



APPLICATION

Dear Homeowner:

Thank you for your interest in the Cuyahoga County Department of Development Four Component (4COM) Home Repair Loan Program. Limited funding is provided by the U.S. Dept. of Housing & Urban Development to assist eligible low-and- moderate income homeowners to make repairs or replacements to the following four components (4COM) of a home: Roof, Electrical, Plumbing (including sanitary sewer connections), and HVAC/Furnace. No emergency repairs are available. Enclosed is a copy of the application packet. Submitted applications do not guarantee acceptance into the 4COM, and priority will be given to first time applicants. In addition, **repeat applicants that have previously participated in the housing rehabilitation loan program are eligible to re-apply after a 5-year waiting period has elapsed from the date of the original signed loan document for a 4COM loan.**

To apply, simply complete the application in its entirety and return it with the required documentation to:

Attn: Rehab. Loan Officer
Cuyahoga County Administrative Headquarters
Department of Development
2079 East 9th Street, 7th Floor
Cleveland, OH 44115

To expedite the processing of your application, please submit the following information with your application, where applicable:

- Copy of your most recent gas, electric, water and sewer bills.
- Copy of the declaration page that identifies the amount of homeowner's insurance, date of coverage and amount of premium.
- Copy of your most **recent six (6) pay stubs**.
- Copy of recent pension pay statement. Copy of most recent social security/disability income award letter, copy of SSI benefit for minors.
- Signature on the attached Request for Verification of Employment for each employer for all members of the household 18-years of age and older.
- If you have children 18-years of age and older who attend school, please submit a copy of their school registration.
- Copy of your most recent mortgage statement that reflects the mortgage balance, your payment and escrow information.
- Copy of court order for award of monthly child support payments. You will also need to contact the Child Support Enforcement Agency at (216) 263-4500 to obtain a printout of your child support payment history for the past six months.
- Copy of your last two quarterly statements for any stocks, bonds, money market, IRA, 401K, Keogh accounts or any similar types of interest bearing accounts.
- Copies of your complete (all pages) checking and savings account statements for the past six months.
- If you have self-employment income or rental income, a signed copy of your current federal Income Tax Return with the appropriate Schedules (Schedules C and/or E) to verify your income from self employment and/or rental property.
- Copy of a statement from your insurance company that reflect any cash value in your life policies before death (Whole Life and/or Universal Life policies).

All original documents will be returned to you upon your written request.

The processing of your application will begin upon receipt of your application and all requested information. Please use black or blue ink to fill-out application.

The Cuyahoga County Four Component (4COM) Home Repair Loan Program is funded by the U.S. Department of Housing and Urban Development, which requires us to verify your annual **gross** family income to determine your eligibility for the program.

We will also obtain a title report to verify your ownership of the property, taxes paid and any additional liens that may exist. Property must be in a "Simple Fee" ownership status.

A consumer credit report will be obtained to determine your ability to repay the debt. You may be required to attend credit counseling as a condition of the loan.

The difference between your home's market value and the balance of your mortgage(s) is considered equity. The 4COM Loan Program may not provide a loan which when added to your existing mortgage(s) exceeds 100% of the value. Therefore, it is necessary for us to verify the current balance on all mortgages that exist on your home.

There may be times we find it necessary to request additional information; your cooperation will be greatly appreciated.

Should you have any questions and/or require any additional information, do not hesitate to contact us at (216) 348-4066.

If you live in one of the following Entitlement Cities, please call the telephone numbers listed below to inquire about your community's home repair programs:

Cleveland Residents	(216) 664-4133
Cleveland Heights Residents	(216) 291-4869
Brecksville Residents	(440) 526-4351
East Cleveland Residents	(216) 681-2198
Euclid Residents	(216) 289-4625
Hunting Valley Residents	(440) 247-6106
Lakewood Residents	(216) 529-5906
Parma Residents	(216) 661-7372



CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS
DEPARTMENT OF DEVELOPMENT

2079 East 9th Street, 7th Floor
 Cleveland, Ohio 44115
 (216) 348-4066

Four Component (4COM) Home Repair Loan Program

The Four Component (4COM) Home Repair Loan Program enables eligible low-and-moderate income homeowners in participating communities to address any of the four major housing components: roof, electrical, furnace, & plumbing that have been compromised. Correcting these four major housing components helps maintain the quality of their homes, and creates a positive effect in the surrounding neighborhood.

