

Other Housing Programs Available

The Michigan State Housing Development
Authority (MSHDA)

www.michigan.gov/mshda

Oakland County Community and Home
Improvement

<https://www.oakgov.com/advantageoakland/communities/Pages/housing/default.aspx>



Housing Rehabilitation Program



Farmington Hills
Community Development Office
Housing Rehabilitation Program
31555 West Eleven Mile Road
Farmington Hills, MI 48336
248-871-2545

www.fhgov.com

Printed on recycled paper



Did You Know...

The City of Farmington Hills, through the Community Development Block Grant, operates a Housing Rehabilitation Loan Program to help qualified homeowners repair their homes. Deferred loans with 0% interest rates are available to help low- and moderate-income homeowners make needed repairs.

How Does The Loan Program Work?

Eligible applicants must be the owner and occupant of a single-family home in the City of Farmington Hills with a household income within the established guidelines.

Basic Program Summary:

- Application with all required documents submitted.
- A preliminary building survey is conducted by Staff.
- The Housing Rehab Loan Board reviews and approves applications.
- If application is approved, specifications are written and bids are obtained from licensed, insured and approved contractors.
- Loan Board reviews & approves bids.
- Once the improvements are completed, a lien is placed on the property for the amount of the loan.

Limits and Terms of Loans

- The maximum loan is \$18,000.*
- The loan amount, based upon competitive bids, is determined by the Loan Board.
- Deferred loans require one payment upon the sale or transfer of title of the property.
- 0% interest rate.
- A lien will be placed on the property in the amount of the loan.

*Loan Board may modify maximum amount due to extenuating circumstances.

Eligibility Requirements

- Must meet current income guidelines
- Must be owner and occupant of the home
- Property taxes must be paid to date
- Home must not be a part of a trust
- Application must include all required documents. This includes proof of income and Driver's license for all household members, Deed to property, Homeowner's insurance declaration page, Mortgage payment statement, Federal & State Income Tax returns. Additional info may be requested.

Call the Farmington Hills Community Development Office for information and applications at 248-871-2545 or visit the City's website at www.fhgov.com

Maximum Income Limits

1 person - \$53,700	5 person - \$82,850
2 person - \$61,400	6 person - \$89,000
3 person - \$69,050	7 person - \$95,150
4 person - \$76,700	8 person - \$101,250

2024 Income levels - subject to change.

What Home Improvements Can Be Made?

Examples of Eligible Improvements

- Roof/gutter replacement
- Siding
- Weatherization improvements (i.e. windows, insulation)
- Furnace
- Hot water tank
- Sewer/water hook up
- Electrical, heating, plumbing repairs

Examples of Ineligible Improvements

- New construction
- Driveways
- Decks
- New appliances
- Materials, fixtures, equipment that exceeds those used on a standard replacement basis, and which may be considered custom or luxury items



HOUSING REHABILITATION PROGRAM

Thank you for inquiring about the City of Farmington Hills Housing Rehabilitation Program (HRP). The City, through the federally funded Community Development Block Grant, offers financial and technical assistance to low- and moderate- income households to rehabilitate their owner-occupied single-family home. The HRP provides income qualified homeowners with interest-free deferred loans to make needed home improvements and repairs, with payment due upon the sale or transfer of title of the property.

The objective of the HRP is to primarily correct those items that have exceeded their life expectancy, could be hazardous to the life of the occupants, the safety of the structure or the health and welfare of the occupants. The HRP is required to address lead-based paint hazards. Typical improvements include but are not limited to:

- Roof/gutters
- Windows
- insulation
- Furnace
- Siding
- Hot water tanks
- Sewer/water connection
- Electrical, heating or plumbing repairs

Types of rehabilitation work generally **not included** under this program are decks, unattached garages and driveways. Materials, fixtures or equipment of a type or quality which exceed those used on a standard replacement basis and which may be considered a custom or luxury item are not eligible. New appliances are not eligible.

Applicant must be the owner and occupant of a single-family home; taxes must be paid to date (or an acceptable property tax relief agreement with City authorities must be in place); and household income cannot exceed the following:

HOUSEHOLD SIZE	MAXIMUM INCOME	HOUSEHOLD SIZE	MAXIMUM INCOME
1 Person	\$53,700	5 Person	\$82,850
2 Person	\$61,400	6 Person	\$89,000
3 Person	\$69,050	7 Person	\$95,150
4 Person	\$76,700	8 Person	\$101,250

Effective May 1, 2024 and subject to change

Applications and support documentation are reviewed by Staff to ensure eligibility requirements are met. A preliminary building survey is conducted to verify proposed work, with all information provided to the Housing Rehabilitation Loan Board (HRLB). The HRLB approves or denies all applications/proposed work to be completed and authorizes staff to create bid specifications. Bids are obtained and then reviewed by the HRLB for approval. If you are interested in the program, please carefully review and complete the attached application. Contact the Community Development Office for additional information 248-871-2540.

