



Please complete this form and return with requested documentation to:

Champlain Housing Trust
Attn: FWH Repair Loan Program
88 King Street
Burlington, VT 05401

Email: cglassberg@getahome.org ★ Phone: (802) 810-8217 (Text or Call)

Complete Application Packet includes the following:

- 1) Completed Application Form, signed by the Applicants (Operator/Property Owners)
- 2) CHT Income Certification Form (attachment), completed and signed (Operator/Property Owners)
- 3) Most recent Federal Tax Return for the Farm business (Operator/Property Owners)
- 4) Most recent bank statements for business accounts (Operator only)
- 5) Copy of the Property Tax Bill and Deed for the property
- 6) Potential Scope of Work and Estimated Budget for Project
- 7) Copy of contractor contracts, if available

PROGRAM OVERVIEW

- The Vermont Farmworker Housing Repair Loan Program (FWHRLP) offers forgivable loans up to \$30,000 to improve farmworker housing conditions.
- The enrolled housing unit(s) must be an existing permanent or semi-permanent structure owned by the farm and currently used for worker housing, or will be used for worker housing upon completed rehabilitation. Owner-occupied farm dwellings are not eligible.
- Farmer applicants must be actively engaged in farming as defined by Section 2.16 of the Required Agricultural Practices from the Vermont Agency of Agriculture (excluding sections (f) and (g)):
<https://agriculture.vermont.gov/water-quality/regulations/farm-definitions-and-determinations#farm>
 - Have at least \$75,000 in annual gross revenue from farming activity
 - Total gross income must be below USDA's threshold of \$900,000 average adjusted gross income:
<https://www.fsa.usda.gov/programs-and-services/payment-eligibility/adjusted-gross-income/index>
- Compliance with the Vermont Rental Housing Code is required and any applicable local ordinances: https://www.healthvermont.gov/sites/default/files/documents/pdf/REG_Rental_Housing_Code.pdf Project scope may be reviewed and altered if the property is on or eligible for the State or National Historic Register

Services Provided by Champlain Housing Trust

- Attend an initial site visit of the property/units with farm owner
- Review proposed scope of work and budget, help to define and finalize the project
- Provide support in finding certified contractors to bid on project
- Confirm construction deadlines are being met and provide progress payments
- Conduct final inspection to ensure all repairs have been completed
- Collect and verify all program documents: pre-work, during-work, post-work as required.

Information on this form will be used to assess your eligibility for the Vermont FWHRLP

SECTION A. Farm Information (please list all owners, attach extra sheet if necessary):

Farm Operator/Applicant Name: _____

Applicant Date of Birth: _____ Tax Identification Number: _____

Property Owner (if different from above): _____

Property Owner Date of Birth: _____ Tax Identification Number: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Best Way to Reach You (circle one): Phone: _____ Can you receive texts (Y/N) _____

Email: _____ How did you hear about the program: _____

SECTION B. Farm and Income Information:

Farm Name: _____ Date of Incorporation: _____

Type of Farm Operation (e.g. dairy, crops): _____

Type of Business Structure (select): Corporation Sole Proprietor Partnership Other

If other, please specify: _____

Please list the annual gross revenue from each farming activity for the most recent year:

Farming Activity		Gross Revenue
a.	Cultivation or other use of land for growing food, fiber, Christmas trees, maple sap, or horticultural, viticultural, and orchard crops	
b.	The raising, feeding, or management of livestock, poultry, fish, or bees	
c.	The operation of greenhouses	
d.	The production of maple syrup	
e.	The on-site storage, preparation, and sale of agricultural products principally produced on the farm	

Farm Cash Assets: _____

Amount of cash assets or loan commitments set aside to help pay for repairs: _____

Do you have any Mortgage, Liens, Judgments, or Other Encumbrances on the Property? Yes No

List any Mortgage, Liens, Judgments, or Other Encumbrances on the Property: (use additional sheet of paper for further description)

Company/Organization	Loan Amount	Interest Rate	Term	Other

Town/Village for Property Taxes: _____

Total Annual Property Taxes: _____ Are Taxes Current?: Yes No

Notes: _____

Explain why FWHRLP funds are needed and how the project would or would not move forward without these funds.

Please check the appropriate box and provide a further description.

