



Home Repair Loan Program Eligibility Packet

Please note:

- CHT is no longer offering grants of \$2,500 due to funding constraints.
- This packet is required to determine **eligibility** for our home repair program. *This is not an application for a loan.*
- Due to our high volume of projects, there may be delays. We do not have the ability to respond to urgent or time sensitive repairs.

Instructions:

- If you need assistance in filling this out, please call (802) 861-7388 or loans@getahome.org. The toll free number is (877) 274-7431.
- Please fill out this packet in its entirety before submitting.
- If you need to provide additional information in any section, please include a separate sheet of paper.
- You must submit your packet with the following information:
 - One month's worth of income documents (i.e. paystubs, benefit award letter, pension statement, etc.)
 - Most recent bank statement
 - Property Tax Bill
 - Detailed explanation of any credit related issues

If you have questions, please call (802) 861-7388

Please return to:

Champlain Housing Trust
Attn: Loans
88 King Street
Burlington, VT 05401





Home Repair Loan Program Eligibility Packet

Applicant Information

Primary Applicant

Name: _____

Social Security Number: ____-____-_____

Birth Date: _____

Marital Status: Married Unmarried Separated

Are you a: U.S. Citizen Permanent Resident Alien

Gender: Male Female Transgender Other

Military Veteran? Yes No

Co-Applicant

Name: _____

Social Security Number: ____-____-_____

Birth Date: _____

Marital Status: Married Unmarried Separated

Are you a: U.S. Citizen Permanent Resident Alien

Gender: Male Female Transgender Other

Military Veteran? Yes No

Mailing Address: _____

Property Address (if different): _____

Email Address: _____

Phone Number: _____

Best way to Reach you (**circle one**; only choose email if you check it at least once a day): phone email USPS mail

Other Household Members

Please list **everyone** (aside those listed above) who reside in the home.

<u>Name</u>	<u>Date of Birth</u>	<u>Income</u>	<u>Full time Student?</u>





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Income Information:

Please list all payments any household member (including minors) receives from working, Social Security, Supplemental Security Income (SSI), Supplemental Security Disability Income (SSDI), Housing Assistance Payment (HAP), Worker's Comp, Disability pay/benefits, Unemployment Insurance, severance pay, annuities, insurance policy payments, pension, retirement benefits, death benefits, Armed Forces Pay, alimony/maintenance, Child Support, OTHER: Money or gifts regularly given by persons not living in the home; Lottery winnings paid periodically; rental income from tenants; interest, dividends, royalty income, income from estates or trusts; Other- please specify.

Primary Applicant:

Employer Name: _____ Hire Date: _____ Job Title: _____

Employer Mailing Address: _____

Pay Rate: _____ Hours Worked Per Week: _____ Frequency of Pay: _____

If less than two years at current job, please provide previous employer and income information: _____

Other Income (Y/N): _____ If Yes, Provide Source and Monthly Income: _____

Co - Applicant:

Employer Name: _____ Hire Date: _____ Job Title: _____

Employer Mailing Address: _____

Pay Rate: _____ Hours Worked Per Week: _____ Frequency of Pay: _____

If less than two years at current job, please provide previous employer and income information: _____

Other Income (Y/N): _____ If Yes, Provide Source and Monthly Income: _____

Other Household Income:

Household Member Name: _____ Source of Income: _____ Monthly Amount: _____

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Household Member Name: _____ Source of Income: _____ Monthly Amount: _____

Notes: _____

****For wage/salary income, please submit one month's worth of your most recent paystubs****

****For Social Security/Benefits, please submit Award Letter****

****For Self-Employment, Two Years Tax Returns and Year to Date Profit and Loss****





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Housing Information:

Current Value of Home: \$ _____ Year of Purchase: _____ Original Purchase Price: \$ _____

Are you in our Shared Equity Program (Y/N): _____ Do you pay HOA fees or Lot Rent? If yes, how much? _____

Title to the Property is in the name(s) of: _____

Does anyone else have an ownership interest in the property (i.e. life estate, homestead rights)? Yes No *

If yes, please state their name and type of ownership: _____

*Vermont law recognizes a homestead right in the spouse or civil union partner of the legal owner of real estate when it is used or kept as their primary residence, even if the spouse or civil union partner is not a Title Owner to that property. This homestead interest prevents creditors from attaching the entire interest in the property without consent of all parties who have an ownership interest in the property. For this reason we will require all parties with an ownership interest to sign the mortgage deed to insure that our lien is fully enforceable.

