



City of Fountain Valley Home Improvement Program **APPLICATION PACKET**

Dear Homeowner:

Thank you for your interest in the City of Fountain Valley's Home Improvement Program. For over 30 years, the City of Fountain Valley has assisted qualified low-income homeowners in making needed repairs to their homes. Please read the instructions below.

A Home Improvement Program Application Packet is enclosed, and includes each of the following items:

1. City of Fountain Valley Home Improvement Program Document Checklist;
2. A City of Fountain Valley Home Improvement Program Application; and
3. City of Fountain Valley Home Improvement Program Authorization to Release Information.

When completing the application materials, please be sure to use either blue or black ink and answer each question. If a question does not apply to you or your household, write N/A. In addition to completing the application, you will need to provide various supporting documents. The required documents are necessary to verify household income, property ownership, and applicant eligibility. A document checklist is provided to assist you when preparing your application to ensure that your submission is complete and accurate. An incomplete application will delay processing. Please note that income and asset documentation must be provided for all adult household members over 18 years of age. Completed applications must be submitted in person or by U.S. mail to:

City of Fountain Valley
Housing and Community Development
10200 Slater Avenue
Fountain Valley, CA 92708

If you have any questions regarding this application or the City of Fountain Valley's Home Improvement Program, please call me at (714) 593-4510.

Sincerely,

Nikeshia Hazel
Housing Technician





City of Fountain Valley Home Improvement Program DOCUMENT CHECKLIST

This checklist is intended to assist you with preparing your documents to accompany your application. Please provide copies of each document. Original documents will not be accepted.

APPLICATION AND IDENTIFICATION

- Completed Home Improvement Program Application
- Photo identification for all adult household members

INCOME

Earned Income:

- 4 recent consecutive paystubs **and**
- Previous 2 years federal and state income tax returns (all schedules).

Self-Employment Income:

- Year-to-Date Profit/loss statement **and**
- Previous 2 years federal and state tax returns (all schedules).

Unearned Income (includes):

- Social Security Award Letter
- Retirement Benefit Statement,
- Veteran's Benefit Statement,
- Unemployment Insurance Award Letter,
- State Disability Benefit Statement,
- CalWorks/CalFresh Award Letter,
- Final Divorce Decree,
- Child Support

Tenant Income:

- A true copy of the rental agreement with the tenant or the tenant must provide a notarized statement indicating the amount of rent paid on a monthly basis.

ASSETS

Bank Statements:

- 3 months of consecutive checking and savings account statements (**include all pages**)

Other Assets:

- Current Brokerage account Money Market,
- Certificate of Deposit,
- IRA statement (include all pages),
- Cash surrender value of Life Insurance Policies.

OWNERSHIP AND OCCUPANCY

Single Family Homeowners:

- Grant Deed,
- Mortgage Statement
- Homeowner Association Dues

Mobile Homeowners:

- MH Registration,
- MH Certificate of Title,
- MH Mortgage Bill,
- MH Space Rent.

HAZARD INSURANCE

Insurance:

- Copy of homeowner's insurance policy

PROPERTY/INCOME TAX DELINQUENCY OR LEINS

Property Tax Statement:

- Current Property Tax Bill

OUTSTANDING JUDGEMENTS AND OBLIGATIONS

Outstanding Judgements and Obligations:

- HELOC, Other financing.
- Gas/Electric Bill, Water/Trash Bill



City of Fountain Valley Home Improvement Program APPLICATION

Please fill out this form completely and accurately using blue or black ink. Do not leave any blanks. If something does not apply write, N/A. An incomplete form will delay the processing of your application. If additional space is needed to answer any question or section, please attach a continuation sheet. All materials will be kept confidential.

