



## Give Your Home a Hug!

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### A Complete Eligibility Intake Packet includes the following:

- 1) A completed **Eligibility Intake Form** (attached) signed by homeowner(s)
- 2) A copy of your most recent **property tax bill**
- 3) A copy of your most recent **mortgage statements**, including any **home equity loans** or **lines of credit** (HELOC) (if applicable)
- 4) Copies of **bank statements** for all savings, checking and retirement accounts owned by **applicant** and **co-applicant** for the last 2 months
- 5) Copies of last 2 years of **tax returns**. Please include W2s and, if applicable, 1099s
- 6) **Proof of all household income** for the last 2 months. This should include paystubs for the last 2 months and award letters for any benefits received (i.e.: Social Security, SSDI, SSI or Reach Up Income)
- 7) Proof of **homeowner's insurance**

Return your completed packet to:

Green Mountain Home Repair Program  
Windham & Windsor Housing Trust  
68 Birge Street  
Brattleboro, VT 05301

**If you need help filling out this form or gathering the required documentation or if you have questions about the Green Mountain Home Repair Program, please call (802) 246-2116.**

## Program Overview

The Green Mountain Home Repair Program (GMHR) offers low interest loans with terms tailored to make repayment affordable to homeowners. GMHR's goal is to help as many as people as possible address critical home repair needs.

GMHR assesses household finances including income, debts and monthly expenses to determine program eligibility and repayment terms. The availability of funds and households' ability to repay a loan determine the amount of loan provided. When grant funds are available, eligible households will be offered grant money.

The Home Repair Specialists will assess each home's repair needs and will prioritize health and safety issues. Because the GMHR is funded by the Federal Department of Housing and Urban Development (HUD), all projects must comply with HUD's Housing Quality Standards.

The following are the services offered in GMHR program:

- Conduct an initial assessment of the home.
- Determine what repair work is most critical to the long-term habitability of the home.
- Write up a scope of work that includes detailed specifications of repairs
- Help homeowners find qualified contractors to perform the repairs
- Assist homeowners with obtaining and understanding contractor's bids
- Provide and explain the contract between homeowner and contractors
- Assist with permitting and compliance with local, state, and federal regulations
- Provide for contingency funds in the contract to pay for unexpected necessary expenses
- Oversee the repair work in all phases
- Ensure that payments to contractors are equal to the percentage of work completed
- Authorize and oversee any changes that arise during construction
- Conduct final inspection to ensure all repairs have been completed.

## Eligibility Intake Form

The information on this form will be used to make an initial assessment of your eligibility for the Green Mountain Home Repair Program and is not an application for a loan or grant. If you appear to be eligible for a loan or a grant and you wish to proceed, you will be required to submit an application.

Where/How did you hear about our program? \_\_\_\_\_

### A. Personal Information

**Applicant:** \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
First name MI Last name Month Day Year

Social Security# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Marital Status: \_\_\_\_\_

Check one: \_\_\_\_ U.S. Citizen \_\_\_\_ Permanent Resident Alien

**Co-Applicant:** \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
First name MI Last name Month Day Year

Social Security# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Marital Status: \_\_\_\_\_

Check one: \_\_\_\_ U.S. Citizen \_\_\_\_ Permanent Resident Alien

### Contact Information

Property/Home Address: \_\_\_\_\_  
Street Town County State Zip

Mailing Address (if different): \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Work Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email Address: \_\_\_\_\_

Number of Children in the home (Dependents): \_\_\_\_\_ Ages: \_\_\_\_\_

Does anyone else live in the home (tenants, roommates, elderly parents, adult children)? \_\_\_\_

If so, please list: \_\_\_\_\_

**B. Employment Information**

**Applicant:**

Employer (Company name): \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ How long have you worked there? \_\_\_\_\_

Monthly gross income (pre-deductions): \_\_\_\_\_ Annual gross income: \_\_\_\_\_

Please list any other jobs you currently have or have had in the past two years, including self-employment, and approximately how much you earned (pre-deductions) from these jobs each year. Attach another page if needed.

Currently employed here?	Company name/job title	Annual income

**Co-Applicant:**

Employer (Company name): \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ How long have you worked there? \_\_\_\_\_

Monthly gross income (pre-deductions): \_\_\_\_\_ Annual gross income: \_\_\_\_\_

Please list any other jobs you currently have or have had in the past two years, including self-employment, and approximately how much you earned (pre-deductions) from these jobs each year. Attach another page if needed.

Currently employed here?	Company name/job title	Annual income

### C. Income Sources

For each income source, indicate the total amount you receive either monthly or yearly. For earned income, please indicate the amount you receive before deductions (such as taxes, health insurance, retirement contributions) are taken out. In the payee column, please show if the person who is paid the amount is the Applicant (A), Co-Applicant (C), or Other person (O).

