

City of Modesto Homeowner Water & Sewer Connection Program

Overview:

Grants available for low income homeowners to complete:

- Wastewater Capacity Charge
- Subtrunk Charge
- Lateral Charge
- Work conducted in the public right-of-way
- Water Connection Charge
- Water Service Installation
- Water Meter
- Lateral Charge

Loans available for low income homeowners to complete:

- Repairs that are located from the property line to the residential unit
- Associated improvements within the unit

Qualifications:

Occupancy: Must be owner occupied

<u>Income</u>: Total gross household income must be below 80% AMI as determined by HUD. Income must be below the follow income levels:

Family Size	Gross Monthly Income	Gross Yearly Income
1	\$2,833.33	\$34,000
2	\$3,237.50	\$38,850
3	\$3,641.67	\$43,700
4	\$4,045.83	\$48,550
5	\$4,370.83	\$52,450
6	\$4,695.83	\$56,350
7	\$5,020.83	\$60,250
8	\$5,341.67	\$64,100

Debt Ratio:

- Front End (mortgage debt compared to gross income): less than 35%
- Back End (mortgage and revolving debt compared to gross income): less than 45%

Equity:

Loan to Value ratio must not exceed 100% of home value

Credit:

- No outstanding collection accounts (medical excluded)
- No bankruptcy in the last three years

Liens and Title:

Must disclose all liens on property. The City of Modesto is required to be in second position.

Insurance:

Must have homeowner hazard insurance at the time of application, City of Modesto will be required to be added as additional insured if accepted into the program.





Application Requirements

If you are interested in applying for the Homeowner Water & Sewer Infrastructure Connection Program, please call 209-577-5211 to schedule an appointment with the City's Housing Financial Specialist. Please bring a Completed Application Packet to your appointment.

A Completed Application Packet consists of:

- Completed Homeowner Water & Sewer Infrastructure Connection Program Application
- The following financial information for each household member who is over the age of 18:
 - o Tax Returns (2016, 2017 & 2018)
 - o W-2s (2016, 2017 & 2018)
 - o Checking account statement(s), most recent last 3 months (no printouts)
 - o Savings account statement(s), most recent last 3 months (no printouts)
 - o Divorce documents, showing child support and alimony
 - o Recent Mortgage statement
 - o Copy of Deed of Trust
 - o Copy of home insurance
 - o Three (3) months recent pay stubs and/or most recent Social Security award
 - o Benefits statements (e.g., pension, Social Security, IRA's, Certificate of Deposits Retirement Account, Money Market Accounts.)

Incomplete applications WILL NOT BE ACCEPTED. Providing a Completed Application Packet with all the requested copies of financial information will facilitate and speed up the application review process. The City may request additional documentation of your income after reviewing your application. After receiving your completed application and all required supporting documentation, the City will determine if you are eligible for assistance. Please allow up to thirty (30) days from the date of application submittal, for eligibility determination. The City will notify you in writing of your eligibility determination. Further questions about the process or conditions of the Homeowner Water & Sewer Infrastructure Connection Program may be directed to the City at (209) 577-5211. If accommodation is needed Limited English Proficient (LEP) persons, please contact the Community Development Division office for translator assistance at housing@modestogov.com or (209)577-5211.

Timeline*

- 1) Schedule appointment to submit complete application packet;
- 2) Within **30 days** Staff will review packet and will process complete application;
- 3) Within **7 business days** If approved, staff will schedule property inspection;
- 4) Within **5 business days** Scope of work will be determined by a completed inspection;
- 5) Within 14 business days Project will be presented to committee for approval;
- 6) Within **10 business days** If approved, contractor walk through will be scheduled;
- 7) Within 10 business days Contractor selected based upon bid results, and loan documents signed;
- 8) Within 10 business days Documents executed and recorded, Notice to Proceed issued;
- 9) Within **30-45 days** For work to begin and be substantially completed;
- 10) Within **5 business days** Final Inspection, Notice of Completion, Warranty Information and closeout letter issued.

^{*}Approximate timeline for informational purposes only. Subject to change if additional factors arise.





CITY OF MODESTO HOMEOWNER WATER & SEWER INFRASTRUCTURE PROGRAM APPLICATION

APPLICAN	Γ INFOR	MATION							
Last Name:			First Name:	First Name:		Da	ytime Phone:		
Street Address:			City:	City:		Zij	Zip Code:		
Social Security N	Number:	Gender:M F	Self Employed:Y N		Birth Date:				
Employer Name:					Employe	er Pl	hone:		
Employer Street	Address:		City:		State:	Zi	p Code:		
Is the property of Are property tax		ed as the primary re	sidence?		-				
CO-APPLIC	CANT INI	FORMATION							
Last Name:			First Name:		M.I.:	Da	ytime Phone:		
Street Address:			City:		State:	Zij	p Code:		
Social Security I	Number:	Gender: M F	Self Employed:Y N				Birth Date:		
Employer Name:			1	,		Employer Phone:			
Employer Street	Address:		City:	City:		Zip Code:			
Are you include	d or possess	title for any this of p	property?	_	1	ı			
	currently			r household and all ship of each family	Check 1		h Box That A Each Person	Applies for	
Member No.	F	ull Name	Relationship	SS#	Full-Tir Studer		Veteran	Disabled	
Head of Household			Self						
2									
3									
4									
5									
6									
7									
8									
9									





