



SMALL GRANT PROGRAM APPLICATION

Dear Concord Resident,

Thank you for your interest in the Concord Housing Development Corporation Small Grant Program. The purpose of this program is to provide financial assistance to rehabilitate existing housing units occupied by income eligible households to make them safe and sanitary. It is sponsored by the Concord Housing Development Corporation (CHDC) for the benefit of Concord residents.

The attached confidential application and grant process is designed to be simple and quick. There is minimal documentation required. A completed application, estimates for work requested, and copies of recent tax returns are all that is needed.

Grants are reviewed and awarded twice a year. Completed applications received by the end of January and June will be reviewed by the end of March and August respectively.

These grants are given on an unsecured basis; there is no repayment required of the funds awarded to you.

You must meet the following requirements to be eligible:

1. Property is in Concord, is owned by the applicant, is the primary residence of the applicant, and applicant intends to remain a resident of Concord for the next 12 months,
2. Maximum income of 100% of the Area Median Income,
3. Overall property assessment is below the Town median, which is \$819,400 for a single family home.
4. Agreement to notify the Concord Housing Development Corporation prior to listing your home for sale.

The grant limit for this program is \$5,000. Applications will be evaluated and prioritized based on health and safety considerations, and financial need of the applicant, including income and asset information.

The Concord Housing Development Corporation, in line with its mission, continually searches for properties which can be added to the pool of properties in Concord affordable to teachers, police, firefighters and other members of the community. In accepting grants from this program, you are required to notify the Concord Housing Development Corporation at least 60 days prior to listing your home for sale.

If you have questions regarding this program or if you require assistance in filling out the application, please contact us at (978) 287-1090 or by email at liz@RHSHousing.org. Applicants are encouraged to discuss their needs with program staff prior to submitting a full application.

Submit application and attachments to:

**Concord Housing Development Corporation
Program Administrator, Elizabeth Rust
Department of Planning & Land Management
141 Keyes Road
Concord, MA 01746**

Office Hours: Monday-Friday 8:00 A.M.-4:30 P.M.



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Eligible Projects

The Small Grant Program provides financial assistance to correct conditions dangerous to health and safety; to correct substandard conditions; and to improve weatherization and energy efficiency. Examples of eligible projects are listed below.

Small Jobs and/or Contractor Work: Minor plumbing, carpentry, window repairs, gutters or downspouts, door repairs or replacements, step or porch repairs, lock repair or replacement, cement work or masonry repair, tiling, plaster patching, sheet-rock repair, smoke/CO2 detectors, weather stripping, electrical, heating, interior painting, floors, installation, masonry, siding, roofing.

Adaptations: Bathroom grab bars, raised toilets or toilet seats, hand-held shower heads, tub transfer bench, tub seats/rails, bed transfer bars, railings throughout the house, change door knobs to levers, hook-up bells to light switches, hook-up flashing light to phone, install various phone volume control devices, intercom entryway buzzer system, light switch height.

Financial Assistance

The grants are offered as unsecured and unconditional funds, with no repayment clauses. The maximum grant available is \$5,000 per grant period and a cap of no more than \$10,000 total from the Small Grant Program over the lifetime of the program for a household at a given property address. A one year wait period, from the date the last payment was issued, is required before an applicant can re-apply to the Small Grant Program. This wait period can be waived in an emergency situation upon approval by the Program Administrator in a situation that poses a danger to the health/safety of the occupant.

Applicant Qualification

- Income – 100% of Area Median Income.** The combined income of all parties living in the home must be less than 100% of the Boston Area Median Income. All sources of regular income such as earnings, Social Security, Pension, Interest Income, etc., are counted. Income limits as of April 2017 are:
Household of 1: \$72,400, Household of 2: \$82,800, Household of 3: \$93,100, Household of 4: \$103,400
- Home Value – Up to \$819,400.** The current assessment of the home is not to be greater than the single family median home assessment in Concord, which for FY2017 is \$819,400.
- Home-owner – Concord resident.** The Applicant must be the owner of the property, use the property as their primary residence for the entire year (12 month period) following the completion of the repair, and the property must be in Concord. The resident also agrees to notify the Concord Housing Development Corporation prior to selling the house in the future.