Loans are offered at below-market interest rates to homeowners who meet program qualifications.

Loans are available for one to four-family houses. The owner must occupy one of the units.

Priority is given to first time applicants and must abide by the U.S. Department of Housing & Urban Development’s (HUD) housing quality standards. In most cases, the homeowner has a choice in the contractor selection process. However, all contractors must meet registration requirements established by the Department of Development.

Eligibility

- Loans are made to low-to-moderate income households based on HUD income guidelines.
- If your **annual gross** income exceeds the limit for the number of people in your household, you are **ineligible** for the program. Please see annual gross income limit chart below.
- Interest rate and term are based on annual gross income and your ability to repay the loan. Please see the chart below.
- Homeowners age 62 and over who meet all eligibility requirements will be offered 0% *deferred loans up to the maximum income limit.
- Repeat applicants that have previously participated in the housing rehabilitation loan program are eligible to re-apply after a 5-year waiting period has elapsed from the date of the original signed loan document for a 4COM loan.

HUD INCOME LIMITS (Annual Gross Income)

<u>Household Size</u>	<u>0% Interest</u> <u>*Deferred</u> (At or Below)	<u>0% Interest</u> <u>Repayment</u> (Between)	<u>2% Interest</u> <u>Repayment</u> (Between)	<u>4% Interest</u> <u>Repayment</u> (Between)
1	\$23,800	\$23,801-\$28,560	\$28,561-\$33,320	\$33,321-\$38,050
2	\$27,250	\$27,251-\$32,640	\$32,641-\$38,150	\$38,150-\$43,450
3	\$30,600	\$30,601-\$36,720	\$36,721-\$42,840	\$42,841-\$48,900
4	\$33,950	\$33,951-\$40,740	\$40,741-\$47,530	\$47,531-\$54,300
5	\$36,700	\$36,701-\$44,040	\$44,041-\$51,380	\$51,381-\$58,650
6	\$39,400	\$39,401-\$47,280	\$47,281-\$55,160	\$55,161-\$63,000
7	\$42,100	\$42,101-\$50,520	\$50,521-\$58,940	\$58,941-\$67,350
8	\$44,850	\$44,851-\$53,820	\$53,821-\$62,790	\$62,791-\$71,700

***Deferred** – no monthly payments required. Loan is payable in full upon transfer of title.

- A title search and credit check is required at no charge to the applicant.
- Loans are secured by a mortgage lien.