Property Taxes:

Tax Assessed Value: \$ _____ Town/Village/City you pay: _____

How much do you pay in taxes per year? _____ Are Taxes Current (Y/N): _____

****Please Submit a Copy of Your Most Recent Property Tax Bill****

Homeowner's Insurance:

This program requires you to maintain Homeowner's Insurance on your property. You will also be required to maintain flood insurance if your property is determined to be in a Flood Hazard Area.

Insurance Company: _____ Policy Number: _____

Agent Name: _____

Phone _____ Fax: _____ Email: _____

Coverage: Dwelling _____ Deductible: _____ Annual Premium: _____

Mortgage Information:

Original Mortgage Amount: \$ _____ Current Balance: \$ _____

Interest Rate: _____ Term (years): _____ Fixed or Adjustable Rate: _____

Monthly Payment: \$ _____ Includes Taxes and Insurance (Y/N): _____

Lender's Name: _____ Account Number: _____

Address: _____ City: _____ State: _____ Zip: _____





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Mortgage Information (continued):

Is there a Second Mortgage? Or Home Equity Line of Credit? (Y/N): _____ If Yes, Lender: _____

Current Balance: \$ _____ Rate: _____ Term (Years): _____ Monthly Payment: \$ _____

Notes: _____

How much money do you believe you can pay monthly on a Home Repair Loan? \$ _____/per month

Assets: Please include cash held in checking/savings accounts, mutual funds, certificate of deposit, money market, and retirement accounts. Include the cash value of any owned stock, bonds, treasury bills, trust funds, and life insurance policies (available to individual before death). Additionally, please include any equity in Real Estate, and cash value of personal investments in jewelry, gems, coins, cars, etc. DO NOT COUNT personal property such as clothing, furniture, cars etc.

Household Member	Asset Type	Financial Institution	Amount/Value:

Liabilities: Please include items such as car loans/leases, student loans, credit cards, other installment loans

Household Member	Creditor/Type of Liability	Outstanding Balance	Minimum Monthly Payment

Credit and Legal Information:

1. Are you currently or have you ever filed for bankruptcy? Yes No If yes, provide type and date of discharge: _____
2. Do you currently or have you ever had a judgement or lawsuit against you? Yes No
3. Do you have any liens on your property (other than mortgage)? Yes No
4. Are there any other legal claims against you? Yes No
5. Is this property in probate? Yes No
6. Have you been more than 30-days late with any creditor, or received notice of collections/charge offs? If yes, please explain: _____





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Affirmation, Authorization, Acknowledgement, and Signatures

Each of the undersigned specifically represents to Champlain Housing Trust, Inc. (CHT) and to CHT's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that:

1. 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.
2. all statements made in this packet are made for the purpose of determining program eligibility
3. the property will not be used for any illegal or prohibited purpose or use
4. the property will be occupied as indicated in this packet
5. Champlain Housing Trust, Inc., its servicers, successors or assigns may retain the original and/or an electronic record of this packet, whether or not I am eligible for the program and/or a Loan is subsequently recommended
6. Champlain Housing Trust, Inc. and its agents, brokers, insurers, servicers, successors, and assigns may continuously rely on the information contained in the packet, and I am obligated to amend and/or supplement the information provided in this packet if any of the material facts that I have represented herein should change prior to the origination of any such Loan
7. This Eligibility Packet is not considered an application for a loan; I will be required to complete a Loan Application Form prior to Champlain Housing Trust, Inc. loan committee making a loan decision.

