

Weston Affordable Housing Trust

HOME REPAIR GRANT

Dear Weston Resident,

I am writing to tell you about an opportunity to apply for a small grant to assist in making repairs to your home. The Weston Affordable Housing Trust is currently offering the second round of the Home Repair Grant Program. The purpose of this program is to provide financial assistance to income eligible Weston residents that currently own a home that has an affordable housing deed restriction currently in place. The grant may be used to make general repairs to address health and safety issues. The program is sponsored by the Weston Affordable Housing Trust (WAHT) for the benefit of Weston residents.

The attached confidential application and grant process is designed to be simple and quick. There is minimal documentation required. A completed application, cost estimates for the repair work that needs to be done along with photos, copy of recent tax return and an asset statement are all that is needed. Completed applications received by the deadline of June 15, 2019 will be reviewed and grants awarded in July.

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. **Homeowner of Deed Restricted Property:** Own a home in Weston with current affordable housing deed restriction (Affordable Housing Covenant);
2. **Income Eligible:** To qualify for a Home Repair Grant, gross annual household income should be at or below the 150% of the area median household income for the area as published by the Department of Housing and Urban (see page 2).

The amount of each grant will be determined by the committee and will be evaluated and prioritized based on health and safety considerations, financial need of the applicant, based on income and asset information, prior grant allocations and availability of grant funds. The maximum grant amount is approximately **\$5,000**.

Attached to this letter is additional program information and an application form. If you have questions regarding this program or if you require assistance in filling out the application, please contact either Lara Plaskon at 978-287-1092; lara@rhsousing.org or Liz Valenta at evalenta@rhsousing.org. Applicants are encouraged to discuss their needs with program staff prior to submitting a full application.

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PROGRAM GUIDELINES AND APPLICATION INSTRUCTIONS

May 1, 2019

Program Summary and Eligible Projects

The Home Repair Grant Program provides financial assistance to correct conditions dangerous to health and safety; to correct substandard conditions; and to made accessibility improvements. Examples of eligible projects are listed below.

If your property is part of a condominium or homeowner's association, and repairs are managed by the condominium or homeowner's association and charged to you as a special assessment, you may be eligible for the grant to assist in payment of the special assessment. Additional documentation from the condominium or homeowner's association may be requested.

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

Adaptations: Accessibility improvements as needed by homeowner, such as replacement of bathroom accessories/fixtures (e.g. grab bars, raised toilets, hand-held shower heads), interior fixture modifications (e.g. change door knobs to levers, light switch height), and exterior access improvements (e.g. ramps, railings).

Financial Assistance

The grants are offered as unsecured and unconditional funds, with no repayment clauses. The maximum grant is estimated to be **\$5,000**.

Applicant Eligibility Requirements

- Homeowner of Deed Restricted Property:** Own a home in Weston with current affordable housing deed restriction (Affordable Housing Covenant);
- Income Eligible– 150% of Area Median Income:** The combined income of all parties living in the home shall be less than 150% 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 2019 are:

Household Size	1 person	2 people	3 people	4 people	5 people	6 people
Maximum Income	\$118, 965	\$135,960	\$152,955	\$169,950	\$183,546	\$197,142

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Application Deadline and Submission Requirements

Applications are due ***JUNE 15, 2019*** and can be submitted in person to Weston Town Hall Town Manager's Office or by mail or email to the following:

Regional Housing Service Office
Program Administrator, Liz Valenta
37 Knox Trail, Acton MA 01720
evalenta@RHSOHousing.org

Submission Checklist

This application is not complete if not submitted with the following:

- _____ **Completed application with signed and notarized affidavit**
- _____ **Copies of 2018 Federal tax return, and supporting schedules for all household members.**
- _____ **Completed statement of assets**
- _____ **Copies of three separate estimates for work by professional contractor***
- _____ **Picture of area to be worked on***
- _____ **Copy of Driver's License or similar (ex. passport, birth certificate) with current address**

* The applicant must obtain and submit three cost estimates for the repair work that needs to be done. Pictures of area to be worked on must also be included in the application. All contractors must be licensed and insured. Town employees, including special municipal employees, are not eligible contractors in accordance with MGL Chapter 268A, section 20.

Award requirements

If awarded, WAHT will issue a written letter of Grant Approval for the specific repair work along with a Grant Agreement to be executed by the homeowner and returned to the WAHT. The homeowner must sign a grant agreement within 1 months of the award letter and repairs must be completed within 12 months from the grant agreement date. The Weston Affordable Housing Trust will pay the amount approved directly to the contractor/repair provider upon receipt of the invoice with a W-9 tax form completed by the contractor/repair provider, photo of the finished repair, and approval from the applicant. The WAHT will not reimburse the homeowner. Requests for partial payments for materials and work completed may submitted and will be considered by the Trust. 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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APPLICATION

1. Household Information:

Applicant Name _____ Phone Number _____ E-mail _____

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

List other people currently living in the household, and their ages:

2. Property Address:

Street: _____ City/State/Zip _____

3. Property Information

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

Is the property your primary residence? No Yes

3. Amount Requested: \$ _____

5. Description of repair required:

Please explain how the completion of this work will preserve the structural integrity of the dwelling or health/safety of its occupants:

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STATEMENT OF ASSETS

For each person listed on application, list all checking, savings accounts, CD's, stocks, bonds, retirement accounts, savings bonds and any other investments below. If additional space is needed, please attach another sheet. Household assets do not include necessary personal property.

#	Type of Asset	Bank/Credit Union Name	Account No	Value, Balance
1	Checking account			
2	Savings account			
3	Investment account			
4	Retirement Account			
5	Other: _____			
6	Other: _____			
7	Other: _____			
	TOTAL			

Do you, or any one on this application own any real estate (whole or partial interest in) other than the property indicated on application?

No
 Yes
 if Yes, list Assessed Value: \$ _____

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AFFIDAVIT

Whereas I, the undersigned, have made application to the Weston Affordable Housing Trust Home Repair Grant Program for monies from the Weston Affordable Housing Trust 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,

I agree to sign a Grant Agreement if the project is approved and funds awarded.

Therefore, I understand that any Weston Affordable Housing Trust Home Repair Grant Program monies committed, or used to pay, for my requested home repairs or adaptations will be subject to recapture at any time should any information supplied by me prove to be false or deliberately misleading, including all application material, or if I am out of compliance with the conditions stipulated in the Affordable Housing Deed Restriction.

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.

By signing below, Applicant(s) requests the Program Administrator to review this application for the purpose of receiving funding assistance through the Weston Affordable Housing Trust. Applicant(s) declares that the information and statements provided herein are true and correct to the best of their knowledge, signed under the penalties of perjury.

Applicant Signatures: _____

Applicant

Date

Co-Applicant

Date

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

Printed name of Applicant

Printed name of 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 and the facts and things set forth are true and correct to the best of his/her knowledge.

Notary Public
My Commission Expires: