

Borough of Pottstown



Pottstown Owner Occupied Housing Rehabilitation Program

Application



Genesis Housing Corporation

DIRECTIONS

- 1) Read and review the enclosed information.
- 2) Fill out enclosed application forms.
- 3) Return completed forms to:

Borough of Pottstown
Attn: Erica Weekley
Administration Offices, 3rd Floor
100 East High Street
Pottstown, PA 19464

Applications can also be submitted via fax, at 610-970-6513 or email, at ewekley@pottstown.org.

- 4) Applications will be reviewed by Borough staff and forwarded to Genesis Housing Corporation for further processing.
- 5) Questions can be directed to the Borough of Pottstown at 610-970-6515 or Genesis Housing Corporation at 610-275-4357.

I. GENERAL DESCRIPTION

The *Pottstown Owner Occupied Housing Rehabilitation Program* will increase access of low-income homeowners to rehabilitation funds to provide safe and decent housing. The program will focus on critical systems of the home including the heating, plumbing and electrical systems and repairs or replacements to maintain the housing structure.

The Borough of Pottstown will be the primary intake contact for the program, and be the fiscal conduit for applicants.

Genesis Housing Corporation will accept the applications from the Borough; carry out the income verification, and oversee the rehabilitation of properties for the program. The program is Borough - wide, and Genesis Housing Corporation will income qualify everyone under 80% median income.

II. PROJECT BENEFIT

The Borough of Pottstown has been awarded funding to initiate an owner occupied housing rehabilitation program for the entire Borough, to all qualified residents. In Genesis Housing Corporation's previous efforts in targeting Pottstown neighborhoods, there has been a measurable impact on the community as homes have been renovated and progress is made to address community and neighborhood issues. It is key to the revitalization of Pottstown that residents are afforded opportunities to participate in these major rehabilitative efforts and further increase the quality of life of their homes and neighborhoods Borough - wide.

III. OBJECTIVES

Eliminate unsafe and unsanitary living conditions for low and moderate-income homeowners.

Address code compliance.

Preserve, maintain and improve the affordable housing stock.

Prevent the decline of properties and eliminate blighted areas.

Address lead based paint hazards in pre 1978 housing.

Expand living options for person with disabilities through home modification.

Facilitate aging in place.

Program will address essential repair necessary to safeguard against imminent danger to human life, health, or safety.

Program will allow for repairs necessary to protect the property from further structural damage.

Some examples of essential repairs include: heater system, furnace, and hot water heaters, repair of structure deficiencies that could lead to collapse of roofs, floors, ceiling, stairs and / or framing; repair of plumbing system failures such as cracked potable water or sanitary lines; correction of electrical deficiencies that could result in shock or fire; correction of security deficiencies such as the replacement of exterior doors and windows; lateral connections to water and sanitary sewer extensions imposed by a local water authority or government. Additional essential repairs may include sidewalk replacement.

Examples of non-essential repairs: carpets, garages, landscaping, fences, driveways, pools, and other non-permanent improvements. These projects will not be applicable under the program.

IV. ELIGIBILITY CRITERIA

- 1.) Your household income must be less than the following limits including all salary, pensions, social security, and interest on assets.

FY 2010-2011 Income Limits:

1 Person Household:	\$43,900
2 Person Household:	\$50,150
3 Person Household:	\$56,400
4 Person Household:	\$62,250
5 Person Household:	\$67,700
6 Person Household:	\$72,700
7 Person Household:	\$77,700
8 Person Household:	\$82,700

- 2.) You must own and occupy a single-family home in Pottstown, with residency of 5 years or more. (No rental properties applicable under this program.)
- 3.) The property must be in compliance with all Zoning, Property Maintenance and Building Codes. Properties that have violations, evidenced by notice of violation letters, citations or pending litigation with the Borough will not be eligible.

- 4.) If the property **does not** meet the 5-year residency or property violation requirements in criteria listed, a final determination will be made by the Borough Manager to waive these requirements when presented with a hardship case.

- 5.) Homeowner must agree to execute an **eight (8) year lien** on the property, which is due and payable upon sale or transfer of title of the property. The lien amount will be the amount of the rehabilitation contract. If the property is not sold within eight (8) years and remains the principal residence of the homeowner, the lien will be forgiven 1/8th each year, until fully forgiven and the homeowner will have no further obligation. The lien will require no payment of principal and interest during its eight (8) year term.

V. APPLICATION

**POTTSTOWN OWNER OCCUPIED
HOUSING REHABILITATION PROGRAM**

Information contained herein shall be kept confidential and shall be used only for the purpose of determining eligibility for financial assistance.

A. Personal Information

- 1.) Name of owner occupant _____
- 2.) Address of owner occupant _____
- 3.) Phone Number: _____ Work: _____

B. Statistical Information

- 1.) Is applicant elderly? (60 years or older) YES () NO ()
- 2.) Is applicant disabled? YES () NO ()
- 3.) Is applicant female head of household? YES () NO ()
- 4.) Race of applicant _____
- 5.) Number of persons living in household _____
- 6.) Number of children living in household _____
- 7.) Ages of children in household _____
- 8.) Do you own the home? Yes _____ No _____
- 9.) Date of purchase: _____
- 10.) Does anyone in the household require special accommodations for a physical disability? Yes _____ No _____
- 11.) If yes, what accommodations? _____

C. Income Eligibility Information

Household Composition: # in Household: _____ # of Adults _____
of Children _____

Name	Position in Family	Age	SS#	Sources of Income & Address
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Household Assets:

Type of Asset:	Value of Asset:	Income from Asset:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Annual Household Income from ALL Sources: \$ _____

Have any assets been disposed of for less than fair market during the past (2) years? Yes _____ No _____

If yes:

Type of Asset: _____

Value of Asset: _____

Amount Received for Disposition: _____

Your signature below certifies that the above information is accurate and complete. False statements made knowingly and willfully, or knowingly withholding information, particularly income and/or asset information, constitutes fraud. Such fraud will eliminate the applicant from receiving program services, and may subject the signer to penalties under Section 1001 and 1010 of Title 18 of the United States Code.

Name: _____ Signature: _____

Name: _____ Signature: _____

Date: _____