**FOUR COMPONENT (4COM) HOME REPAIR LOAN PROGRAM
2017 URBAN COUNTY PARTICIPATING COMMUNITIES**

- | | |
|----------------------------|--------------------------|
| 1. BAY VILLAGE | 27. MIDDLEBURG HEIGHTS |
| 2. BEACHWOOD | 28. MORELAND HILLS |
| 3. BEDFORD | 29. NEWBURGH HEIGHTS |
| 4. BEDFORD HEIGHTS | 30. NORTH OLMSTED |
| 5. BENTLEYVILLE VILLAGE | 31. NORTH RANDALL |
| 6. BERA | 32. NORTH ROYALTON |
| 7. BRATENAHL VILLAGE | 33. OAKWOOD VILLAGE |
| 8. BROADVIEW HEIGHTS | 34. OLMSTED FALLS |
| 9. BROOK PARK | 35. OLMSTED TOWNSHIP |
| 10. BROOKLYN | 36. ORANGE VILLAGE |
| 11. BROOKLYN HEIGHTS | 37. PARMA HEIGHTS |
| 12. CHAGRIN FALLS TOWNSHIP | 38. PEPPER PIKE |
| 13. CHAGRIN FALLS VILLAGE | 39. RICHMOND HEIGHTS |
| 14. CUYAHOGA HEIGHTS | 40. ROCKY RIVER |
| 15. FAIRVIEW PARK | 41. SEVEN HILLS |
| 16. GARFIELD HEIGHTS | 42. SHAKER HEIGHTS |
| 17. GATES MILLS | 43. SOLON |
| 18. GLENWILLOW VILLAGE | 44. SOUTH EUCLID |
| 19. HIGHLAND HEIGHTS | 45. STRONGSVILLE |
| 20. HIGHLAND HILLS | 46. UNIVERSITY HEIGHTS |
| 21. INDEPENDENCE | 47. VALLEY VIEW |
| 22. LINNDALE | 48. WALTON HILLS VILLAGE |
| 23. LYNDHURST | 49. WARRENSVILLE HEIGHTS |
| 24. MAPLE HEIGHTS | 50. WESTLAKE |
| 25. MAYFIELD HEIGHTS | 51. WOODMERE VILLAGE |
| 26. MAYFIELD VILLAGE | |

If you live in one of the following Entitlement Cities, please call the telephone numbers listed below to inquire about your community's home repair programs:

Cleveland Residents	(216) 664-4133
Cleveland Heights Residents	(216) 291-4869
Brecksville Residents	(440) 526-4351
East Cleveland Residents	(216) 681-5020
Euclid Residents	(216) 289-4625
Hunting Valley Residents	(440) 247-6106
Lakewood Residents	(216) 529-5906
Parma Residents	(216) 661-7372



FREQUENTLY ASKED QUESTIONS

Cuyahoga County Department of Development Four Component (4COM) Home Repair Loan Program

What is the Four Component (4COM) Home Repair Loan Program?

The Four Component (4COM) Home Repair Loan Program is designed to maintain the integrity of neighborhoods throughout Cuyahoga County. These loans are NOT a conventional equity loan or equity line of credit. Funding is limited to repair and/or replace major housing components: such as: **Roof, Electrical, Furnace and Plumbing – including sanitary sewer connections.**

Who is eligible for the Program?

An applicant must meet all of the following eligibility requirements:

- 1.) Must meeting Income guidelines set forth by U.S. Dept. of Housing and Urban Development (HUD);
- 2.) Must own and reside in the home as their primary residence;
- 3.) Property taxes must be paid current or provide proof of signed tax repayment plan with the Cuyahoga County Treasurer;
- 4.) A current homeowner's insurance policy must be in place;
- 5.) Bankruptcies must be discharged (for a minimum of two years);

I have already received a Housing Rehabilitation Loan from the Cuyahoga County Dept. of Development (CCDOD). Can I apply for another loan?

Repeat applicants that have previously participated in the housing rehabilitation loan program are eligible to re-apply after a 5-year waiting period has elapsed from the original case close-out date for a 4COM loan. Funding is limited and priority will be given to first time applicants who have not previously received a Home Rehabilitation Loan from our department.

I am in a Reverse Mortgage. Can I apply for this loan?

Currently, we can accept applications from homeowners who are in a reverse mortgage. However, based on changes in future funding regulations this is subject to change.

When am I required to repay the loan?

The interest rate and terms of the loan are based on annual gross income and your ability to repay the loan. Homeowners who are age 62 and over, and meet all eligibility requirements will be offered a 0% deferred loan. All loans are secured by a lien on the property.

My household income is only \$100 above the maximum income limit. Can I still receive assistance?

No, the total annual gross household income may not exceed the maximum limit.

What types of improvements are ineligible?

Normal home repair or maintenance items are ineligible. Such as:

remodeling (kitchen, bathroom)	Driveways/sidewalks
Room additions	Basement Waterproofing
Window Replacement	Painting
Siding	Landscaping
Flooring	Luxury Items (pools, hot tubs, etc)

How do I apply for the program?

