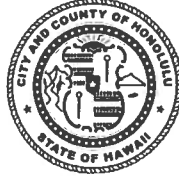


DEPARTMENT OF COMMUNITY SERVICES
KA 'OIHANA LAWELAWE KAIĀULU
CITY AND COUNTY OF HONOLULU

COMMUNITY ASSISTANCE DIVISION

51 MERCHANT ST, 1ST FLOOR • HONOLULU, HAWAII 96813
PHONE: (808) 768-7076 • FAX: (808) 768-7057 • WEB: www.honolulu.gov

RICK BLANGIARDI
MAYOR
MEIA



ANTON C. KRUCKY
DIRECTOR
PO'O

AEDWARD LOS BANOS
DEPUTY DIRECTOR
HOPE PO'O

Dear Applicant:

Please find the application and information about the **City's Rehabilitation Loan Program**.

PLEASE NOTE: The City Rehabilitation Loan Program is not suitable for emergency repairs and/or remodeling upgrades. Due to current Federal, State, and City regulations to obtain loan approval, such as State Historic Preservation approval for any renovation work, the total processing time for a loan application is at least a year or longer. After loan approval, a building permit must be obtained.

Completely fill out all 3 pages of the application and be sure to sign and date pages 2 & 3. Please also provide us with the supporting documentation listed below.

1. **Federal Income Tax Return**: For each working or retired adult and dependent(s) working part-time living in the house on the date of application, provide a signed copy of their most recent year Federal Tax Return.
2. **Income Verification**: For each working or retired adult and dependent(s) working part-time living in the house on the date of application, please provide copies of the following, as applicable:
 - a) Pay stubs/statements covering the most recent 30-day period.
 - b) W-2 form used to file the most recent Federal Tax Return.
 - c) Statement of current year benefits from the Social Security Administration.
 - d) Retirement pension statement or award letter.
3. **Credit Bureau Authorization Form** (enclosed with application). **All applicants for the loan** must provide their printed name, sign, and date the form.

The information you provide will help us make a preliminary determination on your personal eligibility. We will contact you later to discuss the application process in more detail and set-up an appointment to inspect your property if you appear eligible. Credit report and other fees will be disclosed and collected from you at a later time in the application process. All fees are paid to third-party credit bureau and title/escrow companies.

Please contact the Rehabilitation Loan Branch at (808)768-7076 for further assistance.

Sincerely,

ALAN S. TAMANAHA
Rehabilitation Loan Branch Chief

Enclosures

1. Loan Program Information Sheet
2. Loan Application Form
3. Credit Bureau Authorization Form

**CITY REHABILITATION LOAN PROGRAM
FOR OWNER-OCCUPIED – RESIDENTIAL PROPERTIES**

1. Q. **WHAT IS THE REHABILITATION LOAN PROGRAM?**

A. The Rehabilitation Loan Program utilizes Federal funds available through the Community Development Block Grant (CDBG) program of the United States Department of Housing and Urban Development (HUD) to make low-interest loans to income eligible owner-occupant homeowners who are interested in repairing and improving their properties.

2. Q. **WHAT KINDS OF REPAIRS OR IMPROVEMENTS CAN BE MADE WITH THE LOAN?**

A. The loan is used to repair and correct deteriorated and hazardous conditions on the property including damage caused by termites or wood rot, leaky roof and drain pipes, peeling paint, faulty electrical wiring and plumbing, etc. Installation of energy savings systems such solar water heater and photovoltaic units are eligible. The loan can also be used to accommodate the special needs of the disabled members of the household.

3. Q. **WHO IS ELIGIBLE TO APPLY FOR A LOAN?**

A. Owner-occupant homeowners whose total household income is within the income limit schedule listed below are generally eligible. The current maximum income limits for owner-occupant homeowners, by household size, are as follow:

<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>
85,150	97,300	109,450	121,600	131,350	141,100	150,800	160,550

4. Q. **WHAT MUST A HOMEOWNER REPAIR AND CORRECT UNDER THE LOAN PROGRAM?**

A. To insure that the property is safe and sanitary, all deficiencies noted by a City Rehabilitation Inspector must be repaired and corrected.

5. Q. **HOW MUCH MONEY CAN A HOMEOWNER BORROW?**

A. The loan amount for rehabilitation work on an owner-occupied property is up to \$300,000. Loan amounts exceeding \$300,000 will be considered on a case-by-case basis. The loan amount is based on the available equity on the property.

6. Q. **WHAT KIND OF INTEREST RATE WILL THE BORROWER BE PAYING?**

A. The interest rate will be 0% for all income eligible applicants. The current income limits are based on the total number of family member in the household as follow:

INCOME-INTEREST RATE SCHEDULE

Number of Members in the Household	<u>0%</u>
1	85,150
2	97,300
3	109,450
4	121,600
5	131,350
6	141,100
7	150,800
8	160,550

7. **Q. WHAT WILL BE THE LOAN PAYMENT TERMS?**

A. The monthly payment will be based on a minimum 15 -year maturity term for loan amounts under \$60,000. For loan amounts over \$60,000, maturity term will be up to a maximum 20-year term. For certain credit qualifying borrowers, loan payments may be tailored to meet limited budgets. These qualifying borrowers will pay a reduced minimum monthly payment for the entire term of the loan.

