



## Pwogram Prè Reyabilitasyon Lojman

### Apèsi sou Pwogram

nan Ofisyèl vil Randolph yo ansanm ak Bailey Boyd Associates ak The Resource Inc., ap chèche aplikan pou yon pwogram reyabilitasyon lojman rejyonal. Se Depatman Lojman ak Devlopman Kominotè Massachusetts ki bay finansman an epi li pèmèt yon **prè 0% enterè, difere**, pou fè reparasyon enpòtan lakay ou. Pwogram sa a fèt pou amelyore ki egziste deja nan kay ki abite ki gen revni ba ak modere lè li elimine vyolasyon kòd. Aktivite reparasyon ki elijib yo pral enkli, men se pa sa sèlman, travay elektrik, chofaj ak plonbri; ti reparasyon estriktirèl; reparasyon do kay ak Spearman; izolasyon ak ranplasman fenèt; penti plon ak retire amyant; ak amelyorasyon aksesibilite andikape yo.

#### ELIJIBILITE

Elijiblite preliminè defini kòm yon aplikan ki ranpli kondisyon inisyal kalifikasyon yo, jan sa endike nan pre-aplikasyon an, pou l kalifye pou kòmanse pwosesis aplikasyon pou reyabilitasyon lojman. Elijiblite final la detèmine apre aplikasyon pou prè a fin ranpli nèt ak tout dokiman sipò yo resevwa, revize ak aksepte pa Manadjè Pwogram TRI Housing Rehab.

Aplikanyo : Pwogram sa a ofri bay pwopriyetè-okipe yon sèl fanmi/milti-fanmi ak inite investisè-posede vil Randolph. Si estrikti a se yon inite yon sèl fanmi ki okipe pa pwopriyetè a, pwopriyetè a dwe satisfè direktiv revni pou revni ba a modere. Si estrikti a gen inite pou lokasyon pandan tout ane a, omwen 51% nan tout kay ki gen ladan inite lokasyon/lokate yo dwe satisfè limit revni sa yo. Aplikan an dwe pwopriyetè pwopriyete a nan dosye pou estrikti rezidansyèl yo pwopoze a. *Tanpri gade nan tablo a pou nivo revni ki baze sou kantite moun ki nan kay la.*

Gwosè Fanmi	1	2	3	4	5	6	7	8
Revni	ki ba 96,000	109,700	123,400	137,100	148,100	159,050	170,050	181,000

#### KONSTRIKSYON

Estrikti: Pwogram peman prensipal deteryorasyon lokal la se aplike pou tout inite rezidansyèl lokal la. Pou kalifye, yon estrikti oswa yon pati ladan l dwe rezidansyèl epi li dwe genyen youn oswa plizyè vyolasyon kòd. Nòt: Tout vyolasyon kòd yo dwe korije kòm yon kondisyon pou patisipe nan Pwogram Reyabilitasyon Lojman TRI. Yon Espesyalis Reyabilitasyon Lojman pral fè yon vizit sou sit epi devlope yon redaksyon detaye travay ak estimasyon pri. Espesyalis Reyabilitasyon Lojman an pral revize atik sa yo ak pwopriyetè kay la. REMAK: Pwogram Reyabilitasyon Lojman TRI se yon pwogram reyabilitasyon modere. Si apre yon vizit sou sit la fini, yon ekriti detaye ak yon estimasyon pri, Espesyalis Reyabilitasyon Lojman an detèmine ke dola ki nesèsè yo depase limit pwogram nan, yo ka jije pwojè a enposib epi yo ka refize finansman.

#### DIFERE

MECHANIS FINANSman Pwogram Reyabilitasyon Lojman TRI a ofri Prè Peman Difere (DPL) pou finance reyabilitasyon pwojè ki elijib yo. DPL maksimòm lan se \$60,000 pou chak inite pou adrese vyolasyon kòd. Gen yon lòt \$10,000 pou chak inite ki disponib lè amelyorasyon yo enkli retire penti plon oswa amyant, fè aksè andikape, ranplasman sistèm septik oswa plizyè amelyorasyon efikasite enèji. DPL a sekirize pa yon privilèj mete sou pwopriyete a pou yon peryòd de 15 ane. To enterè a se 0%. Y ap padonnen DPL a yon pousantaj 1/15<sup>pa</sup> ane depi pwopriyetè a (yo) pa nan okenn fason an default; Se poutèt sa, Prè Peman Difere pa mande pou peman prè chak mwa. Si yo vann oswa transfere yon pwopriyete nan peryòd 15 ane apre reyabilitasyon fini, yo pral re pran lajan yo sou yon baz prorate. Apre peryòd repwann 15 ane a fini, prè a padonnen.



## sibvansyon CDBG

Sèvi tout ane a LMI (revni ki ba-moderè) ki abite nan Randolph, Massachusetts

Pou jwenn finansman atravè yon Sibvansyon Blòk Devlopman Kominotè (CDBG) ki soti nan Depatman Lojman ak Devlopman Kominotè MA (EOHLC)

### PRIYORITE PWOGRAM LA SE POU:

☀️ **Korije ak mete ajou pwoblèm sante/sekirite, mizajou anvlòp bilding, amelyorasyon efikasite enèji, adrese danje penti plon nan rezidans rezidan LMI yo posede ak okipe pandan tout ane a** ☀️

☀️ **Amelyore rezèv inite abòdab pou lokatè LMI pandan tout ane a** ☀️

**Jiska \$40,000 pou chak inite ki disponib pou pwopriyete ki nan Randolph, Massachusetts**

### **JID PWOGRAM**

Resource Inc. (TRI) se yon òganizasyon prive, san bi likratif ki dedye a bay solisyon pou lojman abòdab ak pwoblèm devlopman ekonomik nan Vil Randolph. Kounye a TRI ap aksepte aplikasyon pou Pwogram Prè Reyabilitasyon Lojman an, ki finanse atravè Depatman Lojman ak Devlopman Kominotè Massachusetts (EOHLC). Responsablite sa a gen ladan tout travay aplikasyon, siveyans ak rapò dapre direktiv EOHLC sou non moun ki resevwa sibvansyon an. Yo aplike fon CDBG sa yo atravè yon pwosesis sibvansyon konpetitif Vil Randolph inisyè pou ede prezève stock lojman ki egziste deja pou rezidan yo pandan tout ane a. Pwogram nan adrese reparasyon enpòtan nan kay prive, inite lokasyon pwopriyete-okipe ak posede envestisè yo - ki revni kalifye dapre direktiv LMI (revni ki ba-moderè) etabli pa HUD (pa tablo revni ki nan fen dokiman sa a). Gid sa yo bay moun ki enterese nan yon apèsi sou pwogram lan. Prè difere ki padone jiska \$60,000 ak enterè 0% disponib pou aplikan ki kalifye yo.

### **PRATIK AK PRIYORITE POU SUBVENTION:**

Se yon pati nan manda TRI pou idantifye ak mande pwopriyete pwopriyete yo aplikasyon ki kalifye yo. Nou fè sa atravè yon varyete inisyativ sansibilizasyon, ki gen ladan travay ak sipò aktif patnè kominotè nan vil k ap patisipe yo.

**Aplikasyon pou prè yo trete sou yon baz premye vini, premye sèvi.** Yon fwa yo kalifye, yo ka evalye yon pwòje ak klase kont lòt aplikasyon ki kalifye an tèm de priyorite kòd; nenpòt bezwen ijans pran priyorite (pa egzanp, sistèm chofaj echwe nan sezon fredi). Okazyonèlman, TRI dwe rejte aplikasyon yo malgre prezans yon travay ki kalifye. Rezon pou sa ka genyen: mank de fon pwogram; kondisyon ki mande anpil reyabilitasyon ki depase limit pwogram nan; depans ki depase limit pwogram yo; pwoblèm tit; lokatè ki pa elijib; ak faktè ki sijere prete lajan an ka pa anmezi pou konfòme yo ak kondisyon ki nan pwogram nan.

#### **I. GID PWOPRIYETE**

##### **A. Inite pou yon sèl fanmi ki okipe pwopriyete yo (Rezidans prensipal)**

1. Prè ki pi piti ki estriktire kòm ipotèk yo fè nan inite yon sèl fanmi ki okipe pwopriyete a pou kouvri amelyorasyon esansyèl nan yon rezidans prensipal. Prè ki bese a garanti pa yon privilèj

pwopriyete ki anrejistre nan Rejis Akt Konte Norfolk. Yo retire privilèj sa a pa yon egzeyat ipotèk apre 15 ane nan konfòmite pa prete lajan an te pase; balans prè a diminye pa 1/15<sup>th</sup> nan chak ane nan konfòmite jiskaske li rive nan zewo.

2. Moun ki prete yo dwe genyen tit pwopriyete a (lokatè lavi LMI yo ka aplike toutotan pwopriyete a dakò ak siyen).
  3. Tout moun ki nonmen sou yon papye kay dwe dakò ak prè a lè yo siyen tout dokiman legal yo menm si yo pa okipe lokal la.
  4. Montan maksimòm prè a se \$60,000 ki disponib pou kay reyabilitasyon sèlman.
  5. Tout prè yo devlope nan yon kad reyabilitasyon "modere" pou amelyorasyon kòd, sante, ak sekirite.
  6. Moun ki prete yo dwe satisfè direktiv revni LMI ki tabli nan tablo ki anba a selon gwosè kay la.
  7. Anprentè ki gen pwopriyete pa rete rezidans prensipal yo pandan tout peryòd prè a dwe swa ranbouse balans prè a oswa lwe pwopriyete a bay yon lokatè LMI pandan tout ane a nan yon pri lwaye mache jis HUD fikse.
  8. Yo p ap bay okenn penalite si prete yo rete an konfòmite ak notifiye TRI nenpòt chanjman nan estati pwopriyete. (Vil patisipan yo pral dokimante konfòmite chak ane, pa lèt, pou tèm nan.)
  9. Prete lajan an ka vann pwopriyete a pandan tèm 15 ane. Lè yo fin vann oswa transfere pwopriyete a, pwopriyete a pral remèt pòsyon prè a ki pa padone. (Vil patisipan yo asiye revni sa a nan pwojè kominotè yo.)
  10. Eritye dirèk yo ka asime prè a ak obligasyon li yo si tit transfè pwopriyete a anvan tèm fini. Yo ka abite nan pwopriyete a, jwenn lokatè LMI elijib pandan tout ane a pou pwopriyete a, oswa vann pwopriyete a epi ranbouse balans ki rete a.
  11. Okazyonèlman, prete yo gen pèmisyon oswa yo ka oblije bay yon pati nan depans total yo; fon sa yo se responsablite sèl mèt pwopriyete a epi yo dwe verifye anvan apwobasyon prè.
- B. Inite Lwaye: Inite Selibatè, Milti--Family, oswa Akseswar nan yon Rezidans pou yon Selibatè

1. Prè ki deklive ki estriktire kòm ipotèk yo fè bay pwopriyete inite ki nan bilding ki egziste deja yo dwe modènize inite lokasyon ki loje LMI (revni ba-modere) lokatè ane- wonn nan pri lwaye mache jis HUD fikse.
2. Prè a garanti pa yon privilèj pwopriyete ki anrejistre nan Rejis Akt Konte Norfolk. Yo retire privilèj sa a pa yon egzeyat ipotèk apre 15 ane nan konfòmite pa prete lajan an te pase; prè a bese nan chak ane nan konfòmite pa 1/15<sup>th</sup> jiskaske balans lan rive nan zewo.
3. La 15-ane restriksyon sou papye kay rete ak pwopriyete a pou tout tèm prè a. Nan evènman an nan yon vant, achtè a dwe asime restriksyon an lokasyon sou pwopriyete a pou rès tèm nan prè a.
4. Eritye dirèk yo ka sipoze prè a ak obligasyon li yo si tit transfè pwopriyete a anvan tèm fini.
5. Pwopriyete ki gen jiska 7 inite lokasyon (yo) ka elijib pou finansman jiska \$40,000 pou chak inite si yo pa deja restriksyon sou papye kòm "abòdab". Desizyon sou inite lokasyon yo baze sou revni pwopriyete a ak lokatè (yo) nan pwopriyete a, degre restriksyon yo mande yo, ak disponiblite lajan pwogram nan.
6. Pwopriyete ki kalifye nan règleman LMI yo elijib pou aplike pou prè ki pral kouvri 100% nan depans reyabilitasyon yo.
7. Pwopriyete ki detèmine yo gen "pi wo pase revni" ka aplike pou prè ki kouvri jiska 50% nan depans reyabilitasyon yo; yo dwe kontribye lòt 50%.
8. Pwopriyete yo dwe genyen sètifiye revni ki egziste deja oswa potansyèl lokatè (yo) pou yo kalifye pou yon prè. CDP bay fòm pou sètifikasyon; seleksyon lokatè otremman se responsablite sèl mèt kay la.
9. Vil k ap patisipe yo fè yon verifikasyon anyèl pa lèt, ki gen ladan verifikasyon lokatè ak pri lwaye, pandan tout peryòd 15 ane prè a. (Non-konfòmite pa risk pwopriyete a penalite default.)