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HOUSING REHABILITATION PROGRAM APPLICATION

HRP#

ADDRESS OF PROPERTY TO BE IMPROVED (THE HOME MUST BE A SINGLE-FAMILY OWNER-OCCUPIED PROPERTY):

House Number/Street Name/Zip code:

Original Purchase Price: \$

Year Purchased

Do you own any other single-family property? Yes No

Market or State Equalized Value: \$

BORROWER

CO-BORROWER

Last Name	First Name	Middle	Gender	Last Name	First Name	Middle	Gender
			<input type="checkbox"/> Male <input type="checkbox"/> Female				<input type="checkbox"/> Male <input type="checkbox"/> Female

Date of Birth:

Date of Birth:

Social Security Number:

Social Security Number:

Unmarried (single, divorced, widowed)
 Married
 Separated

Unmarried (single, divorced, widowed)
 Married
 Separated

SINGLE PARENT, HEAD OF HOUSEHOLD YES NO

FEMALE, HEAD OF HOUSEHOLD YES NO

Phone #: () -

Phone #: () -

Phone #: () -

Phone #: () -

E-Mail Address:

E-Mail Address:

Employed
 Unemployed
 Retired

Employed
 Unemployed
 Retired

Full-Time Part-Time

Unemployed Since:

Full-Time Part-Time

Unemployed Since:

Name of Employer:

Name of Employer:

Occupation:

Occupation:

Hire Date:

Hire Date:

Hourly
 Salary

Hourly
 Salary

If Hourly, Usual Hours Per Pay Period:

If Hourly, Usual Hours Per Pay Period:

Paid Bi-Weekly
 Paid Weekly

Paid Bi-Weekly
 Paid Weekly

Name of 2nd Employer:

Name of 2nd Employer:

Occupation:

Occupation:

Hire Date:

Hire Date:

Hourly
 Salary

Hourly
 Salary

If Hourly, Usual Hours Per Pay Period:

If Hourly, Usual Hours Per Pay Period:

Paid Bi-Weekly
 Paid Weekly

Paid Bi-Weekly
 Paid Weekly

List Below All Persons Living in the Household		
Name:	Age:	Relationship to Borrower

Total Monthly Income from ALL Sources of ALL Household Members, Including Unrelated Persons	
\$	Wages
\$	Unemployment Benefits
\$	Pension
\$	Social Security Benefits
\$	IRA or Trust Benefits
\$	Child or Spousal Support
\$	Gift Money (attach letter stating amount and frequency of money received)
\$	Other (describe)
\$	Other (describe)

List ALL Financial Assets		
Name of Institution	Type (Savings, Checking, CDs, Traditional & Roth IRAs, 401(k)m 403(b), SEPA, Stocks, Bonds, Mutual Funds, Etc.)	Balance

Monthly Utility Expenses			
Consumers Energy: \$	(estimate)	DTE Energy: \$	(estimate)

List Mortgages and/or Home Equity Lines of Credit				
Name	Date Obtained	Original Balance	Outstanding Balance	Monthly Payment
1 st Mortgage Co.				
2 nd Mortgage Co.				
Home Equity Line of Credit				
Prior Foreclosure or FHA Default?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
Have You Declared Bankruptcy in the Last 7 Years?				
<input type="checkbox"/> No <input type="checkbox"/> Yes (if Yes, Submit a Copy of the Discharge of Bankruptcy with Your Application)				
How Did You Hear About This Program?				
LIST YOUR PROPOSED IMPROVEMENTS BY PRIORITY (Use additional paper if necessary):				
1.				
2.				
3.				
4.				
5.				
6.				
7.				

Do you have heat?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have water?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your house roof leaking?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

The following HEAD OF HOUSEHOLD information is obtained for statistical reporting only.

