Application For
City of Appleton
Homeowner Rehabilitation Loan Program

Before you apply for the Homeowner Rehabilitation Loan Program, complete this checklist to see if you qualify:

1. Do you live within the city limits of the City of Appleton?  □ Yes  □ No

2. Do you own the property listed on the application and is the property title in the applicant and co-applicant’s name only?  □ Yes  □ No

3. Do you live in the property listed on the application?  □ Yes  □ No

4. Do you have at least $5000 of equity in your home (Assessed Value minus Amount Owed = Equity)? [If you answer no to this question, please contact the Housing Coordinator prior to applying for the program.]  □ Yes  □ No

5. Are all court-ordered judgments against you paid off?  □ Yes  □ No
   You can check to see if you have any court-ordered judgments by going to: http://wcca.wicourts.gov

6. Are you up-to-date on all mortgage payments for the property?  □ Yes  □ No

7. Is your income below the Income Limits based on your family size (See Below)?  □ Yes  □ No
   Your current gross monthly income (from all sources) must be under the following, based on your household size:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Monthly Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Person</td>
<td>$ 3910</td>
</tr>
<tr>
<td>2 Person</td>
<td>$ 4470</td>
</tr>
<tr>
<td>3 Person</td>
<td>$ 5025</td>
</tr>
<tr>
<td>4 Person</td>
<td>$ 5585</td>
</tr>
<tr>
<td>5 Person</td>
<td>$ 6035</td>
</tr>
<tr>
<td>6 Person</td>
<td>$ 6480</td>
</tr>
<tr>
<td>7 Person</td>
<td>$ 6925</td>
</tr>
<tr>
<td>8 Person</td>
<td>$ 7375</td>
</tr>
<tr>
<td>More than 8 People</td>
<td>Contact the Housing Coordinator</td>
</tr>
</tbody>
</table>

If you answered “No” to any of the above questions, you do not qualify for the Homeowner Rehabilitation Loan Program. Please do not fill out the application.

If you have any questions, contact the City of Appleton Housing Coordinator, Laura Bonnet, at (920) 832-6007.
Application For City of Appleton Homeowner Rehabilitation Loan Program

PLEASE READ: This application is required to determine eligibility for all applicants of the Homeowner Rehabilitation Loan Program. It must be filled out completely and returned along with copies of the following listed documents:

- 1-5 pictures that best describe the work that needs to be done on the home (include at least 1 of the exterior of home and any unusual or particularly bad circumstances)
- Most recent mortgage statements, including any home equity loans or other liens against the property, showing principal balance, last payment date, and unpaid balances;
- Copy of your mortgage note showing the rate and term of your current mortgage;
- A signed copy of your full 2019 Federal Income Tax Return showing all line items and attachments;
- Copy of current Homeowners Insurance Policy showing dates and amount of coverage;
- Verification of all assets – other real estate owned, stocks, bonds, investment accounts, checking and savings accounts, etc.;
- For ALL persons in household with income, provide the following (do not submit bank statements as proof of income):
  - Last 4 weeks of pay stubs showing year-to-date income and salary info
  - If self-employed, submit 3 months of profit and loss statements
  - Child support – Printout showing last 12 months (must be from child support agency)
  - SSI, SSDI, etc.: - Statement showing monthly amount (must be from Social Security Office)
  - Unemployment – Statement showing weekly amount (provide last 4 weeks)
  - Pensions (or other retirement income)—Statement showing monthly amount
  - Any Other Income

APPLICANT INFORMATION
Property Address: ____________________________________________

Applicant: First Name ___________________ M.Initial _____ Last Name ____________________________

Spouse/Co-Applicant: First Name ______________ M.Initial _____ Last Name __________________________

Home Phone: _______________________________ Daytime Phone: _______________________________

E-mail: _______________________________________

RACIAL STATUS (for Applicant/Co-Applicant):

☐ White ☐ Asian & White
☐ Black/African American ☐ Black/African American & White
☐ Asian ☐ Am. Indian/Alaskan Native & Black/African Am.
☐ American Indian/Alaskan Native ☐ Other Multi-Racial
☐ Native Hawaiian/Other Pacific Islander
☐ American Indian/Alaskan Native & White ☐ Check If Also Hispanic

MARITAL STATUS:
Single _______ Married _______ Divorced _______ Widowed _______

HOUSEHOLD INFORMATION:
Number of Adults in Household: ________________ Number of Children in Household: ____________
For all members of the household (including applicant/co-applicant), list name and date of birth below:

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
<tr>
<td>Member:</td>
<td>__________________</td>
</tr>
</tbody>
</table>

Do you have any other household members not listed above?  □ Yes  □ No
Is any member of your household disabled?  □ Yes  □ No

**LEAD POISONING PRECAUTIONS**
Are there any pregnant women living in the home?  □ Yes  □ No
Are there any pregnant women or children under the age of 6 who visit the home on a regular basis (not including those who live there)?  □ Yes  □ No

**INCOME**
Household’s combined/total annual income: ________________  No. of working adults __________

In addition to wages from your primary job, do you receive any of the following sources of income (list monthly amounts):
Child support __________  SSI/SSD/SS ________________  Unemployment __________
Retirement __________  Part-time/Temp position __________  Veteran’s benefits __________
Other (specify source and amount) ____________________________________________

**ASSETS**
The City of Appleton may request you to provide verification of this information at any time.
List the value of all real estate owned not including the property you live in: $ ________________
Amount owed on real estate listed above (not including the property you live in): $ ________________

List the value of the amount in each of the following investments/accounts:
Stocks and bonds: $ ________  Savings: $ ________  Checking: $ __________
CD/Money Market: $ ________  401(k) plan: $ ________  IRA Plan: $ __________
Other investments : $ __________
PROPERTY INFORMATION:
Do you have a land sales contract? □ Yes □ No
Is this a single-family home? □ Yes □ No
Is this an owner-occupied duplex? □ Yes □ No
Do you rent any rooms in the home? □ Yes □ No
  If yes, how many? _____
  Monthly income from rental: $_________

Current principal balance owed on mortgage(s) for property you live in (include amount of all liens):
$________________________

How long have you owned this home? _________

List repairs you would like to have done (Please refer to the City of Appleton web site at www.appleton.org for additional information on what repairs qualify):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

***********************************************************************************
I agree that the information submitted on this Homeowner Rehabilitation Loan Program Application is correct.

_____________________________________________   ________________________________
Applicant Signature    Date

_____________________________________________   ________________________________
Co-Applicant Signature  Date

***********************************************************************************
For additional information on The Homeowner Rehabilitation Loan Program, visit the City of Appleton web site: www.appleton.org (go to “Residents” tab and then click on “Housing Rehab Loan”) or contact the Housing Coordinator, Laura Bonnet, at: (920) 832-6007.

PLEASE NOTE:
This form and all documents must be received by 4:00 PM on Friday, April 17, 2020. Return to the City of Appleton - Community Development Department, 100 North Appleton Street, Appleton, WI 54911
Failure to submit all of the above information may result in a delay or denial of your application.

You may be required to provide additional information if you have been selected to continue with the application process. All applications will be reviewed by the end of May. You will be notified of the status of your application by the end of June.