# Other Housing Programs Available

The Michigan State Housing Development Authority (MSHDA) www.michigan.gov/mshda

Oakland County Community and Home Improvement <a href="https://www.oakgov.com/advantageoakland/c">https://www.oakgov.com/advantageoakland/c</a> ommunities/Pages/housing/default.aspx



# Housing Rehabilitation Program



Farmington Hills Community Development Office Housing Rehabilitation Program 31555 West Eleven Mile Road Farmington Hills, MI 48336 248-871-2545

www.fhgov.com
Printed on recycled paper





#### Did You Know...

The City of Farmington Hills, through the Community Development Block Grant, operates a Housing Rehabilitation Loan Program to help qualified homeowners repair their homes. Deferred loans with 0% interest rates are available to help low- and moderate-income homeowners make needed repairs.

#### **How Does The Loan Program Work?**

Eligible applicants must be the owner and occupant of a single-family home in the City of Farmington Hills with a household income within the established guidelines.

#### **Basic Program Summary:**

- Application with all required documents submitted.
- A preliminary building survey is conducted by Staff.
- The Housing Rehab Loan Board reviews and approves applications.
- If application is approved, specifications are written and bids are obtained from licensed, insured and approved contractors.
- Loan Board reviews & approves bids.
- Once the improvements are completed, a lien is placed on the property for the amount of the loan.

#### **Limits and Terms of Loans**

- The maximum loan is \$18,000.\*
- The loan amount, based upon competitive bids, is determined by the Loan Board.
- Deferred loans require one payment upon the sale or transfer of title of the property.
- 0% interest rate.
- A lien will be placed on the property in the amount of the loan.

#### **Eligibility Requirements**

- Must meet current income guidelines
- Must be owner and occupant of the home
- Property taxes must be paid to date
- Home must not be a part of a trust
- Application must include all required documents. This includes proof of income and Driver's license for all household members, Deed to property, Homeowner's insurance declaration page, Mortgage payment statement, Federal & State Income Tax returns. Additional info may be requested.

Call the Farmington Hills Community
Development Office for information and applications at 248-871-2545 or visit the City's website at <a href="https://www.fhgov.com">www.fhgov.com</a>

#### Maximum Income Limits

1 person -\$53,700 5 person -\$82,850 2 person -\$61,400 6 person -\$89,000 3 person -\$69,050 7 person -\$95,150 4 person -\$76,700 8 person -\$101,250 2024 Income levels - subject to change.

## What Home Improvements Can Be Made?

#### **Examples of Eligible Improvements**

- Roof/gutter replacement
- Siding
- Weatherization improvements (i.e. windows, insulation)
- Furnace
- Hot water tank
- Sewer/water hook up
- Electrical, heating, plumbing repairs

#### **Examples of Ineligible Improvements**

- New construction
- Driveways
- Decks
- New appliances
- Materials, fixtures, equipment that exceeds those used on a standard replacement basis, and which may be considered custom or luxury items

<sup>\*</sup>Loan Board may modify maximum amount due to extenuating circumstances.

### Department of Planning and Community Development

Tracey Emmanuel Community Development and Special Projects Coordinator Community Development Office (248) 871-2545

temmanuel@fhgov.com



#### HOUSING REHABILITATION PROGRAM

Thank you for inquiring about the City of Farmington Hills Housing Rehabilitation Program (HRP). The City, through the federally funded Community Development Block Grant, offers financial and technical assistance to low- and moderate- income households to rehabilitate their owner-occupied single-family home. The HRP provides income qualified homeowners with interest-free deferred loans to make needed home improvements and repairs, with payment due upon the sale or transfer of title of the property.

The objective of the HRP is to primarily correct those items that have exceeded their life expectancy, could be hazardous to the life of the occupants, the safety of the structure or the health and welfare of the occupants. The HRP is required to address lead-based paint hazards. Typical improvements include but are not limited to:

- Roof/gutters
- Windows
- insulation
- Furnace

- Siding
- Hot water tanks
- Sewer/water connection
- Electrical, heating or plumbing repairs

Types of rehabilitation work generally **not included** under this program are decks, unattached garages and driveways. Materials, fixtures or equipment of a type or quality which exceed those used on a standard replacement basis and which may be considered a custom or luxury item are not eligible. New appliances are not eligible.

