

HUDSON COUNTY CONSORTIUM
HOME INVESTMENT PARTNERSHIP PROGRAM
HOUSING REHABILITATION PROGRAM
(One to Four Owner Occupied Units)

The Hudson County Division of Housing and Community Development has developed a program to assist income qualified owner occupied low income households (consisting of up to four low income dwelling units) with rehabilitation funds in the form of a grant, conditional on certain criteria being met. No repayment will be required, provided that the terms and conditions of the agreement between the County and the owner are met.

ELIGIBLE APPLICANT

The prospective applicant must meet three basic eligibility criteria in order to participate.

1. Owner must be low income

For purposes of the Housing Rehabilitation Program, a low income household is equal to or less than 80 percent of median income for households of a particular size as published by the U. S. Department of Housing and Urban Development for the area comprising the Hudson County Consortium.

The current gross income (FY2007) for the Hudson County Housing Rehabilitation Program are as follows:

MAXIMUM ANNUAL INCOME LIMITS

Household Size	Low Income (80% of Median)
1	37,700
2	43,100
3	48,450
4	53,850
5	58,150
6	62,450
7	66,750
8	71,100

*effective date April 18, 2007

2. Principal Residence

At least one of the housing units assisted under the Housing Rehabilitation Program must be the principal residence of the owner and must be occupied by the owner for at least one year. The owner must maintain continuing residence in the unit for not less than nine months each calendar year.

3. Rental Unit (2-4 family structure)

A rental unit is eligible for funding if the existing tenant or future tenant (for vacant units that will receive rehabilitation assistance) qualifies as a low income household. A low income household is equal to or less than 80 percent of median income for households of a particular size, as published by the U.S. Department of Housing and Urban Development for the area comprising the Hudson County Consortium.

The maximum rent allowed for a low income family including utilities is as follow:

Eff	1BR	2BR	3BR	4BR
746	801	963	1,104	1,211

ELIGIBLE PROPERTY TYPES

Any property type which serves as the owner's principal residence may be assisted, including; single family property, a two to four unit property, a condominium unit, a manufactured home, a mobile home and cooperative unit.

PROPERTY STANDARDS

The assisted property must meet Federal Housing Quality Standards (HQS) as published in Federal Regulation 24 CFR 813.109 and all applicable State and local codes and shall have been the subject of a current Certificate of Occupancy issued by the municipal jurisdiction. Substantially rehabilitated housing must meet the cost effective energy conservation and effectiveness standards in 24 CFR Part 39.

PROPERTY VALUE

The appraised value of a property shall not exceed the 203(b) mortgage limit, after rehabilitation, as published by HUD, for the type of housing being rehabilitated.

MAXIMUM PROPERTY VALUES

1 Family and Condominium Units	2 Family	3Family	4Family
\$362,790	\$464,449	561,411	697,696

An appraisal is required for all owner assisted rehabilitation projects. The appraisal shall be completed prior to investment of HOME funds. The appraisal will consider the effect of the HOME Program improvements in determining property value.

AFFORDABILITY CONTROLS

The owner must agree to occupy the residence for a period of five (5) years. In the case of senior citizens who occupy one family homes the affordability period is two (2) years. If the owner occupant moves and rents, or sells or transfers title to the property as defined herein during the term of the loan and after receipt of the assistance, the owner will be required to repay the loan at the time of a move, sale, or transfer of title.

RENTAL UNITS

The Owner must to agree to maintain Federally Mandated HOME Program rents for a period of ten (10) years.

ENFORCEMENT PROVISIONS

A promissory note and mortgage shall be used by the County to ensure that all provisions of the loan assistance terms and conditions are met. In the case of seniors citizens who occupy one family homes an agreement and promissory note shall be used by the County to ensure that all provisions of the loan assistance terms and conditions are met.

COUNTY OF HUDSON
ONE TO FOUR FAMILY OWNER OCCUPIED
HOUSING REHABILITATION PROGRAM
PREAPPLICATION FORM - OWNER

NAME: _____

ADDRESS: _____

TELEPHONE: HOME: _____ WORK: _____

FAMILY COMPOSITION: _____ NUMBER OF PERSONS _____

ELDERLY (62 or older) _____

ADULTS (19-61 years) _____

MINORS (18 or younger) _____

TOTAL PERSONS _____

BUILDING COMPOSITION: _____ TOTAL NUMBER OF UNITS: _____

UNIT #1 Owner/Tenant Name _____

UNIT #2 Tenant Name _____

UNIT #3 Tenant Name _____

UNIT #4 Tenant Name _____

Number of years you have owned property _____

Property is taxed as a: one family _____ two family _____ three family _____ four family _____

Are there dwelling units in basement or attic? Yes _____ No _____

Are your taxes paid up to date? Yes _____ No _____

GROSS ANNUAL FAMILY INCOME (You must include income from all sources such as property rents, pension, SSI, unemployment benefits, disability benefits, veteran benefits, welfare, food stamps, interest on savings and checking accounts, dividends, child support, alimony, workmen's compensation, etc.)

