Dear Homeowner:

Thank you for your interest in the City of West Covina Community Development Commission (CDC) Home Improvement Loan Program.

The goal of the program is to encourage pride in ownership by offering deferred loans for eligible exterior and interior home improvements. To qualify, you must be a homeowner living in West Covina and earn no more than the maximum income limits established for the program.

If you qualify, you may apply for a deferred payment loan amount of up to $10,000, a $50 processing fee is added to the loan amount. The loan is secured by a deed of trust; **therefore you must supply the CDC with a recorded copy of the deed of trust to your home.**

An inspection of your home is required before any work can commence. Our staff will work with you in listing the improvements which may be funded through the program. Please note that any and all building/safety code violations are required to be corrected within a reasonable time period regardless of whether you choose to participate in this program.

Attached is a Home Improvement Loan application packet and brochure which provides answers to the most commonly asked questions regarding the program. It is very important that you carefully review all the enclosed documents before you begin to supply the requested information.

BECAUSE THE PROGRAM IS SO POPULAR, WE ASK THAT YOUR COMPLETED APPLICATION BE SUBMITTED BEFORE THE DATE STAMPED AT THE TOP OF THIS LETTER. In the event your complete application is not received by the CDC within the specified two-week period, you will lose your place on the program's waiting list and have to reapply. If you qualify for a loan, you will have up to one year to complete all work after the loan is approved.

You may mail or hand deliver your completed loan application packet to the CDC located at West Covina City Hall, Second Floor, Room 218, 1444 West Garvey Avenue South, West Covina, CA 91790. Please allow three to five business days from receipt of your application for CDC staff to process your loan request. In order for your application to be processed, we must have a copy of your Deed of Trust.

If you have any questions after reviewing the loan application packet, please call Barbara Banks, Housing Program Coordinator at (626) 939-8432.

Sincerely,

Christopher J. Chung
Community Development Commission

hilp102bb

1444 W. Garvey Avenue • P.O. Box 1440 • West Covina • CA 91793 • Phone (626) 939-8417 • Fax (626) 939-8665

HOME IMPROVEMENT LOAN PROGRAM

APPLICATION

NAME_____ SOC. SEC #_____ AGE _____
(Homeowner)

NAME_____ SOC. SEC #_____ AGE _____
(Homeowner)

HOME ADDRESS _____
(Street Address) (Zip Code)

TELEPHONE ( )_____ ( )_____
(Home) (Work)

NUMBER IN HOUSEHOLD _____ YEAR PROPERTY PURCHASED _____

HEAD OF HOUSEHOLD: MALE ( ) ANNUAL GROSS INCOME $_____
FEMALE ( )

NO. OF PERSONS IN HOUSEHOLD WHO ARE EMPLOYED _____

HEAD OF HOUSEHOLD ETHNICITY: AMERICAN INDIAN ( ) HISPANIC ( ) BLACK ( )
WHITE ( ) ASIAN ( ) OTHER ( )

MAXIMUM ALLOWABLE ANNUAL GROSS HOUSEHOLD INCOME

(Effective June 17, 2010)

INCOME LOW	**1 PERSON $46,400**	**2 PERSONS $53,000**	**3 PERSONS $59,650**	**4 PERSONS $66,250**	**5 PERSONS $71,550**	**6 PERSONS $76,850**	**7 PERSONS $82,150**	**8 PERSONS $87,450**

I declare under penalty of perjury that the information provided in this application is true and certify that the Community Development Commission (CDC) and the City of West Covina shall not be held liable for any damage that may arise out of or in connection with home improvements undertaken under this program. Also, I authorize the West Covina CDC to contact institutions for information regarding the status of loans on my property.

_____ _____ _____ _____
(Signature of Homeowner) (Date) (Signature of Homeowner) (Date)

CONTINUE ON BACK

OVER

In order for your application to be processed, it is necessary for you to supply us with copies of the applicable documents listed below which verify your household income. **REMEMBER, IT IS UP TO YOU**, the homeowner, to furnish all the information necessary to determine your eligibility. Without your proof of income, we cannot process your loan application. Please note that completed application packets can be mailed or dropped off at Room 218, City Hall.