Income Source	Monthly income	Yearly income	A, C, or O
Applicant's earned income from all sources (wages, salary, tips. Commissions, bonuses)			A
Co-Applicant's earned income from all sources (wages, salary, tips. Commissions, bonuses)			C
Social Security, Pension, Retirement			
Rental Income			
Child Support			
Alimony			
Unemployment Compensation			
Interest or dividends			
Veteran's Benefits			
Other Income*			

\*Please specify source(s) of any other income: \_\_\_\_\_

**D. Home Information**

Title to the property in the name(s) of: \_\_\_\_\_

Does anyone else have an ownership interest in the property such as life estate, homestead rights, etc.\*? \_\_\_\_ Yes \_\_\_\_ No. If yes, name: \_\_\_\_\_

*\*Vermont law recognizes a homestead right in the spouse or civil union partner of the legal owner of real estate when it is used or kept as their primary residence, even if the spouse or civil union partner is not a Title Owner to that property. This homestead interest prevents creditors from attaching the entire interest in the property without consent of all parties who have an ownership interest in the property; for this reason, **we require all parties with a homestead right to sign the mortgage deed to insure that our lien is fully enforceable.***

Purchase Price: \_\_\_\_\_ Year of Purchase: \_\_\_\_\_ Town Assessed Value: \_\_\_\_\_

Current Mortgage Balance: \_\_\_\_\_

Type of mortgage: \_\_\_\_ Conventional \_\_\_\_ FHA \_\_\_\_ VA \_\_\_\_ USDA/RD \_\_\_\_ VHFA

Current Interest Rate: \_\_\_\_\_ Term: \_\_\_\_\_ Have you ever refinanced? \_\_\_\_ Yes \_\_\_\_ No

Mortgage company's name: \_\_\_\_\_

Do you have a 2nd mortgage, lien, or home equity loan/line of credit? \_\_\_\_ Yes \_\_\_\_ No

Second Mortgage: Original Loan Amount: \_\_\_\_\_ Balance Due: \_\_\_\_\_

Type of loan: \_\_\_\_ Home Equity Line of Credit (HELOC) \_\_\_\_ Home Equity Loan

\_\_\_\_ 2<sup>nd</sup> Mortgage \_\_\_\_ Downpayment Assistance Loan \_\_\_\_ Other

Interest Rate: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Mortgage/HELOC/Loan Company Name: \_\_\_\_\_

**Type of home:**

\_\_\_\_\_ Single Family    \_\_\_\_\_ Duplex (2 housing units)    \_\_\_\_\_ Manufactured    \_\_\_\_\_ Mobile

If **Manufactured or Mobile Home** – is the home located:

\_\_\_\_\_ on land you own, \_\_\_\_\_ on land privately owned by another person  
\_\_\_\_\_ on a non-profit or co-op park \_\_\_\_\_ on a private, for-profit park

What year was your home built? \_\_\_\_\_

How many acres of land do you own? \_\_\_\_\_

Is your property located on a town-maintained road? \_\_\_\_\_ Yes    \_\_\_\_\_ No.

If no, is there a written road maintenance agreement in place? \_\_\_\_\_ Yes    \_\_\_\_\_ No

How many stories is your home (do not include attic or basement): \_\_\_\_\_

Home construction type: \_\_\_\_\_ Wood Frame    \_\_\_\_\_ Brick    \_\_\_\_\_ Stone    \_\_\_\_\_ Other

Septic system? \_\_\_\_\_ Yes    \_\_\_\_\_ No    Well water? \_\_\_\_\_ Yes    \_\_\_\_\_ No

Public water/sewer? \_\_\_\_\_ Yes    \_\_\_\_\_ No

Has your home been weatherized by the community action weatherization program?

\_\_\_\_\_ Yes    \_\_\_\_\_ No, if Yes, what year? \_\_\_\_\_

Please describe the home repairs you need below. Include all *essential* (non-cosmetic) repairs that you believe need to be made to your home. If you have an over-crowding situation, please explain.