You may contact the CCDOD office at 216-443-7260 to request a Four Component (4COM) Home Repair Loan Program application, or you may download the application from the department website: <http://development.cuyahogacounty.us>.

Who is responsible for the rehabilitation of my home?

The Contract for rehabilitation will be between the homeowner and the contractor. The homeowner is responsible for communicating with the contractor to schedule the work necessary to complete the terms of the contract. The CCDOD is not a party to the Contract and assumes no liability for any problems that may occur between the contractor and the homeowner. When requested by the homeowner, and depending upon availability, the CCDOD may provide additional administrative assistance once the project has started.

Do I have to find the contractors to work on my home?

Yes, the homeowner is responsible for choosing their contractor(s). However, contractors must be qualified and registered with the CCDOD before a contract with the homeowner is signed. For bidding purposes, a Bid Request Form describing the scope of work will be provided to the homeowner by the CCDOD. The homeowner is then to obtain contractor bid proposals on their own. The homeowner may also request a list of contractors that are currently registered with the CCDOD to bid on the project.

What communities are eligible to participate in the program?

Any community that is within Cuyahoga County limits may participate **except** the Entitlement Cities listed below. If you live in one these entitlement cities please call the telephone number provided to inquire about their rehabilitation programs:

Cleveland	(216) 664-2790	Euclid	(216) 298-4625
Cleveland Heights	(216) 291-4869	Lakewood	(216) 529-5906
East Cleveland	(216) 681-2388	Parma	(216) 661-7372



CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS
DEPARTMENT OF DEVELOPMENT
2079 East 9th Street, 7th Floor
Cleveland, Ohio 44115
(216) 348-4066

FOUR COMPONENT (4COM) HOME REPAIR LOAN PROGRAM APPLICATION

Services are limited to the following:

Roof Furnace (HVAC) Electrical Plumbing

Please make a check in the box next to the major housing component(s) that needs to be addressed.

Applicant(s):

Owner Last Name First Middle Init. Social Security Number Birthdate

Co-Owner Last Name First Middle Init. Social Security Number Birthdate

Address City Zip ()
Phone Number

Second Phone Number: _____

E-Mail Address: _____

Number of Bedrooms: _____

Please (✓) check mark.

Single Family Home Two Family Multi Family (3 or more)

Demographic data is obtained for statistical purposes and will not be considered by the County in determining eligibility. Married borrowers must have their spouse sign the mortgage deed. Please (✓) check mark.

Head of Household: Male: Female:
Ethnicity: Select only one: Hispanic/Latino Yes No
Race: Select one or more: White Black or African American Asian
Native Hawaiian or Other Pacific Islander Native American Indian or Alaskan
Other Multi-Racial

Marital Status: Married Unmarried (Including single, divorced, widowed)

Please list all of the people living at this property including yourself:

NAME	AGE	RELATIONSHIP	INCOME (MONTHLY)
_____	_____	<u>Self</u>	\$ _____
_____	_____	<u>Co-Owner</u>	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

PREVIOUS SERVICE:

Have you ever received a housing rehabilitation loan through this Department?

*Yes No If *yes, what Year _____.

*Repeat applicants that have previously participated in the housing rehabilitation loan program are eligible to re-apply **after a 5-year waiting period** has elapsed from the date of the original signed loan document for a 4COM loan.

INCOME AND EMPLOYMENT: (If any person listed is self-employed, submit a current financial statement, copy of signed current tax return, including all schedules, and current profit and loss statement).

All income sources for all persons of the household must be stated:

Your Annual **Gross** Income \$ _____

Name of Your Employer _____ # number of years employed: _____

Your Employer Address _____

Co-Owner's Annual **Gross** Income \$ _____

Co- Owner's Employer _____ # number of years employed: _____

Co-Owner's Employer's Address _____

Other sources of Household **Monthly** Income:

Pension	\$ _____	Unemployment	\$ _____	Div/Int	\$ _____
Social Security	\$ _____	VA Benefits	\$ _____	Rental Income	\$ _____
SSI	\$ _____	Alimony	\$ _____	Welfare	\$ _____
Disability	\$ _____	Child Support	\$ _____	Other	\$ _____

Attach proof of gross income from all sources for each adult member and/or minor of the household that receives assistance.

HOUSEHOLD EXPENSES

Attach most recent electric, gas, water, and sewer bills only.

FAMILY ASSETS:

Name of Financial Institution: _____
Name of Financial Institution: _____

Please (✓) check mark.
Checking Savings
Checking Savings

Attach 6 most recent bank account statements for each account.

Do you have any investment accounts/stocks/etc.? Yes No

If yes, attach 2 most recent quarterly statements.

Do you own life insurance that allows you to borrow cash before death? Yes No

If yes, attach statement showing cash value of policy.

Are there any revocable trusts that are available to the family? Yes No

Do you own any other real estate? Yes No

If yes, attach most recent federal signed tax return (including schedule E), mortgage statement (if applicable), and list addresses of properties here:

MORTGAGE INFORMATION:

Purchase Price of Home \$ _____ Year _____

Do you have a mortgage(s) on your home? Yes No

First Mortgage FHA Loan? Yes No

NOTE: Attach most recent Mortgage Statement for each mortgage you have.

HOMEOWNER INSURANCE INFORMATION:

Name of Homeowner Insurance Company Annual Premium Amount \$ _____

Attach declaration page from current homeowners insurance. Must show dates of coverage.

MISCELLANEOUS:

Have you any past obligations owed to Cuyahoga County in the past five (5) years?

Yes No

Has either owner or co-owner declared bankruptcy in the past two (2) years?

Yes No

How did you hear about the program? *Please (✓) check mark.*

- | | |
|---|--|
| <input type="checkbox"/> City Building Department | <input type="checkbox"/> City Newsletter |
| <input type="checkbox"/> Cuyahoga County Website | |
| <input type="checkbox"/> Newspaper | |
| <input type="checkbox"/> Television | |
| <input type="checkbox"/> Other _____ | |

The owner and co-owner certify that all information on this application, and all information furnished in support of this application, is given for the purpose of obtaining financial assistance under the Cuyahoga County Four Component (4COM) Home Repair Loan Program, and is true and complete to the best of the applicants' knowledge and belief. Verification may be obtained from any source herein. A credit report may be obtained on the owner and co-owner by Cuyahoga County. **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 States 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 five years or both."

Owner

Date

Co-Owner

Date

(You must mail in your signed original application. Faxed applications are not accepted.)



CUYAHOGA COUNTY ADMINISTRATIVE HEADQUARTERS
DEPARTMENT OF DEVELOPMENT
 2079 East 9th Street, 7th Floor
 Cleveland, Ohio 44115
 (216) 348-4066

RELEASE OF INFORMATION

Purpose: To make sure that assistance is used properly, Federal laws require that the information that you provide be verified. To receive assistance from The U.S. Department of Housing and Urban Development, applicants and all household members who are 18 years of age or older are required to sign this form that authorizes the above-named organization to obtain information from third parties relative to your eligibility and participation in its programs.

Consequences for Not Signing the Consent Form. If you fail to sign this form, or the individual verification forms, this may result in your assistance being denied.

Types of Information to be released. I authorize the above-named organization and the U.S. Department of Housing and Urban Development to obtain information about me and my household that is pertinent to eligibility for participation in the Four Component Home Repair Loan Program and/or the Lead Hazard Control Grant Program. Information may be made about the following items:

- ✓ Income (all sources)
- ✓ Assets (all sources)

I acknowledge that:

- 1) A photocopy of this form is as valid as the original.
- 2) I have the right to review the file and the information received using this form.
- 3) I have the right to copy information from this file and to request correction of information that I believe is inaccurate.
- 4) All adult household members will sign this form and cooperate with the above-named organization in this process.

Instructions: Each adult member of the household (18 years of age or older) must sign the release of information form prior to the receipt of assistance.