PLEASE CHECK TYPE OF INCOME			PLEASE NOTE PROOF OF INCOME REQUIRED
A.	☐	Salary	1. Federal Tax Return; 2. State Tax Return; 3. Salary Certification; 4. Check Stubs.
B.	☐	Social Security	Social Security Verification
C.	☐	Welfare	Statement from Caseworker
D.	☐	Pension	Statement of Amount, Copy of Check
E.	☐	Alimony	Court Order (Divorce Papers)
F.	☐	Child Support	Court Order (Divorce Papers)
G.	☐	Unemployment Insurance	Statement of Award, Verification
H.	☐	Self Employed*	Income Tax (Federal and State) Returns (Latest 2 years)
I.	☐	Interest	Bank Statements
J.	☐	Rentals**	Receipt Book
K.	☐	Others	

* Computation of "Self Employed" income requires a special formula, which will be applied by CDC staff to determine household income.

** Eligible applicants must not have an interest in more than one rental unit and must reside in the unit to be improved.

HOME IMPROVEMENT LOAN PROGRAM

MORTGAGE INFORMATION AUTHORIZATION

HOMEOWNER'S NAME _____

ADDRESS_____
(Street Address) (Zip Code)

TELEPHONE ( )_____ ( )_____
(Home) (Work)

Please list all mortgage companies, banks, and/or savings and loans holding mortgages on your property.

1.

COMPANY NAME _____

COMPANY ADDRESS_____

COMPANY TEL. NO. _____ PAYMENT AMOUNT:_____

LOAN # _____ UNPAID BALANCE:_____

2.

COMPANY NAME _____

COMPANY ADDRESS_____

COMPANY TEL. NO. _____ PAYMENT AMOUNT:_____

LOAN # _____ UNPAID BALANCE:_____

3.

COMPANY NAME _____

COMPANY ADDRESS_____

COMPANY TEL. NO. _____ PAYMENT AMOUNT:_____

LOAN # _____ UNPAID BALANCE:_____

I certify that the above information is true and I hereby authorize the West Covina Community Development Commission to contact the above institutions for information regarding the status of the loans on my property.

_____ _____
Signature of Homeowner Date

Hilp104bb

HOME IMPROVEMENT LOAN PROGRAM

EMPLOYMENT AND SALARY CERTIFICATION

The following information concerning:

NAME _____
(First) (Middle) (Last)

ADDRESS _____
(Street Address) (Zip Code)

SOCIAL SECURITY NUMBER _____ TEL. ( ) _____

is requested to verify eligibility in the West Covina Community Development Commission Housing Preservation Program.

Employed by_____ Full Time ☐ Part Time ☐
(Name of Company)

_____ (_____)_____
(Address of Company) (Telephone)

Period of Employment: From _____ to _____
(Date) (Date)

Total Gross Wages (before Taxes), Commissions, etc., paid the above employee in the past twelve (12)

months from receipt of this form: $_____

_____ _____
Signature of Company Payroll Clerk (Date)

_____ _____
Signature of Applicant (Date)

IF YOU HAVE ANY QUESTIONS, PLEASE CALL BARBARA BANKS AT (626) 939-8432

Hilp105bb

HOME IMPROVEMENT LOAN PROGRAM

EMPLOYMENT AND SALARY CERTIFICATION

The following information concerning:

NAME _____
(First) (Middle) (Last)

ADDRESS _____
(Street Address) (Zip Code)

SOCIAL SECURITY NUMBER _____ TEL. ( ) _____

is requested to verify eligibility in the West Covina Community Development Commission Housing Preservation Program.

Employed by_____ Full Time ☐ Part Time ☐
(Name of Company)

_____ (_____)_____
(Address of Company) (Telephone)

Period of Employment: From _____ to _____
(Date) (Date)

Total Gross Wages (before Taxes), Commissions, etc., paid the above employee in the past twelve (12)

months from receipt of this form: $_____

_____ _____
Signature of Company Payroll Clerk (Date)

_____ _____
Signature of Applicant (Date)

IF YOU HAVE ANY QUESTIONS, PLEASE CALL BARBARA BANKS AT (626) 939-8432

Hilp105bb

HOME IMPROVEMENT LOAN PROGRAM
HOMEOWNER INFORMATION

LEAD-BASED PAINT HAZARDS

LEAD-BASED PAINT. Lead-based paint can be present in both exterior and interior surfaces in apartments and homes. This type of paint may be found in homes built before 1978 and may be present in our City's older housing and buildings, even after periodic repainting. Lead-based paint can resurface and pose a hazard when paint surfaces crack, scale, peel, chip or become loose. This most frequently occurs on walls, stairs, porches, railings, windows, doors, woodwork, and in hallways.