Applicant must be the owner and occupant of a single-family home; taxes must be paid to date (or an acceptable property tax relief agreement with City authorities must be in place); and household income cannot exceed the following:

HOUSEHOLD SIZE	MAXIMUM INCOME	HOUSEHOLD SIZE	MAXIMUM INCOME
1 Person	\$53,700	5 Person	\$82,850
2 Person	\$61,400	6 Person	\$89,000
3 Person	\$69,050	7 Person	\$95,150
4 Person	\$76,700	8 Person	\$101,250

Effective May 1, 2024 and subject to change

Applications and support documentation are reviewed by Staff to ensure eligibility requirements are met. A preliminary building survey is conducted to verify proposed work, with all information provided to the Housing Rehabilitation Loan Board (HRLB). The HRLB approves or denies all applications/proposed work to be completed and authorizes staff to create bid specifications. Bids are obtained and then reviewed by the HRLB for approval. If you are interested in the program, please carefully review and complete the attached application. Contact the Community Development Office for additional information 248-871-2540.

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#### HOUSING REHABILITATION PROGRAM APPLICATION

HRP#	
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ADDRESS OF PROPERTY TO BE IMPROVED (THE HOME MUST BE A SINGLE-FAMILY OWNER-OCCUPIED PROPERTY):							
House Number/Street Name/Zip code:				,			
Original Purchase Price: \$			Year Purchased				
Do you own any other sir	ngle-family property	? 🗌 Yes 🔲 N	0	Market or State Equalize	ed Value: \$		
	BORROWER				CO-BORROWER		
Last Name	First Name	Middle	Gender	Last Name	First Name	Middle	Gender
			□ Male □ Female	□ Male □ Female			
Date of Birth:				Date of Birth:			
Social Security Number	:			Social Security Number	:		
□ Unmarried (single, divorced, widowed)	□ Married	□ Separated		□ Unmarried (single, divorced, widowed)	□ Married	□ Separated	I
SINGLE PARENT, HEA	D OF HOUSEHOL	D YES [	□ NO				
FEMALE, HEAD OF HO	DUSEHOLD	☐ YES [	□ NO				
Phone #: ( )	-			Phone #: ( )	-		
Phone #: ( )	-			Phone #: ( -			
E-Mail Address:				E-Mail Address:			
□ Employed	□ Unemployed	□ Retired		□ Employed	□ Unemployed	□ Retired	
□ Full-Time □ Part-Time Unemployed Since:			□ Full-Time □ Part-Time Unemployed Since:				
Name of Employer:				Name of Employer:			
Occupation:				Occupation:			
Hire Date:				Hire Date:			
□ Hourly	□ Salary			□ Hourly	□ Salary		
If Hourly, Usual Hours Per Pa	ay Period:			If Hourly, Usual Hours Per Pay Period:			
□ Paid Bi-Weekly	□ Paid Weekly			□ Paid Bi-Weekly	□ Paid Weekly		
Name of 2 <sup>nd</sup> Employer:	•			Name of 2 <sup>nd</sup> Employer			
. ,							
Occupation:			Occupation:				
Hire Date:			Hire Date:				
□ Hourly □ Salary			□ Hourly □ Salary				
If Hourly, Usual Hours Per Pay Period:			If Hourly, Usual Hours Per Pay Period:				
□ Paid Bi-Weekly □ Paid Weekly		□ Paid Bi-Weekly □ Paid Weekly					

List Below All Persons Living in the Household					
Name:		Age:	Relationship to Bo	rrower	
l otal <b>Monthly</b> Incor	ne from <u>ALL</u> Sources of <u>A</u>	<u>LL</u> Household	Members, Including U	nrelated Persons	
\$	Wages				
\$	Unemployment Benefits				
\$	Pension				
\$	Social Security Benefits				
\$	IRA or Trust Benefits				
\$	Child or Spousal Support	t			
\$	Gift Money (attach letter	stating amoun	t and frequency of mor	ney received)	
\$	Other (describe)				
\$	Other (describe)				
List ALL Financial Ass	ets				
Name of Institution		Type (Savings, C Roth IRAs, 401(k) Bonds, Mutual Fu	checking, CDs, Traditional & m 403(b), SEPA, Stocks, nds, Etc.)	Balance	
Monthly Utility Expens	es				
Consumers Eneray: \$	(estimate)		DTE Energy: \$	(estimate)	

List Mortgages and/or Home Equi	ity Lines of Credit					
Name		Date Obtain	d Or	riginal Balance	Outstanding Balance	Monthly Paymen
1 <sup>St</sup> Mortgage Co.				_		_
2 <sup>nd</sup> Mortgage Co.						
Home Equity Line of Credit						
Prior Foreclosure or FHA Default?  □ Yes □ No						
Have You Declared Bankruptcy in the □ No □ Yes (if Yes, Submit a		je of Bankruptcy w	ith Your	r Application)		
How Did You Hear About This Progra	am?					
LIST YOUR PROPOSED IMPRO	VEMENTS BY PR	IORITY (Use a	ditiona	al paper if nec	cessary):	
1.		`			,	
2.						
3.						
4.						
5.						
6.						
7.						
	Do you have heat	<del></del>		No		
	Do you have wate		s 🔲 N			
	Is your house roof leaking? Yes No					
The following HEAD OF HOU	SEHOLD information	on is obtained f	or stati	istical reporti	ng only.	
SINGLE RACE Complete for Head of How White Black/African American Asian American Indian/Alaskan I		□ Asian & □ America □ America	rican A White n Indiar n Indiar	nplete for Head merican & Whit n/Alaskan Nativ n/Alaskan Nativ		can
☐ Hawaiian/Other Pacific Isla		□ Other M	ulti-Rac	ial		