Grant Applications

Grants are accepted any time and awarded twice a year.

| Application Due Date | Grant Awarded by |
|----------------------|------------------|
| January 31 | March 31 |
| June 30 | August 31 |

The applicant completes the application with appropriate income and three estimates, including photos. Town employees, including special municipal employees, are not eligible contractors in accordance with MGL Chapter 268A, section 20.

If awarded, the repair must be completed within 12 months from the award date. The CHDC will pay the amount approved to the repair provider upon receipt of the invoice with Tax ID#/SS# of the provider, photo of the finished repair, and approval from the applicant. The CHDC will not reimburse homeowners unless specifically approved. The grant funds may be combined with other funds to complete a project.

The application with income information will be kept confidential.



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1. Household Information

Applicant Name _____ Phone Number _____ E-mail _____

Address _____ City/State/Zip _____

Co-Applicant Name _____ Phone Number _____ E-mail _____

Address _____ City/State/Zip _____

Number of people currently living in household, and their ages: _____

Any person in the household* (optional):

Veteran: ☐ No ☐ Yes Disabled: ☐ No ☐ Yes Minority: ☐ No ☐ Yes

Minority categories include Native American or Alaskan Native, Black, Cape Verdean, Asian, Hispanic

Have you received for Small Grant Program Funds for a past project? ☐ No ☐ Yes, Date: _____

2. Property Information (optional)

Is there a mortgage on the property? ☐ No ☐ Yes, Balance: _____

Do you own or rent the unit/property? ☐ Own ☐ Rent

Is the property your primary residence? ☐ No ☐ Yes

Do you own additional real estate? ☐ No ☐ Yes, Address: _____

Please attached tax bill showing assessed value

Do you pay or defer property taxes? ☐ Pay ☐ Defer

3. House Repair Needed

Please describe the work needed below and note amount requested: \$ _____

Explain how the completion of this work will preserve the structural integrity of the dwelling or health/safety/welfare of its occupants? _____



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AFFIDAVIT

Whereas I, the undersigned, have made application to the Concord Small Grants Program for monies from the Concord Housing Development Corporation to cover the cost of repairs or adaptations to my home as stated, and the Program Administrator or their designated representative may verify the information in this application by personal inspection of appropriate documents, by hearing corroborating testimony or by other available means; and,

Whereas I certify that all the information in this application and any additional information provided by me in support of this application is, and will be, entirely accurate to the best of my knowledge; and that no information relevant to that application has been, or will be, deliberately withheld; now,

Therefore, I understand that any Concord Small Grants Program monies committed, or used to pay, for my requested home repairs or adaptations will be subject to recapture at any time during the contracted work or during the first year following the contracted work or at any time after the first year should any information supplied by me prove to be false or deliberately misleading, including all application material, or if I rent or sell my home in the first year after Concord Small Grants Program work is completed.

If the project is over the grant amount, I will pay for the amount over the grant award. I understand that I may be required to fund my portion of the project in advance of the grant funds.

Therefore, I agree to notify the Concord Housing Development Corporation at least 60 days prior to listing my home for sale.

By signing below, Applicant(s) requests the Program Administrator to review this application for the purpose of receiving funding assistance through the Concord Housing Development Corporation. Applicant(s) declares that the information and statements provided herein are true and correct to the best of their knowledge.

THIS APPLICATION IS NOT COMPLETE IF NOT SUBMITTED WITH:

- _____ Completed application with signed and notarized affidavit
- _____ Copies of 2016 Federal tax return, and supporting schedules
- _____ Copies of three estimates for work by professional contractor
- _____ Picture of area to be worked on
- _____ Copy of Driver's License or similar (ex. passport, birth certificate)
- _____ Tax Bill of non-Concord property, if applicable

Applicant

Date

Co-Applicant

Date



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Signed, sealed and delivered on this _____ day of _____, 20____.

Applicant

Co-Applicant

COMMONWEALTH OF MASSACHUSETTS

_____ COUNTY, ss _____, 201__

On this date the above named personally appeared before me and proved to me through satisfactory evidence of identification, which was [] a current driver's license, [] a current U.S. passport, [] my personal knowledge, to be the person/s whose name is signed on the preceding instrument, and acknowledged the same to be his/her free act and deed.

Notary Public
My Commission Expires: