Allegany County Community Opportunities and Rural Development, Inc. (ACCORD)

Preliminary Application for Homeowner Rehabilitation Grant Funds

Name:

Street Address:

City: State: Zip Code:

Municipality: Phone:

No. of People in Household: Gross Annual (Yearly)Income: $

Have you received grants in the past? ☐ Yes ☐ No

Manufactured Home? ☐ Yes ☐ No

If yes, please provide the name of the grant(s), the organization(s) you received the grant(s) from, and the date(s) you received the grant(s):

Is anyone residing in your household elderly? ☐ Yes ☐ No

Is anyone residing in your household handicapped? ☐ Yes ☐ No

Does anyone in the household have Medicaid Insurance? ☐ Yes ☐ No

Is your home in need of handicap accessibility modifications? ☐ Yes ☐ No

Is anyone residing in your household disabled? ☐ Yes ☐ No

Do you currently have homeowner's insurance? ☐ Yes ☐ No

Is the property deed for the property that you are applying for in your name? ☐ Yes ☐ No

Are the property taxes for the property for in your name and paid current? ☐ Yes ☐ No

Do you have a mortgage on the property/home that you are applying for? ☐ Yes ☐ No

If you have a mortgage, are your mortgage payments current? ☐ Yes ☐ No

Please use the reverse side of this form to describe your repair needs.

By signing below you are affirming that you have provided true and complete information.

Signature

Date

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Please see next page for eligibility requirements.

Mail completed applications to:

ACCORD, Attn: Housing Rehabilitation Specialist, P.O. Box 573, Belmont, NY 14813

Please describe your repair needs:

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1) The property **must** be located in Allegany County, NY.
2) Land contracts are **not eligible** for rehabilitation grants.
3) Rental properties are **not eligible** for rehabilitation grants.
4) Trailers are eligible for rehabilitation grants, provided the applicant also owns the land that the trailer is on. If the applicant does not own the land that the trailer is on, the applicant is **not eligible**.
5) The applicant (homeowner) must reside in the home.
6) If approved for a rehabilitation grant, a lien will be placed on the property for two (2) to ten (10) years. The applicant (homeowner) must continue to reside in the home throughout the duration of the lien.
7) ACCORD offers various home owner rehabilitation grants. Not all of these grants will cover the entire rehabilitation cost. Some grants require the applicant (homeowner) to contribute funds toward rehabilitation cost.
8) If the property taxes are **not** current, if the mortgage is **not** current, or if the homeowner does **not** have homeowner's insurance, the applicant (homeowner) is **not eligible** for assistance.
9) Applicants (Homeowners) applying for rehabilitation grants must meet income and asset eligibility requirements. Gross income and total of all assets – of the entire household (all members) – is considered income – verification of all income and assets will be required.
10) ACCORD maintains a waiting list for rehabilitation grants. Upon receipt of this preliminary application, the applicant will be placed on the waiting list. The current approximate wait time is one (1) to two (2) years. The length of the wait may increase or decrease depending on availability of grant funds.
11) Applicants on the waiting list will be contacted on an annual basis to update the information contained in this preliminary application. **Applicants may be notified through the US Postal Service, so it is important that applicants update ACCORD immediately in writing upon a change of mailing address.**
12) When an applicant's name is reached on the waiting list, the applicant will receive a full application package **through the US Postal Service, so it is important that applicants update ACCORD immediately in writing upon a change of mailing address.**
13) Verification of any of the information contained in this preliminary application is **not required** at this time. Verification will be requested upon receipt of the full application package.

FY 2018 Income Limits for Owner Occupied Housing Rehabilitation

Allegany County Limits	HOUSEHOLD SIZE							
	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
30% of Median	$13,550	$16,460	$20,780	$25,100	$29,420	$33,740	$38,060	$42,380
50% Very Low income	$22,550	$25,750	$28,950	$32,150	$34,750	$37,300	$39,900	$42,450
80% Low-income	$36,050	$41,200	$46,350	$51,450	$55,600	$59,700	$63,800	$67,950