Please print and sign your name and date:

_____	_____	_____	_____
Head of Household	Date	Other Adult Member of Household	Date
_____	_____	_____	_____
Adult Member of Household	Date	Other Adult Member of Household	Date



Request for Verification of Mortgage

CUYAHOGA COUNTY FOUR COMPONENT (4COM) HOME REPAIR LOAN PROGRAM

A. Name and Address of Homeowner(s)	B. Name and Address of Mortgage Lender
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I hereby authorize the release of information on my mortgage loan to the Cuyahoga County Department of Development.

Signature of homeowner (1) _____
Date

Signature of homeowner (2) _____
Date

NOTE TO MORTGAGE LENDER

The applicant identified above has applied for a Cuyahoga County loan for property rehabilitation. The applicant has authorized the County to obtain verification from any source named in the application. Your verification of mortgage is for the confidential use of Cuyahoga County Dept. of Development only. Please furnish the information requested below and return this form along with if any signed **Loan Modification, Forbearance Agreement, or Re-Payment Plan** documents.

To be filled-out by Mortgage Lender only.

Type of Mortgage:	Monthly Payment Information:
Account Number:	Principal and Interest \$ _____
Original Amount of Mortgage: \$	Taxes \$ _____ (if applicable)
Present Mortgage Balance: \$	Insurance \$ _____ (if applicable)
	Total Monthly Payment \$ _____
	Is the borrower current on this mortgage? <input type="checkbox"/> Yes or <input type="checkbox"/> No
	If No, how many payments behind? _____
	Has borrower entered into a repayment plan or loan modification? If so, please forward a copy of such agreement.

 Signature of Authorized Lender Title _____
Date

Name and Address of Agency to which this Form is to be returned:

Attn: Rehab. Loan Officer
 Cuyahoga County Administrative Headquarters
 Department of Development
 2079 East 9th Street, 7th Floor
 Cleveland, Ohio 44115



Request for Verification of Employment

CUYAHOGA COUNTY FOUR COMPONENT (4COM) HOME REPAIR LOAN PROGRAM

SOCIAL SECURITY NUMBER / /

A. NAME ADDRESS, AND ZIP CODE OF APPLICANT	C. APPLICATION NUMBER _____ (To Be Filled-in by Loan Officer) D. DATE OF REQUEST
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B. NAME, ADDRESS, AND ZIP CODE, PHONE # OF APPLICANT'S EMPLOYER	NOTE TO EMPLOYERS The applicant identified in Block A has applied for a loan/grant for property rehabilitation under the County Rehabilitation Program. The applicant has authorized the County in writing to obtain verification from any source named in the application. Your verification of employment is for the confidential use of the County.
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Employer's Verification

E. POSITION HELD:	RATE OF PAY \$ _____ per hour. Approximate # of Hours per pay period: _____ Pay Period is: <input type="checkbox"/> WEEKLY <input type="checkbox"/> BI-WEEKLY <input type="checkbox"/> MONTHLY
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F. DATES OF EMPLOYMENT:	ANTICIPATED ANNUAL SALARY: \$ _____
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G. PROBABILITY OF CONTINUED EMPLOYMENT:	ADDITIONAL COMPENSATION – ACTUAL AMOUNTS RECEIVED PAST 12 MONTHS: Overtime \$ _____ Commission \$ _____ Bonus \$ _____
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H. OTHER REMARKS: J. SIGNATURE OF EMPLOYERS The above information is furnished in strict confidence, in response to your request. _____ ate _____ Signature _____ Title	If applicant is in military service , give income on monthly basis as follows: Base Pay \$ _____ Quarters & Sustenance \$ _____ Flight or Hazard Duty allowance \$ _____
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K. NAME, ADDRESS, AND ZIP CODE TO WHICH THIS FORM IS TO BE RETURNED: ATTN: Rehab. Loan Officer Cuyahoga County Administrative Headquarters Department of Development 2079 East 9 th Street, 7 th Floor Cleveland, Ohio 44115
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I hereby authorize the release of the above requested information to the Cuyahoga County Department of Development.

X _____
Applicant's Signature