SINGLE RACE <u>Complete for Head of Household only</u>
<input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Hawaiian/Other Pacific Islander

MULTI-RACE <u>Complete for Head of Household only</u>
<input type="checkbox"/> Black/African American & White <input type="checkbox"/> Asian & White <input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> American Indian/Alaskan Native & Black/African American <input type="checkbox"/> Other Multi-Racial

ETHNICITY

Complete for Head of Household Only

Hispanic/Latino

Number of **HANDICAPPED PERSONS** in household? _____

Number of **UNRELATED PERSONS** living in household? _____

Number of **BEDROOMS IN THE HOUSE**? _____

APPLICANTS CERTIFICATION: The applicant certifies that all information in this application, and all information furnished in support of this application is for the purpose of obtaining funds for the improvement of the above mentioned property, and that these statements are true to the best of the applicants knowledge and belief.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT: U.S.C. Title 18, Sec. 1001, provides: Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies... or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing, or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years, or both."

Signature - Borrower

Date

Signature – Co-Borrower

Date

REQUIRED DOCUMENTATION – DO NOT MAIL ORIGINAL DOCUMENTS

Please submit **copies** of the following documentation with your application. If needed, we can make copies of your documents for you; contact the office to make an appointment (248-871-2545). NOTE: Additional information may be required.

Deed to property - Recorded Warranty Deed and any Quit Claim Deeds

Driver's License (front & back) - for all household members

Homeowner's Insurance - Declarations page showing current term

Federal & State Income Tax Returns for past two years including all forms and Schedules for all household members, where applicable

Mortgage Payment statement - Must include current principal balance, interest rate, and next due date

Annual Social Security Award letter (if applicable. If you do not have a copy contact Social Security at 800-772-1213

Mail or drop off the application and documentation to:
City of Farmington Hills - Community Development
Housing Rehabilitation Program
31555 West Eleven Mile Rd.
Farmington Hills, MI 48336
Phone (248) 871-2545

FOR OFFICE USE ONLY:

DATE RECEIVED

HRP#



Equal Housing
Opportunities

Version 24.01.10

24.01.10



To: Owners, and Tenants & Purchasers
of Housing Constructed
before 1978

Notification

Watch Out For Lead-Based Paint Poisoning

This property was constructed before 1978. There is a possibility it contains lead-based paint. Please read the following information concerning lead-based paint poisoning.

Sources of Lead Based Paint

The interiors of older homes and apartments often have layers of lead-based paint on the walls, ceilings, window sills, doors and door frames. Lead-based paint and primers may also have been used on outside porches, railings, garages, fire escapes and lamp posts. When the paint chips, flakes or peels off, there may be a real danger for babies and young children. Children may eat paint chips or chew on painted railings, window sills or other items when parents are not around. Children can also ingest lead even if they do not specifically eat paint chips. For example, when children play in an area where there are loose paint chips or dust particles containing lead, they may get these particles on their hands, put their hands into their mouths, and ingest a dangerous amount of lead.

Hazards of Lead-Based Paint

Lead poisoning is dangerous - especially to children under the age of seven (7). It can eventually cause mental retardation, blindness and even death.

Symptoms of Lead-Based Paint Poisoning

Has your child been especially cranky or irritable? Is he or she eating normally? Does your child have stomachaches and vomiting? Does he or she complain about headaches? Is your child unwilling to play? These may be signs of lead poisoning. Many times though, there are no symptoms at all. Because there are no symptoms does not mean that you should not be concerned if you believe your child has been exposed to lead-based paint.

Advisability and Availability of Blood Lead Level Screening

If you suspect that your child has eaten chips of paint or someone told you this, you should take your child to the doctor or clinic for testing. If the test shows that your child has an elevated blood lead level, treatment is available. Contact your doctor or local health department for help or more information. Lead screening and treatment are available through the Medicaid Program for those who are eligible. If your child is identified as having an elevated blood lead level, you should immediately notify the Community

Development or other agency to which you or your landlord is applying for rehabilitation assistance so the necessary steps can be taken to test your unit for lead-based paint hazards. If your unit does have lead-based paint, you may be eligible for assistance to abate that hazard.

Precautions to Take to Prevent Lead-Based Paint Poisoning

You can avoid lead-based paint poisoning by performing some preventive maintenance. Look at your walls, ceilings, doors, door frames and window sills. Are there places where the paint is peeling, flaking, chipping, or powdering? If so, there are some things you can do immediately to protect your child:

- (a) Cover all furniture and appliances;
- (b) Get a broom or stiff brush and remove all loose pieces of paint from walls, woodwork, window wells and ceilings;
- (c) Sweep up all pieces of paint and plaster and put them in a paper bag or wrap them in newspaper. Put these packages in the trash can. **DO NOT BURN THEM:**
- (d) Do not leave paint chips on the floor in window wells. Damp mop floors and window sills in and around the work area to remove all dust and paint particles. Keeping these areas clear of paint chips, dust and dirt is easy and very important; and
- (e) Do not allow loose paint to remain within your children's reach since children may pick loose paint off the lower part of the walls.