Salary \$ _____

Social Security \$ _____

Retirement \$ _____

Interest/Dividends \$ _____

Other (Identify) \$ _____

Other (Identify) \$ _____

Information will be verified at an interview with appropriate documentation. Do not mail documentation with this form!

PREAPPLICANT'S SIGNATURE: _____ DATE: / /

HOME PROGRAM FUNDED
OWNER OCCUPIED ONE TO FOUR FAMILY
HOUSING REHABILITATION PROGRAM

Lead Hazard Evaluation and Reduction Activities

Under federal regulation - 24 CFR Part 35, Subpart J - Rehabilitation requires that lead hazard evaluation and reduction activities be carried out for all projects constructed before 1978 that are receiving rehabilitation assistance. The Hudson Regional Health Commission (HRHC) is responsible for conducting all lead hazard evaluations for the Hudson County Division of Housing and Community Development (Division). If lead hazards are detected at the assisted property, the Division will conduct lead hazard reduction activities, and the property will be subject to a final clearance inspection by the HRHC. Also, please be advised that occupants (tenant and owner) may have to relocate while rehabilitation work is being performed at the assisted property.

Lead Hazard Control Definitions:

Lead Hazard Evaluation. A risk assessment, paint testing or combination of these to determine the presence of lead-based hazards or lead-based paint.

Lead Hazard Reduction. Activities designed to reduce or eliminate exposure to lead-based paint hazards through methods including interim controls, standards treatments, or abatement.

Clearance. An activity conducted following lead-based paint hazard reduction activities to determine that the hazard reduction activities are complete. It involves a visual assessment and dust testing by a qualified individual.

Pre Application Signature: _____

Date: / /

COUNTY OF HUDSON
ONE TO FOUR FAMILY OWNER OCCUPIED
HOUSING REHABILITATION PROGRAM

The prospective applicant must be low income. If property is two to four family, all tenants must be low income. The current GROSS limited income limits (FY2007) for Hudson County are as follows:

MAXIMUM GROSS ANNUAL INCOME LIMITS

Persons In Household	Low Income
1	37,700
2	43,100
3	48,450
4	53,850
5	58,150
6	62,450
7	66,750
8	71,100

DOCUMENTATION THAT WILL BE REQUIRED AT INTERVIEW TO COMPLETE
REHABILITATION ASSISTANCE APPLICATION:

1. Social Security Number(s) of all property owners
2. Verification of ALL household income, such as:
 - a.) Most recent pay stub
 - b.) Social Security benefit verification (call Social Security Office to request a Benefit Award Letter at 1-800- 772-1213)
 - c.) Pension pay stub
 - d.) Unemployment payment card
 - e.) Rent income receipts
 - f.) Verification of interest received in savings, securities, dividends, (i.e. 1099 Form)
3. Most recent Federal Income Tax Returns and W-2's, IRS Form 1040, including applicable schedules.
4. Photocopy of Deed to the property
5. Receipt for Property Taxes (Taxes must be paid up to date.)
6. Copy of Homeowner Insurance Policy

RETURN PROGRAM PREAPPLICATION FORM TO:

County of Hudson
Housing Rehabilitation Program, Att: Cathy Jacob
583 Newark Avenue, 2nd Floor
Jersey City, NJ 07306
201-795-6186

COUNTY OF HUDSON
ONE TO FOUR FAMILY OWNER OCCUPIED
HOUSING REHABILITATION PROGRAM
PREAPPLICATION FORM - TENANT

NAME: _____

ADDRESS: _____

TELEPHONE: HOME: _____ WORK: _____

FAMILY COMPOSITION:

NUMBER OF PERSONS

ELDERLY (62 or older)

ADULTS (19-61 years)

MINORS (18 or younger)

TOTAL PERSONS

GROSS ANNUAL FAMILY INCOME (You must include income from all sources such as property rents, pension, SSI, unemployment benefits, disability benefits, veteran benefits, welfare, food stamps, interest on savings and checking accounts, dividends, child support, alimony, workmen's compensation, etc.)

Salary	\$ _____
Social Security	\$ _____
Retirement	\$ _____
Interest/Dividends	\$ _____
Other (Identify _____)	\$ _____

Information will be verified at an interview. Documents will be required to complete Rehabilitation Assistance Application and verify income. **DO NOT MAIL DOCUMENTATION WITH THIS FORM!!**

TENANT SIGNATURE: _____

DATE: / /

HOME PROGRAM FUNDED
OWNER OCCUPIED ONE TO FOUR FAMILY
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Tenant Signature: _____

Date: / /