8. **Q. WHAT ARE SOME OF THE REHABILITATION SERVICES AVAILABLE TO HOMEOWNERS?**

A. A City Rehabilitation Inspector will conduct an inspection of the property. He will prepare a checklist that will outline eligible repair work. The owner can use this checklist to obtain a proposal from a General Contractor licensed in the State of Hawaii.

9. **Q. HOW ARE LOAN FUNDS DISBURSED?**

A. Following loan settlement, funds are retained by the City and disbursed to the contractor after the work is completed to the satisfaction of the homeowner and the City's Rehabilitation Inspector. Loan funds are normally disbursed up to four payments.

10. **Q. HOW IS THE LOAN SECURED?**

A. Loans will be secured by a promissory note and a mortgage on the property. In addition, there is a required owner occupancy term of 5-years.

11. **Q. WHERE CAN A HOMEOWNER OBTAIN MORE INFORMATION?**

A. The City's Rehabilitation Loan Branch is located at 51 Merchant Street, 1st Floor, Honolulu, HI 96813 and the phone number is 768-7076. You can also visit our website at <https://www8.honolulu.gov/dcs/dcs-cad-loan-programs> to obtain more information or loan application.

APPLICANT'S NAME (HEAD OF HOUSEHOLD): _____

Supplemental Information Schedule

Please complete the following information on all dependent and non-dependent **Permanent** Members of your Household. If there are no non-dependent permanent household members residing with you, please write none on the line below:

<u>Name</u>	<u>Relationship to Head of Household</u>	<u>Age</u>	<u>Annual Income</u>	<u>Source(s) of Income</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Additional Household Members - Attach Additional Sheet if necessary.

As evidence of income, please submit a copy of the most recent tax returns for each individual listed above.

I (We) certify that the above information is true and correct to the best of my (our) knowledge.

APPLICANT'S SIGNATURE

DATE

CO-APPLICANT'S SIGNATURE

DATE



THE INFORMATION NETWORK
www.ACRAnet.com

MORTGAGE REPORTING • EMPLOYMENT SCREENING

521 W. Maxwell Ave • Spokane, Wa • 99201-2417
Customer Service Direct: 509 324-1249 • 1 800 304-1249
Fax 509 324-1240 • 1 800 845-7435

"National Coverage with Local Service"

TENANT SCREENING • COMMERCIAL REPORTING

INFORMATION DISCLOSURE AUTHORIZATION AND RELEASE

The undersigned parties (hereinafter referred to as "Applicant(s)") hereby authorize ACRAnet, Inc a Nevada Corporation (hereinafter referred to as "ACRAnet") to obtain a credit report and other personal information (all documents hereinafter referred to as "Consumer Report") in connection with Applicant(s) application for a mortgage loan.

Applicant(s) signature(s) below further authorize(s):

- I. the mortgage company to release a copy of Applicant(s) credit application to ACRAnet;
- II. ACRAnet to obtain information regarding Applicant(s) employment, savings accounts and outstanding credit accounts (mortgages, auto loans, personal loans, charge cards, credit union accounts, etc.) ;
- III. ACRAnet to use a photocopy, facsimile or other true reproduction of this authorization, if necessary, to obtain any information required in the course of its activities in connection herewith, any such true copy of this Information Disclosure Authorization and Release being deemed an original; and
- IV. ACRAnet to furnish a copy of Applicant(s) Consumer Report to the mortgage company that requested this authorization.

Applicant(s) hold the mortgage company and ACRAnet harmless and indemnified in furnishing the copy of the Consumer Report in accordance herewith.

_____ Applicant's Name (Please Print)	_____ Applicant's Signature	_____ Date
_____ Applicant's Name (Please Print)	_____ Applicant's Signature	_____ Date
_____ Applicant's Name (Please Print)	_____ Applicant's Signature	_____ Date
_____ Applicant's Name (Please Print)	_____ Applicant's Signature	_____ Date

PRIVACY ACT NOTICE: The information to be obtained will be used by the lender and any federal agency insuring, guaranteeing or purchasing the mortgage to determine whether Applicant(s) qualifies as a prospective borrower under the lender's and the agency's underwriting standards. The information will not be disclosed outside the lender and the federal agency without Applicant(s) consent except to the person or company verifying the information including, but not limited to, Applicant(s) employer, bank, lender and by any other credit reference as needed to verify other credit information and as permitted by law. Applicant(s) does not have to give ACRAnet this information, but if Applicant(s) does not, Applicant(s) mortgage loan application may be delayed or rejected. This information ACRAnet will obtain is authorized by the TITLE 38, U.S.C chapter 37 (if VA); and 12 U.S.C., Section 1701 et seq. (if HUD/FHA).