

City of Holland Community & Neighborhood Services
Home Repair Program- Property Rehabilitation Application

Please complete and return to City Hall, 270 S. River Avenue, 3rd floor, Holland, MI 49423 616.355.1330

Owner(s) Name: _____

Address: _____ City/State/Zip: _____

Day Phone: _____ Evening Phone: _____

Email: _____ Cell Phone: _____

Preferred method of contact (Email, cell phone, etc.): _____

Is the property a single family, owner occupied home with NO rental portion? Yes No

Names and ages of all people living in the home: _____

REQUIRED DOCUMENTS: Applications without complete documentation WILL NOT be processed.

- Copy of recorded warranty deed or recorded land contract
- Copy of the declarations pages of your homeowners insurance policy WITH proof of payment
- Copy of paid property taxes
- Proof of income (fill out Income checklist for EACH PERSON 18 years old and older, and bring necessary proof as outlined on checklist): Most recent *signed* tax return with ALL supporting documents (W-2s, etc.). You must include ALL forms of income you receive including, but not limited to: social security, rental property income, business income, child support, alimony, pension, interest earned, & job wages.
- 4 x 6 photo of required work and of the house from the street
- Proof your mortgage is paid up to date
- Three (3) comparable estimates from contractors off the City's Contractor List (in packet)

Do you have working smoke detectors in your home? _____

ARE YOU AN ACTIVE MILITARY MEMBER OR A VETERAN? _____

PROGRAM REQUIREMENTS (including but not limited to):

- Applicants must sign a grant agreement
- Staff **may** require applicants to meet with them before getting estimates, to fill out a bid estimation form
- Applicants must agree to having a **5 year lien** placed on their property for the amount the City contributes toward the project
- Any properties owned by the applicant may not be involved in court action with any City Department
- Three estimates are required. Owners may choose which contractor to use, but must pay the difference from the lower bid on top of their portion.
- Funds will not be paid for work already started or completed. All applications must be approved prior to the start of the work.

This information is requested for statistical purposes only, to track our compliance with Equal Opportunity Laws. Completing this section is optional.

62 years old or over: Yes No **Female Headed Household:** Yes No

Ethnicity: Hispanic (if you check this please also check your race below)

Race:

- White Black/African American Asian
- American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander
- Multi-Race Asian & White Multi-Race Black/African American & White
- Multi-Race American Indian/Alaskan Native and Black/African American Multi-race other

I certify that the information provided is true and accurate to the best of my knowledge. I have received, read and understand the EPA brochure in regards to my lead project (if applicable).

Signature: _____ Date: _____

Property Rehabilitation Needs Checklist

Please place a check next to all the items at your property that need repair (not necessarily what you are applying for help with right now, but a collective list of all the things that need to be addressed).

EXTERIOR:

SIDING	FOUNDATION	PORCH	WINDOWS
Needs siding- none now	Cracks	Front	1 st floor (# __)
Needs re-siding		Back	2 nd floor (# __)
	FLATWORK	Side	Basement (# __)
CHIMNEY/ROOF	Sidewalk	Wooden steps	Porch (How many__)
Chimney repair	Steps	Railings	
New roof needed	Driveway		EXTERIOR DOORS
Roof vents needed		GARAGE	Front door
How old is roof? _____		Roof	Back door
	TREE REMOVAL	Windows	Side door
CONNECTION TO CITY MAIN	Tree is dead	Siding	Storm door
Sewer		Door	
Water		Other	

INTERIOR:

ELECTRICAL	FURNACE	WATER HEATER	PLUMBING
Old wiring	Needs replacing	Needs replacing	Kitchen
Outlets	Need vents/ducts		Bathroom (down)
Switches		<i>Age of water heater</i> ____	Bathroom (up)
Smoke Detectors	<i>Age of furnace</i> ____		
Service box			
INTERIOR DOORS	WALLS/CEILINGS	INSULATION	
Bedroom	Need repair	Attic	
Bathroom	Where?	Sidewalls	
Basement		Around windows/doors	

In your own words, please list all the repairs you feel are necessary, and in what order...

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____