## ETHNICITY Complete for Head of Household Only

Hien	anic/l	atino

Signature - Co-Borrower

Number of HANDICAPPED PERSON/S in household?
Number of UNRELATED PERSON/S living in household?
Number of <b>BEDROOMS IN THE HOUSE</b> ?

Date

**APPLICANTS CERTIFICATION**: The applicant certifies that all information in this application, and all information furnished in support of this application is for the purpose of obtaining funds for the improvement of the above mentioned property, and that these statements are true to the best of the applicants knowledge and belief.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT: U.S.C. Title 18, Sec. 1001, provides: Whoever, in any matter within the jurisdiction of any department or agency of the United Sates knowingly and willfully falsifies... or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing, or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years, or both."

Signature - Borrower

Date

#### **REQUIRED DOCUMENTATION – DO NOT MAIL ORIGINAL DOCUMENTS**

Please submit **copies** of the following documentation with your application. If needed, we can make copies of your documents for you; contact the office to make an appointment (248-871-2545). NOTE: Additional information may be required.

☐ Deed to property - Recorded Warranty Deed and any Quit Claim Deeds	Driver's License (front & back) - for all household members
☐ Homeowner's Insurance - Declarations page showing current term	Federal & State Income Tax Returns for past two years including all forms and Schedules for all household
Mortgage Payment statement - Must include current	members, where applicable
principal balance, interest rate, and next due date	Annual Social Security Award letter (if applicable. If
	you do not have a copy contact Social Security at 800-

Mail or drop off the application and documentation to:
City of Farmington Hills - Community Development
Housing Rehabilitation Program
31555 West Eleven Mile Rd.
Farmington Hills, MI 48336
Phone (248) 871-2545

772-1213

FOR OFFICE USE ONLY:

DATE RECEIVED HRP#



Version 24.01.10



To: Owners, and Tenants & Purchasers of Housing Constructed before 1978

# Notification

## Watch Out For Lead-Based Paint Poisoning

This property was constructed before 1978. There is a possibility it contains lead-based paint. Please read the following information concerning lead-based paint poisoning.

#### Sources of Lead Based Paint

The interiors of older homes and apartments often have layers of lead-based paint on the walls, ceilings, window sills, doors and door frames. Lead-based paint and primers may also have been used on outside porches, railings, garages, fire escapes and lamp posts. When the paint chips, flakes or peels off, there may be a real danger for babies and young children. Children may eat paint chips or chew on painted railings, window sills or other items when parents are not around. Children can also ingest lead even if they do not specifically eat paint chips. For example, when children play in an area where there are loose paint chips or dust particles containing lead, they may get these particles on their hands, put their hands into their mouths, and ingest a dangerous amount of lead.

#### Hazards of Lead-Based Paint

Lead poisoning is dangerous – especially to children under the age of seven (7). It can eventually cause mental retardation, blindness and even death.

#### Symptoms of Lead-Based Paint Poisoning

Has your child been especially cranky or irritable? Is he or she eating normally? Does your child have stomachaches and vomiting? Does he or she complain about headaches? Is your child unwilling to play? These may be signs of lead poisoning. Many times though, there are no symptoms at all. Because there are no symptoms does not mean that you should not be concerned if you believe your child has been exposed to lead-based paint.

#### Advisability and Availability of Blood Lead Level Screening

If you suspect that your child has eaten chips of paint or someone told you this, you should take your child to the doctor or clinic for testing. If the test shows that your child has an elevated blood lead level, treatment is available. Contact your doctor or local health department for help or more information. Lead screening and treatment are available through the Medicaid Program for those who are eligible. If your child is identified as having an elevated blood lead level, you should immediately notify the Community

Development or other agency to which you or your landlord is applying for rehabilitation assistance so the necessary steps can be taken to test your unit for lead-based paint hazards. If your unit does have lead-based paint, you may be eligible for assistance to abate that hazard.

## Precautions to Take to Prevent Lead-Based Paint Poisoning

You can avoid lead-based paint poisoning by performing some preventive maintenance. Look at your walls, ceilings, doors, door frames and window sills. Are there places where the paint is peeling, flaking, chipping, or powdering? If so, there are some things you can do immediately to protect your child:

- (a) Cover all furniture and appliances;
- (b) Get a broom or stiff brush and remove all loose pieces of paint from walls, woodwork, window wells and ceilings;
- (c) Sweep up all pieces of paint and plaster and put them in a paper bag or wrap them in newspaper. Put these packages in the trash can. DO NOT BURN THEM:
- (d) Do not leave paint chips on the floor in window wells. Damp mop floors and window sills in and around the work area to remove all dust and paint particles. Keeping these areas clear of paint chips, dust and dirt is easy and very important; and
- (e) Do not allow loose paint to remain within your children's reach since children may pick loose paint off the lower part of the walls.

#### Homeowner Maintenance and Treatment of Lead-Based Paint Hazards

As a homeowner, you should take the necessary steps to keep your home in good shape. Water leaks from faulty plumbing, defective roofs and exterior holes or breaks may admit rain and dampness into the interior of your home. These conditions damage walls and ceilings and cause paint to peel, crack or flake. These conditions should be corrected immediately. Before repainting, all surfaces that are peeling, cracking, chipping or loose should be thoroughly cleaned by scraping or brushing the loose paint from the surface, then repainted with two (2) coats of non-leaded paint. Instead of scraping and repainting,

the surface may be covered with other material such as wallboard, gypsum, or paneling. Beware that when lead-based paint is removed by scraping or sanding, a dust is created, which may be hazardous. The dust can enter the body either by breathing it or swallowing it. The use of heat or paint removers could create a vapor or fume which may cause poisoning if inhaled over a long period of time. Whenever possible, the removal of lead-based paint should take place when there are no children or pregnant women on the premises. Simply painting over defective lead-based paint surfaces does not eliminate the hazard. Remember that you as an adult play a major role in the prevention of lead poisioning. Your actions and awareness about the lead problem can make a big difference.

#### Tenant and Homebuyer Responsibilities

You should immediately notify the management office or the agency through which you are purchasing your home if the unit has flaking, chipcing, powdering or peeling paint, water leaks from plumbing, or a defective roof. You should cooperate with that office's effort to repair the unit.

☐ I have received entitled "Watch O	i a copy of th ut for Lead P	e Notice aint Poison	ning."
Date		•	
Print Full Name			•
Signature			

RETURN TO OFFICE

#### CITY OF FARMINGTON HILLS HOUSING REHABILITATION PROGRAM

#### **LEAD- BASED PAINT COMPLIANCE CERTIFICATION FORM**

HF	RP# NAME:					
SII	DWELL NO: ADDRESS:			4833		
1.	Was the house constructed prior to 1978?	Yes	□No	Unknown		
2.	Are there likely to be children aged seven and under living in the house?	Yes	□No	Unknown		
	If yes or unknown, continue; if no, stop.					
3.	Are there any children living in the house with elevated blood levels?	Yes	□No	Unknown		
	If yes or unknown, go to 9; if no, continue.					
4.	Are there defective interior/exterior paint surfaces?	Yes	□No	Unknown		
	If yes or unknown, continue; if no, stop.					
5.	Were defective paint surfaces tested for lead content?	Yes	□No	Unknown		
	If yes or unknown, continue to 7; if no, continue to 6.					
6.	Abate defective paint surfaces.  Date abatement completed	Yes	□No	Unknown		
7.	Did defective surfaces have unacceptable levels of lead content?	Yes	□No	Unknown		
	If yes, continue; if no, stop.					
8.	Abate defective surfaces.  Date abatement completed					
9.	7. Test all painted surfaces for lead content. Abate all surfaces with unacceptable lead content.  Test date Date abatement completed					
Ho th	the homeowner hereby certify that: the undersigned has receively and Urban Development (HUD) notification "Watch Out e best of my knowledge, there are no children residing at this had levels.	for Lead	Paint Po	isoning" and, to		
—	omeowner Signature	Date	<u> </u>			

RETURN TO OFFICE

## CITY OF FARMINGTON HILLS HOUSING REHABILITATION PROGRAM

#### **PRE-APPLICATION SURVEY FORM**

HRP#		NAME:						
ппг#	(Office use)	(Please Pri	nt)					
DATE:		ADDRESS:	4833					
Did yo	u:							
	1. Read the bro	chure about the Farmington Hills Housing	Rehabilitation Program?					
		Know that a City Inspector will conduct a survey at your home prior to the loan application review?						
	3. Know that a	Know that a lien will be placed on the property in the amount of the loan?						
		ork is completed, an official from the U.S. t may inspect the rehabilitation work at yo						
	5. Receive the	notification "Watch Out For Lead-based Pa	int Poisoning"?					
	<ul> <li>6. Know that "profiteering" or selling the house after construction profit is prohibited.         Under most circumstances houses must be held by the borrower for a minimum of one (1) year.     </li> </ul>							
Signat	ure		Date					