Acknowledgement. Each of the undersigned hereby acknowledges that Champlain Housing Trust, Inc., its servicers, successors and assigns, may verify or reverify 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, landlord, or any other source listed in this form, or a consumer reporting agency.

Applicant Signature	Date	Co-Applicant Signature	Date
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Champlain Housing Trust, Inc. is an Equal Housing Opportunity Program. Discrimination is prohibited by Federal Law.

GOVERNMENT MONITORING INFORMATION

The following information is requested by the Federal Government in order to monitor the Lender's compliance with equal credit opportunity, fair housing and mortgage disclosure laws. You are not required to provide 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 or not you choose to provide it. However, if you choose not to provide it, under Federal regulations this Lender is required to note race and gender on the basis of visual observation or surname.

Applicant: I do not wish to provide this information, **or check all that apply:** Handicapped/Disabled

Sex: Female Head of Household Female Male Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: White Black/African American Asian Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native

American Indian/Alaskan Native and White Asian and White Black African American and White

Other Multi-Racial

Co-Applicant: I do not wish to provide this information, **or check all that apply:** Handicapped/Disabled

Sex: Female Head of Household Female Male Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: White Black/African American Asian Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native

American Indian/Alaskan Native and White Asian and White Black African American and White

Other Multi-Racial

If noted by Lender, by: Visual Observation Surname





Home Repair Loan Program Rehab Addendum

Applicant: _____ Co-Applicant: _____

Property Address: _____

Property Type:

Single Family Home Mobile Home Duplex Other _____

Ownership Type:

Owned Land Leased Land CHT Shared Equity Other _____

General Information:

_____ # of bedrooms _____ # of bathrooms _____ Year Built

Utility Information

- Public Water/Sewer
- Well
- Septic System
- Electric: _____ Provider
- Oil: _____ Provider
- Solar: _____ Provider
- Natural Gas: _____ Provider
- Other: _____

Have you had any of the following work done? :

- Radon Testing Year _____ Result _____
- Weatherization Year _____ Result _____
- Lead Testing Year _____ Result _____
- *If yes which Lead Program? _____
- Are your smoke detectors functioning? Yes No

Housing Conditions:

Please describe the reason(s) why you are applying to this program. Include all essential repairs that need to be made to your home. Use the back of this sheet if necessary.

This form gives us information about your house and the items that require work. Champlain Housing Trust uses public funds that require borrowers to comply with the following government regulations:

1. Housing Quality Standards established by the U.S. Department of Housing and Urban Development (HUD)
2. State and local Health, Safety, Building, and Energy Codes
3. If your home is eligible for the State or National Register of Historic Places, all work must comply with the Secretary of the Interior's Standards for Rehabilitation
4. In compliance with federal EPA regulations and Vermont law, all repair work in homes built prior to 1978 will be done by EPA RRP Certified contractors who will use lead-safe work practices.

In addition, our program policies require that we follow these procedures:

1. Energy audits for weatherization loans must be performed by pre-approved certified energy auditor
2. A priority system will be used to address the most serious problems (mechanical and structural systems) before including less severe conditions in the scope of work.

I / we authorize Champlain Housing Trust (CHT) Construction Consultant to perform any/all necessary site visits required to prepare a recommended scope of work, which will further determine the loan amount I may be eligible to apply for.

Applicant Signature

Date

Co-Applicant Signature

Date



Headquarters: 88 King Street, Burlington, VT 05401 NMLS ID #179570
Franklin/Grand Isle: 13 Lake Street, St. Albans, VT 05478 NMLS ID #184793





Division of Environmental Health

Radon Kit Request Form

For Office Use Only

Radon Detector #: _____

To receive a complimentary radon detector, please provide the following information and submit the form by e-mail or select the 'Print' button to mail or fax the form to the Radon Program.