10. Akizisyon divèjans dekoupaj an zòn ak pèmi espesyal se responsablite sèl mèt pwopriyete a.

## II. KONDISYON PRÈ REYABILITASYON LAJMAN

- A. Yo bay jiska \$60,000 pou chak inite w la oswa pou chak inite lokasyon nan yon Prè Difere ki padone (DFL) ki deklive ak enterè 0% pou yon tèm 15 ane, ki garanti pa yon privilèj pwopriyete ki anrejistre nan Rejis Akt Konte Norfolk.
- B. 0% DFL a padonnen (rejete) pa 1/15<sup>th</sup> chak ane, depi prete a (yo) rete an konfòmite. Tout prè a padonnen, epi ipotèk anrejistre a egzeye nan fen tèm.
- C. Depans ki gen rapò ak prè yo enkli nan DFL la epi yo reflekte nan dokiman fèmèn, ki gen ladan men pa limite a frè anrejistremant, chèk kredi, ak frè enspeksyon plon.

## III. KÒD PWOPRIYETE, REPARASYON SANTE AK SEKIRITE AK AMIZAJOU

Priyore pwogram nan se korije tout vyolasyon kòd, estriktirèl ak sanitè; sa enkli deleading si sikonstans yo mande sa. Nan direktiv EOHLC, pwogram nan kouvri reparasyon/amelyorasyon atik eksteryè yo, tankou twati, taye, goutyè, pòt antre, elatriye. Amelyore efikasite enèji se tou yon objektif pwogram kle. Tout reparasyon ak amelyorasyon yo dwe aliman ak kòd konstriksyon ak sekirite Eta, Federal ak lokal yo epi yo dwe apwouve dapre règleman istorik ak anviwònman Leta ak lokal yo. Gen kèk egzanp travay reyabilitasyon tipik ki fèt yo enkli: ranplasman oswa reparasyon twati ak tablèt, amelyorasyon fenèt ak pòt, ranplasman pi ak septik, amelyorasyon klimatik ak chofaj, amelyorasyon elektrik ak plonbri, aksè pou moun andikape, ak amelyorasyon soti.

Yo dwe abòde sèten defisyans kòd kèlkeswa atant kliyan yo si yo ta dwe disponib lajan pwogram nan. Sa yo detèmine davans kòm yon pati nan yon plan travay jeneral yo te dakò ak kliyan an. Tipik ti reparasyon antretyen, amelyorasyon kosmetik ak/oswa renovasyon se pa pwogram apwouve itilizasyon fon CDBG yo.

## IV. PWOGAM ASISTANS TEKNIK SOU DEVLÒPMAN AK ENPLIKASYON PWOJÈ

Pwogram Prè Reyabilitasyon Lojman TRI a devlope ak aplike pwojè atravè sèvis espesyalis reyabilitasyon ki gen lisans ak asirans ak kontraktè jeneral ki anrejistre kalifikasyon yo, ki gen ladan referans ekselan, bay manadjè pwogram pèsònèl la. Espesyalis reyabilitasyon lojman an enspekte pwopriyete a epi prepare yon ekriti travay ki baze sou pwoblèm kòd ki prezan, an konsiltasyon ak pwopriyetè kay la ak nan limit bidjè EOHLC. Yo soumèt redaksyon travay la bay pwopriyetè kay la pou l revize ak akò anvan kontraktè jeneral ki anrejistre nan pwogram nan voye l al fè yon òf. Yon fwa ke yon pwojè sou kontra ak konstriksyon, espesyalis reyabilitasyon TRI a ak manadjè pwogram lan, oswa moun li deziyen an, enspekte travay kontinyèl la jiska fini pwojè a.

## V. DOKIMANTASYON SOU REVNI OBLIGATWA

Anplis bay enfòmasyon yo mande sou fòm aplikasyon an, tout aplikan yo mande dokiman sou revni konplè, egzat ak ajou dapre sikonstans patikilye w yo.

*Nou rekòmande pou w li konplètman nèt ki nan paj 4 la pou w konprann sa ki nesè yo.*

*~~Tanpri kontakte Mounadjè Pwogram nan a pou yon moun ki ka bay levite eta li an prèse yo dwe soumèt anvan TRI a ka fè premye revizyon an.~~*

❖ Bay fotokopi tout dokiman yo, pa orijinal yo.

❖ *Gen kèk dokiman ki mande notarye. Ou ka jwenn notè nan pifò bank lokal yo ak biwo vil yo.*

Tanpri retounen yon fòm aplikasyon ki ranpli nèt, ki siyen epi ki gen dat, ki gen ladan tout enfòmasyon yo mande yo, *ansanm ak dokiman ki valab sa yo:*

**Revni salè oswa Revni Chomaj - pou tout Manm Kay ki gen 18 an +**

1. Souch peman pou dènye peryòd 8 semèn pou chak. manm lakay ou k ap travay pou yon anplwayè.
2. Kouch peman pou dènye semèn 8 semèn Avantaj Chomaj yo.
3. Elèv aplentan oswa manm nan kay la ki pap travay dwe bay yon deklarasyon notarye ki afime estati sa a.

**Revni travay endepandan - pou tout Manm Kay ki gen 18 an plis**

1. Kopi tout deklarasyon taks IRS ou 1040 pou 2024 ak 2025. REMAK: Nou PA bezwen MA Tax Returns.
2. Si travayè endepandan an pa ranpli taks, yon **deklarasyon notarye** ki reflekte salè ak depans pou 2022 ak 2023, ki gen ladan dat, adrès travay, kantite lajan yo peye, depans ki gen rapò - pou detèmine pwofi nèt.