Applicant Name: _____ Co-Applicant: _____

Other Persons On Title: _____

Property Address: _____

Approximate Age Of Dwelling? _____ Number of Years in Home? _____

Home Phone: () - Cell Phone: () - Email: _____

Household Information (Federal law requires that we collect the following information for ALL people living in the household (if you need more space, please attach an additional page):

NAME	SOCIAL SECURITY #	DATE OF BIRTH	GENDER M/F	ANNUAL INCOME*	INCOME SOURCE	ETHNIC GROUP
_____	_____	_____	_____	\$	_____	_____
_____	_____	_____	_____	\$	_____	_____
_____	_____	_____	_____	\$	_____	_____
_____	_____	_____	_____	\$	_____	_____
_____	_____	_____	_____	\$	_____	_____

TOTAL GROSS ANNUAL HOUSEHOLD INCOME: \$ _____

* Annual income includes the gross amount from ALL sources of income for ALL household members 18 and over including, but not limited to: salary/wages, welfare, social security, disability benefits, rental income, child support, alimony, veteran's benefits, monthly contributions from family, etc.

1. Please list the improvements requested:

1. _____ 2. _____ 3. _____ 4. _____
 5. _____ 6. _____ 7. _____ 8. _____

2. Have you previously applied for or received assistance through the City's Home Improvement Programs? Yes No
 If yes, year completed. _____ What of program(s)? _____

3. How did you hear about the Home Improvement Program? _____

4. Has previous work been done to your home? Yes No If yes, all work must be permitted by the city, as required.

PROPERTY INFORMATION

Subject Property Address (street, city, state & zip)		Number of Bedrooms
Year Acquired	Original Cost	Amount Existing Liens
Title will be held in what Name(s)		

BORROWER INFORMATION

BORROWER		CO-BORROWER	
Borrower's Name (include Jr. or Sr. if Applicable)		Co-Borrower's Name (include Jr. or Sr. if applicable)	
Social Security # - -	Home Phone (area code) () -	Social Security # - -	Home Phone (area code) () -
Birth Date / /	Work/Cell Phone (area code) () -	Birth Date / /	Work/Cell Phone (area code) () -
Present Address if other than Subject Property (street, city, state, zip)		Present Address if other than Subject Property (street, city, state, zip)	
Previous Address (street, city, state, zip)		Previous Address (street, city, state, zip)	
Email Address		Email Address	

EMPLOYMENT INFORMATION

BORROWER		CO-BORROWER	
Name of Employer	<input type="checkbox"/> Self-Employed	Name of Employer	<input type="checkbox"/> Self-Employed
Employer's Address	Yrs. on this job	Employer's Address	Yrs. on this job
Position/Title	Yrs. in profession	Position/Title	Yrs. in profession
Type of Business	Business Phone (area code) () -	Type of Business	Business Phone (area code) () -

MONTHLY INCOME**HOUSING EXPENSE**

Gross Monthly Income	Borrower	Co-Borrower	Total	Combined Housing Expense	Monthly
Base Employment Income	\$	\$	\$	Rent Amount	\$
Overtime	\$	\$	\$	Utilities	\$
Bonuses	\$	\$	\$	First Mortgage (P&I)	\$
Commissions	\$	\$	\$	Other Financing (2 nd or HELOC) (P&I)	\$
Dividends/Interest	\$	\$	\$	Hazard Insurance	\$
Net Rental Income	\$	\$	\$	Real Estate Taxes	\$
Pension	\$	\$	\$	Mortgage Insurance	\$
Alimony/Child Support	\$	\$	\$	Homeowner Assn. Dues	\$
SSA/SSI	\$	\$	\$	Space Rent	\$
Other Income (See Below) ¹	\$	\$	\$	Other Housing Expenses (See Below) ²	\$
TOTAL INCOME	\$	\$	\$	TOTAL HOUSING EXPENSES	\$

Describe other income below and whether it is Borrower (B) or Co-Borrower (C)

Self Employed Borrowers will be required to provide additional documentation such as tax returns and financial statements.