ASSET INFORMATION							
Туре	Cash Value	Annual Income from Assets	Bank Name	Account No.			
Checking Accounts	\$	\$					
	\$	\$					
Savings Accounts	\$	\$					
	\$	\$					
Stocks	\$	\$					
Investment Real Estate	\$	\$					
401 (K)	\$	\$					
IRA	\$	\$					
Other:	\$	\$					
TOTAL	\$	\$					

INCOME INFORMATION (MONTHLY)							
	Are you paid: Hourly, Weekly, Every two weeks, twice monthly/ Monthly?	Applicant	Co-Applicant	Other Adult Household Member	Other Adult Household Member		
Wages, Salaries, etc.		\$	\$	\$	\$		
Tips, Commission, Bonus		\$	\$	\$	\$		
Social Security		\$	\$	\$	\$		
Retirement Funds		\$	\$	\$	\$		
Unemployment Benefits		\$	\$	\$	\$		
Worker's Compensation		\$	\$	\$	\$		
Alimony, Child Support		\$	\$	\$	\$		
Welfare Payments		\$	\$	\$	\$		
Other:		\$	\$	\$	\$		
TOTAL		\$	\$	\$	\$		





LIABILITY INFORMATION (list outstanding obligations including auto loans, credit cards, charge accounts, credit union loans, personal loans, real estate loans, etc.)

Type (Auto, credit card, charge acct, personal loan, etc)	Monthly Payment	Unpaid Balance	Creditor's Name	Due Date
MORTGAGE	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
ГОТАL	\$	\$		

ACKNOWLEDGMENT AND AGREEMENT						
The information provided above is true and complete to the best of my/our knowledge and belief. I/We consent to the disclosure of such information for purposes of income verification related to my/our application for financial assistance under the City of Modesto Homeowner Water & Sewer Infrastructure Connection Program. I/We understand that any willful misstatement of material fact will be grounds for disqualification.						
Applicant	Date					
Co-Applicant	Date					





Demographic Information

The information requested below is required to be collected the agency providing funds (HUD) to provide the services under this program. Any information collected is not intended for public dissemination. Please provide the information requested below. Thank you for your cooperation.

1.	Are you the head of household?	Yes	No
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2. I	Household Si	ize (A)	and Total	Annual H	lousehold	Income ((\mathbf{B})):
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A - House- hold Size	B – Total Annual Household Income (On the row that has your Household size, Circle your total annual household income)							
(Circle One)	EL (0-30% AMI)	VL (31-50% AMI)	M (51-80%)	Above MOD (81% AMI & Greater)				
1	\$12,750or less	\$12,751-\$21,250	\$21,251-\$34,000	\$34,001 or more				
2	\$14,600 or less	\$14,601-\$24,300	\$24,301-\$38,850	\$38,851 or more				
3	\$16,400 or less	\$16,401-\$27,350	\$27,351-\$43,700	\$43,701 or more				
4	\$18,200 or less	\$18,201-\$30,350	\$30,351-\$48,550	\$48,551 or more				
5	\$19,700 or less	\$19,701-\$32,800	\$32,801-\$52,450	\$52,451 or more				
6	\$21,150 or less	\$21,151-\$35,250	\$35,251-\$56,350	\$56,351 or more				
7	\$22,600 or less	\$22,601-\$37,650	\$37,651-\$60,250	\$60,251 or more				
8	\$24,050 or less	\$24,051-\$40,100	\$40,101-\$64,100	\$64,101 or more				

3. Do you receive incom	me from any of the followin	g sources?:	
CalWORKs	General Assistance	Social Security/	SSI
Food Stamps	Medi-Cal	Other:	
4. Ethnicity (Circle One):	Hispanic / Non-Hispan	ic	
5. Race (Check only one):			
White			
	/Alaskan Native (includes I		
Asian		_ Native Hawaiian/Pacifi	c Islander
	merican & White		
Asian & White		_ American Indian/Alask	an Native & White
	/Alaskan Native & Black/A		
Other Multi- Rac	cial (specify):		
	Female	_ Male Transgender	62 years +
Name		Veteran	
Street Address		City	Zip Code
information provided here w	vill be relied upon for purposes of or negligently made in this or in any	letermining my eligibility for thi	e. I acknowledge and understand that the s program. I acknowledge that a material ay constitute a federal violation and may
Signature		Date	





Eligibility Release Form

To Whom It May Concern:

I/We authorize the City of Modesto, and any credit reporting agency utilized by the City of Modesto to verify any information necessary in connection with a Homeowner Water & Sewer Infrastructure Connection Program application, including, but not limited to, the following:

- 1. Credit History
- 2. Bank Accounts
- 3. Employment and Income
- 4. Benefits
- 5. Assets (All Sources)

Authorization is further granted to use a photographic copy of my/our signature(s) below to obtain information regarding any of the aforementioned items. I acknowledge that all adult household members will sign this form.

Applicant – Printed Name	Signature	
Social Security Number	Date	
Co-Applicant – Printed Name	Signature	
Co rippiicum Trimed Pulie	Signature	
Social Security Number	Date	
Name - Print	Signature	
Social Security Number	Date	
Name - Print	Signature	
Social Security Number	Date	