HEALTH HAZARDS. Lead poisoning is a serious and continuing health hazard in our country. It can endanger any occupant of housing. However, children and infants are usually its victims when paint chips are ***eaten*** or ***chewed***. Lead poisoning, even from small amounts, may cause mental retardation, blindness, paralysis and death.

WHAT ARE THE SYMPTOMS? At first there may be no obvious signs of lead poisoning. Symptoms appear as any number of childhood diseases. If the child has continuing and chronic stomachaches, vomiting, headaches, loss of appetite or the child frequently lacks energy, ***it may be a warning sign***.

WHERE TO SEEK HELP. We advise and encourage any family with a child under the age of seven to be tested for elevated blood levels. Ask your doctor about this screening. The Los Angeles County Health Department offers lead-based paint screening and treatment if necessary. Some or all of the cost for screening may be paid by Medi-Cal.

PREVENTION. Lead-based paint hazards may be present in water leaks from faulty plumbing and peeling and flaking walls and ceilings. Help protect your child's health:

1. Use a stiff broom or brush and remove loose pieces and all dust from walls, woodwork, ceilings and floors;
2. Carefully place the sweepings in a paper bag or wrap them in newspaper and put in a covered trashcan;
3. Continually check for chipped or flaked paint and keep out of children's reach;
4. Have your child tested for lead poisoning and treated if required.

As evidenced by my signature, I have read this required information on the hazards of lead-based paint.

_____ _____
Homeowner Signature Date

Please print:

NAME _____

ADDRESS _____

TELEPHONE (_____)_____

IF YOU HAVE ANY QUESTIONS, PLEASE CALL BARBARA BANKS AT (626) 939-8432

Hilp106bb

HOME IMPROVEMENT LOAN PROGRAM

HISTORICAL AND ARCHITECTURAL ASSESSMENT FORM

PART A: To be completed by the Inspector assigned to the case.

Notes: 1. To be applied to each structure on the property.
2. Exterior and interior of structure are to be considered.

PROPERTY ADDRESS: _____

TYPE OF STRUCTURE: _____

PROPOSED REHABILITATION: involves only **INTERIOR WORK**; with **NO EXTERNALLY VISIBLE** evidence of work.

( ) **YES** ( ) **NO**

If "Yes", Historic Preservation Review (HP review) is complete. If "No", proceed:

AGE OF BUILDING ____. If less than 50 years old, stop here. HP review is complete.
If building is at least 50 years old, Part B must be completed.

Prepared by: _____ Date: _____
Signature

Supervisor: _____ Date: _____
Signature

PART B: To be completed if structure is 50+ years of age.

1. Gather information as applicable, from local government, public and private organizations, and other parties likely to have knowledge regarding type of construction, architectural style, and historic significance. **TAKE PICTURES** of building (Polaroid acceptable).
2. Submit above information (Part A) to the SHPO and request consultation to determine if building is eligible for listing in the NR. Based on this consultation, agreement was reached that:

   Data submitted to SHPO_____

   Date SHPO responded _____
   (If no response, proposed rehabilitation activities can proceed after 30 days.)

Prepared by: _____ Date: _____
Signature

Supervisor: _____ Date: _____
Signature

(Continued on BACK)

HOME IMPROVEMENT LOAN PROGRAM

FLOODPLAIN IDENTIFICATION

This certifies that the property located at _____

_____, California is _____/ is not _____ within a
(City, County)

designated 100-year floodplain as shown on Flood Insurance Rate Map # _____ or

Flood Hazard Boundary Map # _____ approved by the Federal Emergency

Management Agency on _____.

Flood Insurance will _____ /will not _____ be required.

Letter from Charles Lindey
September 7, 1984
Chief, Technical Operations Division
Office of Risk Assessment
Federal Insurance Administration

Prepared by: _____ Date: _____
Signature

Supervisor: _____ Date: _____
Signature

Flood Insurance obtained from:

Agent: _____ Address: _____

Phone: _____ _____

*Submit completed form to HUD with each application.

HOME IMPROVEMENT LOAN PROGRAM

PERMITTED IMPROVEMENTS

Exterior Painting	Roofing	Termite Fumigation and Repair
Sewer Hook-up	Electrical	Air conditioning*
Double Cylinder Locks	Water heaters	Garage Door Opener*
Smoke Detectors	Plumbing	Structural Repairs
Attic Insulation	Stucco, Plaster	Sidewalk, Driveway Repairs
Interior Painting	Handicap modifications	Cement entryways and walks
Tree trimming, Landscaping	Pool Safety devices	Bedroom Additions or Enlargements*
Carpeting*	Code Violations	

DEFINITIONS OF ELIGIBLE HOME IMPROVEMENTS

Any code violations must be corrected along with the listed home improvements. The following definitions have been prepared for the purpose of clarifying the described various home improvements that are eligible under the City's Home Improvement Loan Program.