¹Other Income Description	B/C	Monthly Amount
		\$
		\$
²Other Housing Related Expenses Description		Monthly Amount
		\$

ASSETS	
List all checking and savings accounts below owned by ALL household members (if additional space is needed, please include a continuation sheet)	Cash or Market Value
Name and address of Bank, Savings & Loan, or Credit Union	
Account Number	\$
Name and address of Bank, Savings & Loan, or Credit Union	
Account Number	\$
Name and address of Bank, Savings & Loan, or Credit Union	
Account Number	\$
List CDs and Money Market accounts	Cash or Market Value
Name and address of Bank, Savings & Loan, or Credit Union	
Account Number	\$
Name and address of Bank, Savings & Loan, or Credit Union	
Account Number	\$
List Stocks & Bonds	Cash or Market Value
Name and address of (Company name/number & description)	
Account Number	\$
Name and address of (Company name/number & description)	
Account Number	\$
Life Insurance	Face Value/Cash Value
Name and address of company	
Account Number	SUBTOTAL LIQUID ASSETS \$
Other Assets	Market Value
List Addresses of Other Property/Real Estate Owned	\$
Vested Interest In Retirement Fund	\$
Net worth of business(s) owned (attach financial statement)	\$
TOTAL ASSETS	\$

DECLARATION				
	Borrower		Co-Borrower	
	Yes	No	Yes	No
If you answer "Yes" to any questions A through E , please include a continuation sheet with a written explanation.				
A. Do you have any outstanding Judgements against you?				
B. Have you been declared bankrupt within the past 7 years?				
C. Are you a party to a lawsuit?				
D. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? (Include such loans as home mortgage loans, SBA loans, home improvement loans, school or educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee). If "Yes", provide details, including date, name and address of Lender, FHA or VA case number, if any, and reasons for the action?				
E. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee? If "Yes", give details as described in the preceding question?				
F. Do you intend to occupy the property as your primary residence?				

ACKNOWLEDGMENT AND AGEEMENT

Certification: I/We certify that the information provided in this application is true and correct as of the date set forth opposite my/our signature(s) in this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/We have made on this application under the provisions of Title 18, United States Code Section 1001, et seq. which states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Borrower's Signature	Date	Co-Borrower's Signature	Date
X		X	

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling, in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it under Federal regulations this Lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for).

BORROWER

Female Male

Race/National Origin (check all that apply):						Ethnicity (please check one):	
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Non-Hispanic

CO-BORROWER

Female Male

Race/National Origin (check all that apply):						Ethnicity (please check one):	
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Non-Hispanic



City of Fountain Valley Home Improvement Program AUTHORIZATION TO RELEASE INFORMATION

I/we have applied for assistance from CITY OF FOUNTAIN VALLEY. As part of the application process, CITY OF FOUNTAIN VALLEY and/or its assignee, may verify information contained in my/our application and in other documents required in connection with program eligibility determination and the loan either before the loan is closed or as part of its quality control program.

I/we authorize you to provide to CITY OF FOUNTAIN VALLEY, or its assignee, any and all information and documentation that they request. Such documentation includes, but is not limited to, past and present employment records and payroll information; copies of federal and state income tax returns; bank, money market, mutual funds, stocks, bonds and similar type balances in personal and business accounts; credit report and other credit information, including past and present mortgage and rental payment history; payoff balances on loans; and title search and any other necessary escrow documents.

CITY OF FOUNTAIN VALLEY or its assignee, or any credit reporting agency that City of Fountain Valley designates, may address this authorization to any party named in the loan application. A copy of this authorization may be accepted as an original.

Borrower's Signature

Social Security Number

Date

Co-Borrower's Signature

Social Security Number

Date

Other Adult Household Member's
Signature

Social Security Number

Date

Other Adult Household Member's
Signature

Social Security Number

Date

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 and permitted by law. You do not have to provide this information, but if you do not, your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by the Title 38 USC. Chapter 37 (if VA) by 12 USC. Section 1452b (if HUD.CPD) and Title 42 USC (1471er Seq. or 7 USC 1921 et Seq. (if USDA/Fm11A)