. I understand that the correction of all housing code violations and lead hazard control/abatement on the property will be the primary purpose of the Program. I agree that, as part of my participation in the Program, all housing code violations and lead hazard control/abatement must be corrected.
 9. I understand that eligibility for the Program is based upon household income, which must be within the levels for low- and moderate-income households as defined in the Program Guidelines. Income will be verified as defined in the Program Guidelines.
 10. I understand that, if the property is determined by the OCD to be historic, it must be rehabilitated according to the Secretary of the Interior's Standards.
 11. I understand that my application is subject to approval by the Enfield Loan Review Committee. I further understand that the Loan Review Committee may take into account some or all of the following in evaluating loans: the extent of the rehabilitation; the value of the property in relationship to the outstanding debt secured by mortgage; the owner's debt-to-income ratio; whether taxes and sewer fees due on the property are current; the ability of rental property to generate sufficient income to cover expenses, and so forth.
 12. I understand that the Town is bound by low-bid requirements, and therefore the loan may only be in the amount of the lowest responsible bid. I have the right to invite general contractors of my choosing to bid on the work, subject to approval by the OCD. I understand that the contract for work will be between the contractor and me, and the final selection of the contractor is my responsibility.
 13. I understand that modifications may arise due to unforeseen problems. Modifications will be allowed only upon prior approval of the OCD through a change order.
 14. I understand that this project is subject to federal and state acts, laws and regulations pertaining to lead-based paint and those regulations require the following: in buildings constructed prior to 1978 where a child under the age of 6 years resides and where painted surfaces are defective, that those paint surfaces be tested for toxic levels of lead. These regulations further require that, in a building where a child under the age of 6 years resides and said child has an identified elevated blood lead level (EBL), that intact paint surfaces be tested for toxic levels of lead. Should toxic levels of lead be detected, appropriate lead testing and abatement procedures must be implemented in accordance with State Department of Health Services regulations.
 15. I have also received and reviewed a copy of the pamphlet "Protect Your Family From Lead In Your Home".
 16. I agree to maintain adequate homeowner's insurance for the life of any loan made, with the Town of Enfield Listed as an additional certificate holder.
 17. I agree that there shall be no discrimination upon the basis of race, color, religion, creed, ancestry, age, sex, marital status, lawful source of income, national origin, sexual orientation, familial status, learning disability or mental or physical disability, in the sale, lease or rental of this property or in the award of the construction contract.
 18. I understand and agree that I will cooperate with the OCD during all stages of this project by executing all documents, sign-offs, product selections etc. in a timely fashion. I understand that my failure to do so may cause unnecessary delays and increase costs of the project.

19. I acknowledge that the property receiving the housing rehabilitation loan funding must be my primary residence throughout the life of this loan.

I have reviewed, understand and agree to the provisions stated in this Memorandum of Understanding.

DATE

APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

NOTE: ALL PROPERTY OWNERS MUST SIGN

**TOWN OF ENFIELD
OFFICE OF ECONOMIC & COMMUNITY DEVELOPMENT
HOUSING REHABILITATION PROGRAM
SINGLE FAMILY, OWNER-OCCUPIED HOUSING**

WALK AWAY POLICY

The Town of Enfield, under the direction of the Connecticut Department of Housing, has adopted the following “Walk Away Policy” for its Housing Rehabilitation Program:

All code violations and identified lead hazards must be addressed when financial assistance is provided for the rehabilitation. The maximum dollar amount available to assist property owners is \$35,000 per unit. Other funding sources include:

1. The Community Renewal Team;
2. Capital for Change;
3. Funds provided by the participating homeowners own resources;
4. Insurance claims paid out for property damage.

If there are not sufficient funds available to cover the probable costs to correct code violations and undertake the required lead abatement/reduction the Town will not commence work on the project.

ACKNOWLEDGEMENT

I have received a copy of the Town of Enfield’s Walkaway Policy and have read and understand the policy.

DATE

APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

DATE

REPRESENTATIVE OF THE OFFICE OF
ECONOMIC & COMMUNITY DEVELOPMENT

**TOWN OF ENFIELD
OFFICE OF ECONOMIC & COMMUNITY DEVELOPMENT
HOUSING REHABILITATION PROGRAM
SINGLE FAMILY, OWNER-OCCUPIED HOUSING**

RELEASE OF APPLICATION MATERIALS

TO: The Town of Enfield
Office of Economic & Community Development

RE: Release of Application Materials

I understand that as part of my participation in the Town of Enfield’s Housing Rehabilitation Program I am required to adhere to federal lead-based paint regulations. I further understand that the Town of Enfield works with several partners which assist with the identification of lead based paint and address lead based paint concerns. Therefore, in the interest of cooperating with the Town of Enfield so as to allow its Office of Community Development to comply with lead based paint regulations, I agree to allow copies of my application and income documentation be provided to these partners – specifically the Lead Elimination Action Program administered by the ACCESS Agency and the LEAPP Program, administered by the Hartford Children’s Hospital.

DATE

APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

**TOWN OF ENFIELD
OFFICE OF ECONOMIC & COMMUNITY DEVELOPMENT
HOUSING REHABILITATION PROGRAM
SINGLE FAMILY, OWNER-OCCUPIED HOUSING**

RELEASE FOR CREDIT CHECK

The Office of Community Development is required to conduct a credit check for all potential housing rehabilitation applicants.

Please sign below if you are in agreement:

PRINTED NAME OF APPLICANT

DATE

SIGNATURE OF APPLICANT

PRINTED NAME OF APPLICANT

DATE

SIGNATURE OF APPLICANT

TOWN OF ENFIELD
OFFICE OF ECONOMIC & COMMUNITY DEVELOPMENT HOUSING
REHABILITATION PROGRAM
SINGLE FAMILY, OWNER-OCCUPIED HOUSING

CHECK LIST

Before submitting your application to the Office of Economic & Community Development, please make sure you have attached all the following documents:

1. A copy of the previous two years IRS Form 1040 (and/or other tax forms) for each person living in the household
2. A copy of the past three (3) consecutive months pay stubs or verification of current income for each person in the household (i.e. Social Security, pension, alimony, child support, etc)
3. A copy of lead blood test report for all children under 6 living in the household (if applicable)
4. A copy of your Certificate of Home Insurance
5. Signed copy of the Applicant Certification
6. Signed copy of the Memorandum of Understanding
7. Signed copy of Walkaway Policy
8. Signed copy of the Release of Application Materials
9. Signed copy of Release for Credit Check
10. Completed Rehabilitation Work Needed form

Note: All information (blanks) requested must be clearly filled in and/or attached or the application will be returned for completion. This may delay the Office of Economic & Community Development in reviewing your application.

Should you have any questions regarding the completion of this application, please call the Office of Economic & Community Development at (860) 253-6390.