**LÒT REVNI: Verifikasyon lòt revni jan sa aplikab pou Manm Kay ki gen 18 an plis**

**Deklarasyon Benefis** pou Asistans Piblik, VA, Chomaj, SS, SSI, andikap ak yon lèt verifikasyon oswa yon deklarasyon peryodik ki soti nan chak sous revni pansyon/envestisman ki endike kantite lajan an ak frekans nan benefis yo.

**Sipò pou Timoun**, swa 1) Lòd pou sipò timoun ak Dekrè divòs; oswa 2) Deklarasyon notarye ke w p ap resevwa sipò pou timoun.

**TOUT aplikan yo ak manm nan kay la ki gen plis pase 18 an dwe soumèt:**

1. **Deklarasyon finansye konplè:** ki kouvri 2 mwa ki sot pase yo pou nenpòt/tout kont chèk, epay, investisman ak retrèt.
2. **Kopi Deklarasyon Taks 1040 ki siyen** pou ane fiskal 2024 ak 2025. Tanpri mete Anons C si w se yon travayè endepandan epi/oswa Orè E si w resevwa revni pou lokasyon.
3. **Verifikasyon IRS: "Tax Return Transcripts" pou chak adilt pou ane fiskal 2024 ak 2025:** Ou responsab pou jwenn transkripsyon IRS Tax Return pou ane fiskal 2023 ak 2024. Tanpri gade **Gid 3 Opsyon Fasil** ki enkli nan pake sa a. Lè w ap kòmande Transkripsyon Deklarasyon Taks ou a, tanpri itilize menm enfòmasyon yo itilize lè w ap ranpli deklarasyon 1040 ou a. **Si ou pa ranpli taks** paske revni taksab ou a pa ase pou ranpli kondisyon minimòm pou ranpli yo, ou dwe chwazi **demann pou yon opsyon Verifikasyon non-Depoze**. Y ap voye Transkripsyon Tax Return ou ba ou dirèkteman. Tanpri voye enfòmasyon sa yo sou TRI pou w ka konplete kalifikasyon w. Elijiblite pa ka detèmine san enfòmasyon sa a.

**GID SOU REVNI Limit**

**LMI (revni ki ba-modere) pou Norfolk Konte**

. Anba a se limit total akseptab LMI (revni ki ba-modere) pou chak gwose yon kay pou kalifye pou Pwogram TRI Housing Rehab Loan Program. HUD tabli limit LMI a 80% mwayèn revni mwayen pou Norfolk County. Revni total

Gid pou sibvansyon CDBG rejyonal yo

vle di revni tout adilt ki gen 18 an oswa plis k ap viv nan kay la. Gwosè kay la vle di *ak timoun k ap viv nan yon kay kèlkeswa relasyon yo*.

Pwopriyetè oswa pwopriyetè potansyèl ki pi wo pase LMI Revni yo elijib pou bay ak resevwa lajan korespondan jiska \$40000 pou chak apatman pou reyabilitasyon oswa kreve yon inite pou lokasyon pandan tout ane a pou loje lokatè LMI dapre direktiv HUD yo.

FY2026 ZÒN HUD REVNI MEDIYEN

	1 MOUN	2 MOUN	3 MOUN	4 MOUN	5 MOUN	6 MOUN	7 MOUN	8 MOUN
80% AMI	96,000	109,700	123,400	137,100	148,100	159,050	170,050	181,100

120,800

Tanpri, pa ezite rele Melissa Vincent, Direktè Egzekitif pou The Resource Inc., ak Kaitlyn Devine Asistan Direktè nan **(508) 696-3285**. sou Martha's Vineyard. Oswa



for Community and Economic Development

## PWOGRAM LOAN REHAB LOAN LIS TCHEKE DOKIMANTASYON PWOPRIYETÈ LAJMAN DOKIMANTASYON

### REVNI

\_\_\_\_\_ Aplikasyon ranpli

\_\_\_\_\_ 8 Semèn souch peman oswa lèt

\_\_\_\_\_ Alimoni

\_\_\_\_\_ Pansyon alimentantè

\_\_\_\_\_ Chomaj-Detèminasyon Monetè /Depo chak semèn

\_\_\_\_\_ Ane Benefisyè Detèminasyon

\_\_\_\_\_ pa gen revni

\_\_\_\_\_ Lòt Revni (Esplike)

\_\_\_\_\_ Lèt Sekirite Sosyal/Ane Kouran Benefis

\_\_\_\_\_ Pansyon (Deklarasyon 2Mo.s oswa 1099 si pa gen okenn deklarasyon)

\_\_\_\_\_ Sipò pou Timoun (Dekrè Divòs)

\_\_\_\_\_ Deklarasyon Labank – Chèk ak Epay (Deklarasyon 2Mo.s Dènye, tout paj )

\_\_\_\_\_ Deklarasyon Kont Envestisman (2Mo.s Deklarasyon Dènye, tout paj)

\_\_\_\_\_ IRAs & 401Ks Deklarasyon Kont (2Mo.s Deklarasyon Dènye, tout paj)

### DOKIMANTASYON SIPÒ OBLIJE

\_\_\_\_\_ Kopi Aktyè pwopriyete a

\_\_\_\_\_ 2 dènye ane yo 1040 IRS TAX RETURN siyen & depoze.