First Name Last Name

Contact Number Cell Home Work

Physical Address of Property Being Tested (required)

'E911' Street Address

Town State VT Zip

Mailing Address

mail kit to physical address

Street

Town State Zip

Has this property been tested using the free VDH long term kit before? Yes No

*Please allow 2 - 4 weeks for delivery.
This offer is only valid for properties located in Vermont.*

Please submit completed form to:

VT Dept of Health, Radon Program
Division of Environmental Health
108 Cherry Street, PO Box 70
Burlington, VT 05402

1.800.439.8550
fax: 802.863.7483
e-mail: radon@state.vt.us
website: <http://healthvermont.gov/enviro/rad/radon.aspx>

To Submit Via E-mail:

- 1) Save the completed form
- 2) Attach to an e-mail to radon@state.vt.us with the subject "Radon Kit Request"

Print



Champlain Housing Trust HomeOwnership Center Consumer Privacy Policy

Champlain Housing Trust (CHT) is a non-profit housing organization subject to the laws of the State of Vermont. CHT values the trust of its customers and is committed to the responsible management, use and protection of personal information. This notice describes the HomeOwnership Center's policy for the collection and disclosure of your information. We are entrusted with sensitive non-public information about you and your finances and uphold strict confidentiality procedures within our organization. We do not now, nor have we ever, sold or rented your non-public personal information to any non-affiliated third party for any reason.

What information we collect: We may collect "non-public personal information" which could include but is not limited to items such as your social security number, household income, payment history, and account balances. This information is collected in order to provide homebuyer education, individual counseling, shared equity investments and services, financing options, and loans.

The following are sources we may obtain information from:

- Information you provide to us, on applications and other eligibility or loan related documents
- Information we receive from third parties such as credit bureaus, employers or other income sources, institutions with which you have deposited funds or that have extended you credit
- Information about your transactions with us, our affiliates, or others

What Information We Disclose: We may share information under the law about our experiences or transactions with you or your account (such as your account balance and payment history with us) with companies related to us by common control or ownership ("affiliates"). However, where state law may be more restrictive, we will abide by the more restrictive requirements.

In order to expedite processing of our services on your behalf, CHT may need to disclose non-public personal information about you to "non-affiliated third parties" (that is companies not related to us by common control or ownership) and **will do so only with a signed authorization to release information from you**. These entities may include: attorneys, other lending entities, CHT funding sources as required, government-funded programs and/or service providers, or other government entities; and when required by law or in response to subpoenas; and to reputable credit reporting agencies via servicers ("credit bureaus"). We also may share information with other funding programs in order to combine different sources of loans and/or grants to help address your housing needs. Finally, in order to remain compliant with funders requirements, CHT may be required to allow funders such as (but not restricted to) HUD, NeighborWorks America, Foundations, CHAPA, VHCB and/or HPN to engage in a review process that may include reviewing electronic and/or hard copy files.

If the HomeOwnership Center shares information with any non-affiliated third party, 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. We will continue to adhere to the privacy policies and practices described in this notice whether or not we find you eligible for our program, or if you pay off your loan with us.

Our Security Procedures: We will always maintain control over the confidentiality of our customer information, which includes having physical, electronic and procedural safeguards that comply with federal standards. We will permit only authorized employees, who are trained in the proper handling of our customers' sensitive non-public information, to have access to that information in order to provide you with quality products and superior service. All of our operational and data processing systems are in a secure environment that protects your information from being accessed by third parties. Thank you for your confidence in Champlain Housing Trust and the HomeOwnership Center and for allowing us to help meet your housing needs.

HEADQUARTERS 88 King Street, Burlington, Vermont 05401 | P: 802.862.6244 | F: 802.862.5054

FRANKLIN/GRAND ISLE 13 Lake Street, St. Albans, Vermont 05478 | P: 802.527.2361 | F: 802.527.2373

WWW.GETAHOME.ORG

WWW.CHAMPLAINHOUSINGTRUST.ORG

THIS ORGANIZATION IS AN EQUAL OPPORTUNITY
EMPLOYER AND PROVIDER