## E. Housing Expenses

### Monthly Amount

- |   |          |
|---|----------|
| 1. Mortgage payment                         | \$ _____ |
| 2. Second mortgage/HELOC                    | \$ _____ |
| 3. Ground lease (for Shared Equity)         | \$ _____ |
| 4. Homeowners insurance                     | \$ _____ |
| 5. Real property taxes, special assessments | \$ _____ |

<b>Total monthly housing expenses (add 1-5)</b>	<b>\$ _____</b>
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Are Property taxes current (including water and sewer taxes, if applicable)? \_\_\_\_\_

If no, please explain \_\_\_\_\_

What town are real estate taxes paid to: \_\_\_\_\_

Homeowners Insurance Company: \_\_\_\_\_

Agent: \_\_\_\_\_ Agent's Phone Number: \_\_\_\_\_

Policy #: \_\_\_\_\_ Renewal Date: \_\_\_\_\_

Limits of Coverage: \_\_\_\_\_

*\*You are required to maintain homeowners insurance on your property for most repair loans and grants. You will also be required to maintain flood insurance **if** your property is determined to be in a flood hazard area. Insurance is required for the life of the loan, if applicable.*



## F. Non-Housing Debt

Please list all your non-housing debt. This includes loans for vehicles, personal loans, and credit cards or store cards. Use additional paper if needed.

Type of debt <i>Personal loan, vehicle loan, credit card, etc.</i>	Creditor/Lender Company Name Account Number	Total outstanding balance	Minimum Monthly Payment	Number of payments remaining <i>(not for credit cards)</i>	Applicant (A) Co-Applicant (C) Joint Debt (B)

How much of a monthly payment do you believe you can afford for a home repair loan?

\_\_\_\_\_ 0-\$25 \_\_\_\_\_ \$25-\$50 \_\_\_\_\_ \$50-\$75 \_\_\_\_\_ \$75-\$100 \_\_\_\_\_ \$100+

## G. Government Monitoring Information

The following information is requested by the Federal Government in order to monitor the Lender's compliance with equal credit opportunity, fair housing and mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor on whether or not you choose to provide it. However, if you choose not to provide it, under Federal regulations this Lender is required to note race and gender on the basis of visual observation or surname.

### Applicant:

- ☐ Handicapped/Disabled
- ☐ Veteran
- ☐ Foreign Born

### Marital Status:

- ☐ Married ☐ Single ☐ Divorced
- ☐ Widowed ☐ Separated ☐ Civil Union

### Gender:

- ☐ Female Head of Household
- ☐ Female
- ☐ Male

### Ethnicity:

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

### Race:

- ☐ White
- ☐ Black/African American
- ☐ Asian
- ☐ Native Hawaiian/ Pacific Islander
- ☐ American Indian/Alaskan Native
- ☐ American Indian/Alaskan Native and White
- ☐ Asian and White
- ☐ Black African American and White
- ☐ American Indian/Alaskan Native and Black
- ☐ African American
- ☐ Other Multi-Racial \_\_\_\_\_
- ☐ I do not wish to provide this information

### Co-Applicant:

- ☐ Handicapped/Disabled
- ☐ Veteran
- ☐ Foreign Born

### Marital Status:

- ☐ Married ☐ Single ☐ Divorced
- ☐ Widowed ☐ Separated ☐ Civil Union

- ☐ Female Head of Household
- ☐ Female
- ☐ Male

### Ethnicity:

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

### Race:

- ☐ White
- ☐ Black/African American
- ☐ Asian
- ☐ Native Hawaiian/ Pacific Islander
- ☐ American Indian/Alaskan Native
- ☐ American Indian/Alaskan Native and White
- ☐ Asian and White
- ☐ Black African American and White
- ☐ American Indian/Alaskan Native and Black
- ☐ African American
- ☐ Other Multi-Racial \_\_\_\_\_
- ☐ I do not wish to provide this information

**Household Type:** ☐ 2 or more unrelated adults ☐ Single Adult ☐ Married with children ☐ Married without children

### Education Level of Applicant:

- ☐ No High School Diploma ☐ High School Diploma or equivalent ☐ Two Year College degree
- ☐ Bachelor's Degree ☐ Master's Degree ☐ Above a Master's Degree

Has any adult in the household fallen in the past twelve months? \_\_\_\_\_

Does any adult in the household feel unsteady when walking or standing? \_\_\_\_\_

Does any adult in the household worry about falling? \_\_\_\_\_

## **H. PRIVACY POLICY AND PRACTICES**

The Green Mountain Home Repair Program, Windham & Windsor Housing Trust and Downstreet value your trust. Protecting your confidential information is important to us. This notice describes our policy regarding the collection and disclosure of personal information.

**Green Mountain Home Repair does not sell or share any personal information with commercial companies for the purpose of marketing their products to you.**

### **What Information We Collect**

Personal information means information that identifies an individual and is not otherwise publicly available information. This includes personal financial information, such as credit history, income, employment history, financial assets, bank account information, financial debts, Social Security Number, and other information you provide on a Personal Profile or loan application.

We collect the personal information in order to provide financial fitness, counseling, counseling to prepare you for applying for a home mortgage from a conventional lender, counseling to prevent foreclosure, and our own lending for down payment, closing costs, home rehab, or other purposes related to home purchase or foreclosure prevention.