\_\_\_\_\_ 2 dènye ane yo OPTUN – **Orè C**

\_\_\_\_\_ 2 dènye ane yo REVNI SOTI NAN LWAYE –**Orè E**

\_\_\_\_\_ 2 dènye ane yo TRANSKRIPT DEKÒMASYON TAXAS **IRS** . Voye bay TRI lè yo resevwa (gade enstriksyon)

\_\_\_\_\_ Kopi de premye paj ipotèk \_\_\_\_\_ kopi de premye paj Ekite Kay

\_\_\_\_\_ Kopi tout Dok. \_\_\_\_\_ Kopi dènye Deklarasyon Prè yon ipotèk inverse

\_\_\_\_\_ PRÈV PWOPRIYETE PEYE AK ASIRANS INONDASYON (**PRÈV SOTI NAN INS. CO.**)

\_\_\_\_\_ PRÈV TAKS BYEN IMMOBILIÈN PEYE (**ENPRIMIR KI SOTI NAN VIL LA**)

\_\_\_\_\_ Konplete kopi Dokiman Trust – si sa aplikab \_\_\_\_\_ Kondo – si sa aplikab

**\*\*\*TANPRI REMAKE W-2s, 1099s, REZIME ANE SOU MANDE. SÈLMAN**

**THE RESOURCE INC.  
HOUSING REHAB LOAN PROGRAM APPLICATION**

**Applicant Information**

<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>
<b>Present Address</b>		Own _____
Street:		Rent _____
City/Town:		Number _____
State:	Zip Code:	of Years _____
<b>Mailing Address</b>		Married _____
Street: SAME		Widowed _____
City/Town:		Separated _____
State:	Zip Code:	Divorced _____
<b>Email Address:</b>	Number Dependents living at home: _____	
Home Phone Number:	Ages Dependents living at home: _____	
Cell Phone Number:	_____	_____
Work Phone Number:	_____	_____

<b>Employment Information</b>		<b>Self Employed? Yes ___ No ___</b>	
Employer Name:		<b>Unemployed? Yes ___ No ___</b>	
Address:			
Type of Business:			
Business Tel.No:	Position/Title:	<b>How Long?</b> Years with company _____	
<b>If at current company less than 2 years</b>			
Previous Employer			
Address:			
Business Tel.No.	Position/Title	Years with company _____	

**Co-Applicant Information - Name is also on the Deed or you are a Spouse**

<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	
<b>Present Address</b>			
Street:			
City/Town:			
State:	Zip Code:		
<b>Mailing Address</b>		Married _____	
Street:		Unmarried _____	
City/Town:		Separated _____	
State:	Zip Code:	Divorced _____	
Email Address:	Home Phone Number:		
Cell Phone Number:	Work Phone Number:		
<b>Employment Information</b>		<b>Self Employed? Yes ___ No ___</b>	
Employer Name:		<b>Unemployed? Yes ___ No ___</b>	
Address:			
Type of Business:			
Business Tel.No:	Position/Title:	<b>How Long?</b> Years with company _____	
<b>If at current company less than 2 years</b>			
Previous Employer			
Address:			
Business Tel.No.	Position/Title	Years with company _____	

**ANNUAL INCOME - Please fill in ALL applicable income**

Source	Applicant	Other Household Members 18 +		Total
Salary				
Overtime pay				
Commissions				
Fees				
Tips				
Bonuses				
Self Employed				
Interest and/or Dividends				
Net Rental Income				
<b>Income Received Periodically</b>				
Social Security Benefits				
Pension Benefits				
IRA Redemptions				
Unemployment Benefits				
Workers Compensation				
Alimony, Child Support				
Other(describe)				
<b>TOTALS</b>	\$0	\$0	\$	\$0

**ASSETS - Please include ALL Financial Accounts**

Type	Cash Value	Annual Income from Assets	Bank /Financial Institution Name and last 4 digits of Acct number	
Checking Account(s)				
Savings Accounts(s)				
Credit Union Account(s)				
Investment Account(s) <i>Stocks, bonds etc.</i>				
IRA Account(s)				
Life Insurance				
Other-Inheritance				
<b>Home</b>				
Estimated Value				
Mortgage Balance				
<b>Other Real Estate</b>				
Estimated Value				
Mortgage Balance				
<b>TOTALS</b>	\$	\$	\$	\$

List all outstanding financial obligations(your debts) including auto loans, credit cards, credit union loans, real estate loans, and all other loans.

**LIABILITIES**

Type	Creditor's Name	Monthly Payment	Unpaid Balance	Due Date
Monthly Alimony		\$		
Monthly Child Support		\$		
Monthly Child Day Care		\$		
<b>TOTAL</b>		\$	\$	

If a "Yes" answer is given to any question below, please explain on a separate sheet

1. Do you have any outstanding unpaid judgments? Yes \_\_\_ No \_\_\_ Amount \$ \_\_\_\_\_
2. In the past 7 years, have you declared bankruptcy? Yes \_\_\_ No \_\_\_
3. Are you a party in a law suit? Yes \_\_\_ No \_\_\_

**MONTHLY HOUSING EXPENCES**

Item	Monthly Payments	Unpaid Principal	Balloon Pymt.	Balloon Amt.
a. First Mortgage		\$	Yes _____	\$
b. 2nd Mortgage		\$	No _____	
c. Home Equity Loan		\$		
d. Other Financing Secured by Property		Describe any special circumstance relative to your housing or its financing on an separate sheet		
e. Homeowner's Insurance Yes ___ No ___		Name of Insurance Agent:		
f. Flood Insurance Yes ___ No ___	\$	Address:		
Is your insurance included in your mortgage?		Yes	No	
g. Real Estate Taxes Are your real estate taxes included in your mortgage?		Total Town Assessed Value: Yes ___ No ___		
h. Back Taxes Due		Which year(s): _____ If necessary, supply further details on an attached sheet:		
<b>TOTAL</b>				

**HOUSEHOLD COMPOSITION** - List the head of the household and all members who live in your home  
Give relationships of each family member to the head

Member No.	Full Name	Relationship	Date of Birth	Ages
1. Applicant				
2. Co-Applicant				
3. Dependent				
4. Dependent				
5				
6				
7				
Does anyone live with you now who is not listed above?		Yes	No	
Does anyone plan to live with you in the future who is not listed above?		Yes	No	
If either is "yes", please explain.				

**PROPERTY INFORMATION**

**LOCATION**

Street: \_\_\_\_\_  
Town: \_\_\_\_\_ Plan # \_\_\_\_\_  
State: \_\_\_\_\_ Lot # \_\_\_\_\_  
Year the home was built: \_\_\_\_\_

Is your property listed as a Historical Property? Yes No

To your knowledge, is there any lead-base paint in your home?  
Interior Yes No  
Exterior Yes No

Are there any Children under six residing in your home? Yes No

Is your home connected to the town's Water System? Yes No  
Sewer System? Yes No

Is your property located in a Wetlands Conservation Area? Yes No

Is your property located in a flood hazard area? Yes No

Has your property been sited for any code violations within the past 12 months? Yes No

Do you need Energy Upgrades? Yes No

Briefly describe repairs needed:

**The Resource Inc.  
Housing Rehab Loan Program**

**Commonwealth of Massachusetts Income Limits**

**Income Eligibility Chart**

<u>Household Size</u>	<u>Income Limits</u> 80% of Median Income <u>Norfolk County</u>	2024
1	\$92,650	
2	\$105,850	
3	\$119,100	
4	\$132,300	
5	\$142,900	
6	\$153,500	
7	\$164,100	
8	\$174,650	

Please check as appropriate.