- Without this loan, this project would not happen
- Without this loan, an urgent window of opportunity would be missed
- Without this loan, the project would have a lower probability of success
- Without this loan, this project would happen in a less desirable fashion
- This project would happen, as planned, without these loan funds

SECTION C. Worker Housing Information:

Type of Housing (e.g. manufactured, stick built): _____

Property Address (if different from farm address): _____ Year Built: _____

Approximate Square Feet: _____ Number of Employees Housed: _____

Number of Bedrooms: _____ Type of employees (year-round or seasonal): _____

Additional occupants with ages and relationship to employees: _____

Describe necessary repairs (if additional space needed, attach further description): _____

Estimated project cost: _____

Contractor Name (if available): _____

Other Notes _____

Worker Housing Information – Additional Unit (If applying for more than two units, please attach additional sheet):

Type of Housing (e.g. manufactured, stick built): _____

Property Address (if different from farm address): _____

Year Built: _____ Approximate Square Feet: _____

Number of Employees Housed: _____ Number of Bedrooms: _____

Type of employees (year-round or seasonal): _____

Additional occupants with ages and relationship to employees: _____

Describe necessary repairs (if additional space needed, attach further description:

Estimated project cost: _____

Contractor Name (if available): _____

Other Notes _____

Would you like more information about the Farm Viability Program offered by Vermont Housing and Conservation Board (VHCB): Yes No

Confidentiality

Champlain Housing Trust (CHT) is a non-profit housing organization subject to the laws of the State of Vermont. CHT maintains a consumer privacy policy regarding the responsible management, use and protection of personal information (see attached). Specifically, tax-related information of persons, personal financial information of an individual(s) and trade secrets submitted by applicants to the FWHRLP will be held in confidential files at CHT.

The FWHRLP is funded by a grant from VHCB. In order to remain compliant with funder requirements, CHT may be required to allow VHCB to engage in a review process that may include reviewing electronic and/or hard copy files. If CHT shares information with VHCB, we will require their agreement to protect the confidentiality of customer information and use it only for the specific purpose intended and not reuse, sell, rent, or disclose it in any other form to any other entity.

CHT may share information about the names of applicants, farms, location of farms and type of farms or businesses with VHCB; as well as with our partners; the University of Vermont Extension program, Rural Edge, Windham Windsor Housing Trust, and NeighborWorks of Western Vermont; for purposes of providing assistance to applicants to the FWHRLP.

SECTION D. Authorization and Acknowledgement

Each of the undersigned attests to the Champlain Housing Trust, Inc. and to CHT's actual or potential agents, successors and assigns and agrees and acknowledges that the information provided in this packet is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this packet may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq. CHT and its agents, brokers, insurers, successors, and assigns may continuously rely on the information contained in the packet. Each of the undersigned hereby acknowledges that CHT its servicers, successors and assigns, may verify or re-verify any information contained in this packet or obtain any information or data relating to the packet, for any legitimate business purpose through any source, including a financial institution, employer, creditor, or any other source listed in this form. Each of the undersigned also understands that this application is for eligibility purposes only, and submitting this form does not constitute a commitment of funds.

Farm Operator/Applicant Signature: _____ Date: _____

Property Owner Signature: _____ Date: _____
(If different from above)

Average Adjusted Gross Income (AGI) Certification



Instructions

To determine eligibility for the Farmworker Housing Repair Loan Program (FWRHLP), Champlain Housing Trust needs to verify that the farm operator, and property owner if different (corporation, sole proprietor, partnership, or other), has an average Adjusted Gross Income (AGI) of less than \$900,000. AGI is the individual's or legal entity's IRS-reported adjusted gross income consisting of both farm and non-farm income. This certification pertains to the farm owner's average AGI for the previous three years of tax returns for eligibility purposes.

Applicant Information

Farm owner/Applicant Name	
Tax Identification Number:	
Street Address (including city, state, and zip code)	

Certification of Average Adjusted Gross Income

The program year for payment eligibility:

The period for calculation of the average AGI will be of the three completed taxable years preceding the taxable year for which benefits are requested. For example, the 3-year period for the calculation of the average AGI for 2022 would be the taxable years of 2019, 2020 and 2021.

I certify that the average adjusted gross income of the individual or legal entity listed above for the year _____ was:

A. Less than (or equal to) \$900,000

B. More than \$900,000

By signing this form:

- I acknowledge that I have read and reviewed all definitions and requirements on Page 2 of this form;
- I certify that all information contained within this certification is true and correct; and is consistent with the tax returns filed with the IRS;
- I certify that I am authorized under applicable state law to execute this consent on behalf of the legal entity identified above (for legal entity only).

Signature

Name

Date MM DD YYYY