SMOKE DETECTORS. Must be installed if the home does not have any.

EXTERIOR PAINTING. (House and garage). Must be undertaken if needed as determined by the Program Coordinator and /or Community Enhancement Staff.

ROOFING. Repair and replacement of roofing (Building permit required).

DRIVEWAY. Repair and replacement of existing driveway. (Engineering permit required on apron.)

SEWER LINE HOOK-UP. Hooking up to the sewer system and repair of sewer lines are eligible.

PLASTERING, SIDING, STUCCO. The plastering or installation of stucco and siding to a home to improve and extend its life is eligible. Also, repairs, patching, and filling holes in the surfaces of walls is eligible.

TEXTURE COATING. For exterior of house and garage.

PAINTING. Painting of the exterior and interior of homes is eligible.

FENCING/BLOCK WALLS. Repair and installation of fencing/block walls is permitted only when these face a street, alley, park or certain other public facilities. (Planning permit.)

WINDOWS. Repair and replacement of windows is permitted, from wood to aluminum. Enlargement of windows is permitted only if the existing window area is below building code standards, and only to the extent needed to bring it up to code.

RAIN GUTTERS. Installation of rain gutters around house and garage.

GARAGE DOORS. Repair or replacement of garage doors. Replacement of broken springs.

ELECTRICAL. Repair and upgrading of electrical system. (Electrical permit.) Fixtures are not eligible.

***** See restrictions under Definitions.

PLUMBING

BATHROOMS:

- ▹ Repair of leaking pipes and fixtures.
- ▹ Repair of shower pans.
- ▹ Replacement of shower doors/enclosures (no shower curtains).
- ▹ Replacement of worn/broken tile (to protect walls) in shower stalls and in bathtub area adjacent to tub/shower.
- ▹ Replacement of worn fixtures (no gold-plated fixtures.)
- ▹ Replacement of damaged flooring with like or similar material.
- ▹ Replacement of damaged toilets, bathtubs, sinks.
- ▹ Broken bathroom heaters may be repaired or replaced in place.

KITCHEN:

- ▹ Repair of leaking pipes and fixtures.
- ▹ Repair or replacement of damaged tile and sinks.
- ▹ Replacement of damaged flooring with like or similar material.
- ▹ Replacement of garbage disposal unit.

WATER HEATER REPLACEMENT. Replacement of old/worn-out water heater. Whenever possible, water heaters should be reinstalled outside the home at the proper height. (Mechanical permit required.) Water heater enclosures and covers are also eligible items.

HEATING. Repair or replacement of existing heating systems.

ENERGY CONSERVATION AND INSULATION. Repair and replacement of attic ventilators, weather stripping around doors/windows, hot water heater blankets, energy efficient shower heads, faucets. Permanent improvements directed toward weatherizing a home to conserve or reduce energy are generally eligible. These include wall and attic insulation, solar panels, attic ventilators, and fans.

DEADBOLT LOCKS (on entrance doors). Installation of double cylinder deadbolt locks is permitted if doors are "solid core." Windows in the solid core doors are not permitted.

HANDICAP-ORIENTED MODIFICATIONS. All modifications, alterations, or additions oriented to facilitate access and use of the home by the disabled are eligible. These include installation of ramps, grab bars, door widening, countertop adjustments, and other adaptive measures.

YARD CLEAN UP. Includes all work needed to remove overgrown vegetation, debris, and trash.

AIR CONDITIONING. Installation of air conditioning is eligible only for medical reasons. A doctor's certificate stating the need for air conditioning is sufficient.

GARAGE DOOR OPENER. Garage door openers can be installed for the disabled, the handicapped and elderly only.

STRUCTURAL REPAIRS. Repairs due to structural damage are eligible. (Engineering permit required.)

CARPETING. Carpeting is eligible at a maximum of $18/yard installed price.

POOL SAFETY DEVICES. Pool safety devices can be installed including gates and fences. (Building inspection required.)

BEDROOM ADDITIONS AND ENLARGEMENTS. Additions and enlargements are only allowed for households with overcrowded conditions. Overcrowding is defined as having more than 1.5 persons per bedroom.