1) **INCOME ELIGIBLE CATEGORY – Available for income eligible homeowners – or income eligible property owners with rental units.** If your present gross income falls within the HUD Income Limit Guidelines (see the income eligibility chart above), you may qualify as an INCOME ELIGIBLE property owner, and receive rehabilitation funds. Additional income information must accompany this application. Please check the box below and refer to the INCOME VERIFICATION REQUIREMENTS FOR ELIGIBLE PROPERTY OWNERS, and continue with the Employment Income Information.  INCOME ELIGIBLE

2) **ABOVE INCOME CATEGORY – Available for property owners with rental units only .** gross income exceeds the HUD Income Limits for income eligible property owners (see the income eligibility chart above), you may declare yourself ABOVE INCOME. You may qualify for a loan to cover a match of the total rehabilitation costs. If the majority of the rental units are occupied by households that DO meet the income limits, then additional household/income documentation will be requested from the tenants. If you wish to declare yourself ABOVE INCOME, please check the box below.

ABOVE INCOME

# The Resource Inc.

## Housing Rehab Loan Program

### APPLICANT CREDIT & INFORMATION RELEASE FORM

I/We, the undersigned certify that the information provided in the application is true and complete to the best of my/our knowledge. I/We authorize you to verify my bank accounts, employment, outstanding debts, including any present or previous mortgages, to order a consumer credit report, and to make any other inquiries pertaining to my qualifications for a mortgage loan from you. You may make copies of this letter for distribution to any party with which I have a financial or credit relationship and that party may treat such a copy as an original. I also understand that if my application is not acted upon within six (6) months of the applications anniversary the application will become null and the information must be resubmitted or updated.

Additionally, I/We hereby release, remise forever discharge, from any action whatsoever, in law and equity, The Resource Inc., or agents, and their credit checking agencies in connection with processing, investigating, or credit checking this application, and will hold them harmless from any suit or reprisal whatsoever.

#### Privacy Act Notice:

This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required or permitted by law. You do not have to provide this information, but if you do to your application for approval as a prospective mortgagor or borrower may be delayed or rejected.

\_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Borrower's Social Security Number

\_\_\_\_\_  
Borrower's Date of Birth

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Borrower's Signature

\_\_\_\_\_  
Co-Borrower's Social Security Number

\_\_\_\_\_  
Co-Borrower's Date of Birth

\_\_\_\_\_  
Date

**Resource Inc. (TRI)**  
**Prensipal Prensipal ak Ko-Prete (yo) Akseptasyon**  
**Kondisyon Pwogram Prè Reyabilitasyon Lojman CDBG**

***Tanpri inisyal sou tout liy***

---

- Mwen/Nou menm, aplikan an (yo), konprann enfòmasyon yo bay nan aplikasyon sa a pral itilize pa Pwogram Prè Reyabilitasyon Lojman TRI a pou detèmine kalifikasyon revni pou yon reyabilitasyon lojman.
  
- Mwen/Nou konprann ke fon prè yo limite epi yo pral distribye nan pwòjè sa yo ki reflekte direktiv ak objektif sibvansyon yo.
  
- Mwen/Nou konprann enfòmasyon adisyonèl ki gen ladan, men pa limite a, verifikasyon travay, revni, deklarasyon taks ak enfòmasyon sou kredi yo mande dapre règleman Federal ak Eta a epi mwen/Nou pral bay enfòmasyon sa yo mande yo.
  
- An referans a inite kay ki gen plizyè fanmi, mwen/Nou konprann ke inite lokasyon ki reyabite anba pwogram sa a dwe lwe bay lokatè ki elijib pou revni pou yon peryòd de kenz (15) ane nan pri lokasyon yo detèmine dapre pi ba a nan HUD Fair. Gid pou lwaye mache oswa direktiv pou pri lwaye kay segondè.
  
- Si yo transfere pwopriete a (swa pa kado, lalwa, vant oswa nenpòt lòt kalite oswa transfè), oswa si mwen/Nou pa respekte Akò Pwogram nan, montan total prè a ap vin dwe ak peyab imedyatman. Pwopriete ki eritye pa yon eritye dirèk pa sijè a kloz sa a.

Sa ki annapre yo DWE akonpaye aplikasyon w ki siyen epi ki gen dat:

- 8 souch peman konsekitif kounye a, ki soti nan tout moun nan kay la
- Yon kopi kontra asirans pwopriyetè kay la
- Kopi papye kay aktyèl
- la. IRS)
- Kopi pi resan fakti taks sou pwopriete w la peye
- Yon kopi premye paj nenpòt ipotèk oswa prè sou domaj
- labank pou de mwa ki sot pase yo konsekitif pou tout kont chèk ak epay ak Deklarasyon Finansye
- Verifikasyon IRS pou de dènye ane yo. Ou ka jwenn lè w mande relve nòt taks ou yo (enstriksyon yo tache)

Aplikan an sètifye ke tout enfòmasyon yo bay pou sipòte aplikasyon sa a yo bay nan objektif pou jwenn asistans finansyè anba Pwogram Prè Reyabilitasyon Lojman TRI yo se verite epi konplè selon sa aplikan an kapab. konesans ak kwayans. Yo ka jwenn verifikasyon nan nenpòt sous ki idantifye isit la. Defòmasyon volontè enfòmasyon yo bay la a kapab rezon pou refize patisipasyon nan Pwogram Prè Reyabilitasyon Lojman TRI. Si yo te deja akòde yon Prè pou Peman Difere epi yo dekouvri yon enfòmasyon, montan Prè Peman Difere a dwe dwe epi yo dwe peye Vil la imedyatman.

Anplis de sa, aplikan an konprann lè li aplike pou yon Prè Peman Difere anba Pwogram Prè Reyabilitasyon Lojman TRI a, li dakò pou yon reprezantan Pwogram Prè Reyabilitasyon Lojman TRI a enspekte pwopriete a ki gen ladan yon tès Penti Plon epi li kapab oblije fè ak peye pou tès plon ak retire, si sa nesesè. Li konprann tou ke enspeksyon sa a ka divilge vyolasyon kòd, egzijans pou penti plon (enspeksyon ak/oswa retire) ak / oswa lòt kondisyon, ki ka lakòz lòt depans oswa depans ki depase sa yo ki ka enkli nan Prè Reyabilitasyon Lojman TRI a. Pwogram.

---

Prensipal Prentè

Dat

---

Ko-Prete (si sa aplikab)

Dat

**Tanpri retounen aplikasyon ki ranpli a bay:**

**Melissa Vincent, Direktè Egzekitif**

**The Resource Inc., PO BOX 4548 Vineyard Haven, MA 02568**

**Imèl: [Melissa@theresource.org](mailto:Melissa@theresource.org)**



## PWOGRAM RANDOLPH

### RESTAURATION LAJMAN PWOJÈ FINANSYÈ CDBG, FWÈ RANBANSE AK KIYÈS KI RESPONSAB

\_\_\_\_\_ Mwen/Nou andose epi rekonèt ke pwogram sa a, ki **finanse pa Community Block Grant nan Depatman Lojman ak Devlopman Iben epi ki sipèvizè pa Depatman Lojman ak Devlopman Kominotè MA**, ap benefisye moun ki touche revni ki ba a modere, dapre revni kay yo. Anplis de sa, objektif pwogram sa a se amelyore rezèv lojman ki aje nan zòn nou an, adrese mank lojman abòdab pou rezidan yo pandan tout ane a nan kominote nou an, epi ranfòse ak prezève lojman an sekirite pou fanmi lokal nou yo.

\_\_\_\_\_ Mwen/Nou sètifye ke kondisyon **pwogram Randolph Kay Reyabilitasyon an**, ki pral mande pou mwen/nou siyen Akò Ipotèk, Liberasyon ak Prè ki padone yo te eksplike nou epi yo gen kopi dokiman yo disponib pou mwen. / nou revize nenpòt ki lè.

\_\_\_\_\_ Mwen/Nou rekonèt ak konprann ke patisipasyon nou nan Pwogram Reyabilitasyon Kay la se sitou paske nou fè pati yon pi gwo kominote, ke toujou gen yon pi gwo bezwen pase lajan pou satisfè bezwen sa yo ogmante demann pou reparasyon kay; ke finansman pou tout pwojè yo sòti nan yon sèl alokasyon nan Randolph Area Housing Restoration Program, e ke se sèlman reparasyon ki nesesè yo fè epi yo peye atansyon espesyal pou fè depans yo. règleman dapre koutim ak koutim nan endistri konstriksyon rezidansyèl yo.

\_\_\_\_\_ Mwen/Nou konfime ke TRI pral distribye lajan bay yon kontraktè jeneral kalifye preliminè atravè yon pwosesis tender pou objektif ki endike nan sijè ki abòde travay la (Work Write Up/WWU) ke Ekspè a dwe fè. epi yo dwe itilize sèlman pou rezon ki espesifye nan WWU. Anplis de sa, mwen/nou pral poze kesyon konsènan pwogram ak pwosesis la epi mwen/nou pral dakò ak aksepte rezilta final WWU a e ke tout travay espesifik yo pral konfòme yo ak règleman federal, eta ak lokal yo. konstriksyon endistriyèl zòn rezidansyèl.

\_\_\_\_\_ Mwen/Nou konfime ke gen depans ki fèt anvan ak apre revokasyon prè a, yo konsidere kòm nesesè e/oswa lalwa egzije pou peye pa TRI; ke **depans sa yo pral enkli nan kantite lajan prè a epi yo pral idantifye kòm "Depans Recoverable"**. Mwen/Nou rekonèt depans sa yo dwe peye pa TRI pou soulaje fado finansye a sou moun k ap resevwa a epi pou mennen pwosesis/pwojè a san pwoblèm, efikas ak alè **100% nan responsablite moun k ap resevwa** epi yo espere ke yo dwe ranbouse avèk yo. siyen dokiman ipotèk yo. Apre li fin resevwa aplikasyon mògej la, MA DHCD pral lage fon pwojè a bay TRI pou débouse peman pou sèvis ki gen rapò ak pwojè a. Depans ranbousman sa yo pral/kapab genyen ladan yo men se pa sa sèlman:

- a. Rapò sou kredi
- b. Frè kontablite ipotèk nan Rejis
- c. Actes Plon enspeksyon - danje penti
- d. Sèvis Jeni - konsepsyon septik, apwobasyon ak
- e. dlo

- f. Frè Espesyalis Reyabilitasyon Rezidans lan (men se pa yon pati nan ipotèk sa a jan yon pati nan alokasyon finansman an jeneral)



## PWOGRAM RANDOLPH HUSING RECOVERY

\_\_\_\_\_ Mwen/Nou sètifye ke mwen/nou te eksplike pwogram ak pwosesis la pou satisfaksyon mwen/nou epi **si mwen/nou renouvle kondisyon akò sa a epi mwen pa kontinye ak pwojè apre mwen fin ranbouse depans pou TRI, mwen/nou pral responsab pou depans sa yo.** TRI pral prezante m/nou yon fakti detaye pou depans sa yo epi li pral bay kopi sèvis yo peye yo; Mwen/nou voye yon chèk ki peye bay TRI pou montan sa a. Nan ka ke frè ranbousman yo gwo epi yo pa te resevwa peman bay TRI, TRI gen dwa pou peye yon privilèj sou pwopriyete w la kont montan sa a.