Homeowner Maintenance and Treatment of Lead-Based Paint Hazards

As a homeowner, you should take the necessary steps to keep your home in good shape. Water leaks from faulty plumbing, defective roofs and exterior holes or breaks may admit rain and dampness into the interior of your home. These conditions damage walls and ceilings and cause paint to peel, crack or flake. These conditions should be corrected immediately. Before repainting, all surfaces that are peeling, cracking, chipping or loose should be thoroughly cleaned by scraping or brushing the loose paint from the surface, then repainted with two (2) coats of non-lead paint. Instead of scraping and repainting,

the surface may be covered with other material such as wallboard, gypsum, or paneling. Beware that when lead-based paint is removed by scraping or sanding, a dust is created, which may be hazardous. The dust can enter the body either by breathing it or swallowing it. The use of heat or paint removers could create a vapor or fume which may cause poisoning if inhaled over a long period of time. Whenever possible, the removal of lead-based paint should take place when there are no children or pregnant women on the premises. **Simply painting over defective lead-based paint surfaces does not eliminate the hazard. Remember that you as an adult play a major role in the prevention of lead poisoning. Your actions and awareness about the lead problem can make a big difference.**

Tenant and Homebuyer Responsibilities

You should immediately notify the management office or the agency through which you are purchasing your home if the unit has flaking, chipping, powdering or peeling paint, water leaks from plumbing, or a defective roof. You should cooperate with that office's effort to repair the unit.

I have received a copy of the Notice entitled "Watch Out for Lead Paint Poisoning."

Date

Print Full Name

Signature

CITY OF FARMINGTON HILLS
HOUSING REHABILITATION PROGRAM

LEAD- BASED PAINT COMPLIANCE CERTIFICATION FORM

HRP# _____

NAME: _____

SIDWELL NO: _____

ADDRESS: _____ 4833

1. Was the house constructed prior to 1978? Yes No Unknown

2. Are there likely to be children aged seven and under living in the house? Yes No Unknown

If yes or unknown, continue; if no, stop.

3. Are there any children living in the house with elevated blood levels? Yes No Unknown

If yes or unknown, go to 9; if no, continue.

4. Are there defective interior/exterior paint surfaces? Yes No Unknown

If yes or unknown, continue; if no, stop.

5. Were defective paint surfaces tested for lead content? Yes No Unknown

If yes or unknown, continue to 7; if no, continue to 6.

6. Abate defective paint surfaces. Yes No Unknown
Date abatement completed _____

7. Did defective surfaces have unacceptable levels of lead content? Yes No Unknown

If yes, continue; if no, stop.

8. Abate defective surfaces. Yes No Unknown
Date abatement completed _____

9. Test all painted surfaces for lead content. Abate all surfaces with unacceptable lead content.
Test date _____ Date abatement completed _____

I, the homeowner hereby certify that: the undersigned has received the Federal Department of Housing and Urban Development (HUD) notification "Watch Out for Lead Paint Poisoning" and, to the best of my knowledge, there are no children residing at this home who have elevated blood lead levels.

Homeowner Signature

Date

**CITY OF FARMINGTON HILLS
HOUSING REHABILITATION PROGRAM**

PRE-APPLICATION SURVEY FORM

HRP# _____
(Office use)

NAME: _____
(Please Print)

DATE: _____

ADDRESS: _____ 4833

Did you:

- _____ 1. Read the brochure about the Farmington Hills Housing Rehabilitation Program?
- _____ 2. Know that a City Inspector will conduct a survey at your home prior to the loan application review?
- _____ 3. Know that a lien will be placed on the property in the amount of the loan?
- _____ 4. Know once work is completed, an official from the U.S. Department Housing and Urban Development may inspect the rehabilitation work at your home?
- _____ 5. Receive the notification "Watch Out For Lead-based Paint Poisoning"?
- _____ 6. Know that "profiteering" or selling the house after construction profit is prohibited. Under most circumstances houses must be held by the borrower for a minimum of one (1) year.

Signature

Date