**Mwen/nou dakò ak tout kondisyon ki anwo yo epi konfime ke tout enfòmasyon yo kòrèk.**

\_\_\_\_\_  
**Siyati Prentè a (yo)**

\_\_\_\_\_  
**Dat**

\_\_\_\_\_  
**Ekri an lèt detache Non (yo) Pwopriyete**

\_\_\_\_\_  
**Adrès Pwopriyete Adrès**

\_\_\_\_\_  
**lapòs**

\_\_\_\_\_  
**Imèl**

**Community Development Block Grant (CDBG) Program  
AFFIDAVIT REGARDING CONFLICT OF INTEREST**

I (we) the undersigned, being duly sworn, do certify that, to the best of my (our) knowledge:

I (we) have not granted any gratuitous funds of financially benefitted any related party of the Town of Dennis CDBG Program or an organization under contract to manage a CDBG grant and are not related to any employee or officer of an organization under contract to manage a CDBG program or the Commonwealth of Massachusetts or of the U.S. Department of Housing and Urban Development (HUD) who has a decision-making or monitoring relationship with CDBG program.

I (we) understand the following citation from 24 CFR Part 570.611 (b) and to the best of my (our) knowledge none of the following situations or relationships applies to me (us):

**24 CFR Part 570.611 (b) Conflicts prohibit.** No persons described in paragraph (c) of this section who exercise or have exercised any functions or responsibilities with respect to activities assisted with CDBG funds or who are in a position to participate in a decision-making process or gain inside information with regard to these activities, may obtain a financial interest or benefit from a CDBG-assisted activity, or have an interest in any contract, subcontract or agreement with respect thereto, or the proceeds thereunder, either for themselves or those with whom they have family or business ties, during their tenure or for one year thereafter.

**24 CFR Part 570.611 (c) Persons covered.** The conflict-of-interest provisions of paragraph (b) of this section apply to any person who is an employee, agent, consultant, officer, or elected official or appointed official to the recipient, or of any designated public agencies, or of subrecipients that are receiving CDBG funds.

All covered person in paragraph (c) who do not violate paragraph (b) must first obtain a waiver from the U.S. Department of HUD before receiving CDBG assistance.

APPLICANT SIGNATURE(S):

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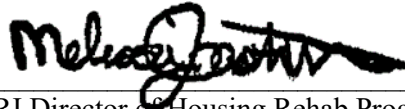
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**The Resource Inc. (TRI)**  
**Housing Rehab Program**

**GRIEVANCE POLICY & PROCEDURE**

- A. The TRI Director of Housing Rehab Programs will be responsible for handling any initial grievance with a goal of resolving any issues.
- B. The Grant Administrator will be responsible for overseeing the investigation of any grievance or serious complaint lodged against the grant employees or programs, or not resolved at the program level.
- C. Grievances should be submitted to the Grant Administrator in writing. Individuals interested in filing a grievance may contact the Grant Administrator for assistance in doing so.
- D. The Grant Administrator has ten (10) business days to investigate the grievance and respond in writing to the party filing the grievance. The Grant Administrator will gather all facts and information to the best of his or her ability. Persons named in the grievance shall be interviewed. The DHCD CDBG Program Representative will be notified of any grievance.
- E. The Grant Administrator will initiate a file that includes the original grievance, a report of findings, and a copy of the Grant Administrator's determination and notification. The outcome of the grievance will also be documented.
- F. If the person or group filing the grievance does not agree with the outcome, an appeal may be filed. The Town Administrator will conduct his/her own investigation and report their findings to the filer of the grievance within ten (10) business days.
- G. If the person or group filing the grievance does not agree with the outcome, an appeal may be filed. The Board of Selectmen will conduct their own investigation and report their findings to the filer of the grievance within ten (10) business days. The findings of the Board of Selectmen are final.

Assistance is provided, if necessary, to facilitate any individual in participating in this grievance process.



\_\_\_\_\_  
TRI Director of Housing Rehab Programs

Grant Administrator contact information

Alice Boyd  
Bailey Boyd Associates-  
9 Hillside Road  
Scituate MA 02066  
Tel: 508 430 4499 ext 1  
Email: aboyd@baileyboyd.com

I/We have read and understand the grievance procedure.

Signed: \_\_\_\_\_ Date \_\_\_\_\_

Signed: \_\_\_\_\_ Date \_\_\_\_\_

### VOLUNTARY INFORMATION REQUESTED

The information regarding race, natural origin, sex designation, marital status, disability status and veteran status on this application is requested in order to assure the Federal Government, acting through the Department of Housing and Urban Development, that Federal Laws prohibiting discrimination against program or tenant applicants on the basis of race, color, national origin, religion, sex, familial status, age and disability are complied with. While you are not required to furnish this information, you are encouraged to do so.

Please provide this information for **each** member of your household.

<b>ETHNIC CATEGORY:</b>	Hispanic _____	Non-Hispanic _____
<b>RACE:</b>	White _____ Asian _____	Black/African American _____ Asian and White _____
American Indian / Alaskan Native _____	Native Hawaiian / Pacific Islander _____	Other American Indian / Alaskan Native and White _____
Black / African American and White _____	American Indian / Native Alaskan and Black / African American _____	Other (Multi-Racial) _____
<b>SEX:</b>	Male _____	Female _____
<b>OTHER, CHECK IF APPLICABLE:</b>	U.S. Veteran _____ Elderly (Over 60) _____	Female Head of Household _____ Disabled _____

<b>ETHNIC CATEGORY:</b>	Hispanic _____	Non-Hispanic _____
<b>RACE:</b>	White _____ Asian _____	Black/African American _____ Asian and White _____
American Indian / Alaskan Native _____	Native Hawaiian / Pacific Islander _____	Other American Indian / Alaskan Native and White _____
Black / African American and White _____	American Indian / Native Alaskan and Black / African American _____	Other (Multi-Racial) _____
<b>SEX:</b>	Male _____	Female _____
<b>OTHER, CHECK IF APPLICABLE:</b>	U.S. Veteran _____ Elderly (Over 60) _____	Female Head of Household _____ Disabled _____



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**3** : Call — **800-908-9946** and follow the voice prompts.

Transcripts sent to your home address will be mailed free of charge. Please allow 5 - 10 calendar days from the time the IRS receives the request for delivery.

You can order an exact copy of a previously filed and processed tax return, including attachments and **Form W-2**, by completing **Form 4506, Request for Copy of Tax Return**. Mail the completed form with \$50 for each tax year requested to the address in the instructions. **Form 4506** is available at [IRS.gov/form4506](https://www.irs.gov/form4506). Generally copies are available for the current year and the past six years. Either spouse can submit and sign **Form 4506** to request copies of jointly filed tax returns. Allow 75 calendar days to receive your copies.