### **Restrictions on Disclosure of Personal Information**

In general, Green Mountain Home Repair Program discloses personal information only when necessary to provide services to you, or when allowed by law.

We may disclose the following kinds of personal information about you:

- ❖ Information we receive from you on applications for a loan or other product or service, such as name, address, telephone number, social security number, assets and income;
- ❖ Information about your transactions with us, such as your loan balance, payment history and parties to your transactions; and
- ❖ Information we receive from third parties such as credit bureaus, including information about your credit worthiness and your credit history

We may disclose your personal information to the following types of unaffiliated third parties:

- ❖ Financial service providers, such as companies engaged in providing home mortgages, reverse mortgages, or home equity loans;
- ❖ Other service providers with whom we may coordinate efforts in order to make efficient use of resources, such as SEVCA and CAPSTONE (Weatherization), VHCB Lead Abatement,

VT Center for Independent Living, Rural Development USDA or other nonprofit community resources.

- ❖ Other third parties when the information is provided to help complete a transaction initiated by you, such as reporting a payoff on a loan, or to otherwise administer our business, and Other third parties who are involved in program review, auditing, research, or oversight purposes.

We may disclose personal information about you to third parties as permitted by law, such as auditors in connection with a financial audit of us, to government entities, in response to subpoenas, and to credit bureaus.

In material intended for public distribution, such as newspaper articles, Windham & Windsor Housing Trust and Downstreet publications, press releases, or reports to funding sources, it is sometimes useful to illustrate our services by highlighting our work with a family or individual. In those cases, we will specifically seek your permission to use any personal information.

### **Medical Information**

We will not use or share personally identifiable medical information about you for any purpose other than that which is authorized by you.

### **Protecting the Confidentiality of Your Personal Information**

All Windham & Windsor Housing Trust and Downstreet employees are required to use strict standards of care regarding the confidentiality of your personal information as outlined in Personnel Policies. Employees not adhering to our policies are subject to disciplinary action. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. Our safeguards comply with federal regulations to guard your personal information.

### **Non-discrimination and NMLS**

The Green Mountain Home Repair Program, Windham & Windsor Housing Trust and Downstreet are Equal Lending programs. Our NMLS # is 187229

### **If You Want More Information**

If you have any questions regarding our Privacy Policy, please contact the Director of the HomeOwnership Center at (802) 246-2111 or write to Windham & Windsor Housing Trust, 68 Birge Street, Brattleboro VT 05301



## I. Authorization & Acknowledgements

**By signing below, the homeowner(s) agree to the following policies and authorize the following:**

I/we understand that the Green Mountain Home Repair Program (GMHR)'s Home Repair Specialist will determine the scope of work to be performed on the home.

I/we understand that in accepting and signing off on the scope of work, we agree to accept the scope of work as written by the GMHR Home Repair Specialist.

My/our signature authorizes the release of financial information to the Green Mountain Home Repair Program, any credit reporting agency or any mortgage lender which I have supplied in connection with obtaining a mortgage loan. It also authorizes the W&WHT/ Downstreet Housing & Community Development Inc. to share information with VCIL, USDA, SEVCA, CAPSTONE and the Loan Review Committee for the purpose of evaluating the rehab loan application submitted to our program. This information includes, but is not limited to: income verification of all family members, credit report, debts, or information on the property verifying that you are the owner of record, verification that your mortgage and taxes are current, verification that you have homeowners insurance in force. Authorization is further granted to use a photostatic reproduction of this form if required to obtain any information necessary to complete my loan file.

As an applicant for a loan from the Green Mountain Home Repair Program that, should I/we have difficulty in paying a mortgage, I/we have the option of contacting the HomeOwnership Center for assistance in working with my lender to prevent the loss of my home. I am also aware that if I fail to make my monthly mortgage payment within 16 days of the payment due date, the servicer of my mortgage loan may refer me to the W&WHT or Downstreet HomeOwnership Center for help.

I/we hereby authorize the loan servicer(s) or assigned attorney to release certain information related to the servicer's own credit experience with me/us to the W&WHT and Downstreet Housing & Community Development.

Authorization is further granted to use data from this project that reflects contributions of incentives, technical assistance, or other assistance from Efficiency Vermont.

I/we authorize the Green Mountain Home Repair Program /Windham & Windsor Housing Trust (W&WHT) (Downstreet) Rehab Specialist(s) to perform any/all necessary inspection(s) required to prepare the scope of work recommendation estimate(s) associated with this application, to determine the loan amount I/we may be eligible to apply for.

I/we understand that GMHR is funded with public funds and is required to meet the following government regulations:

- Housing Quality Standards established by the U.S. Department of Housing and Urban Development (HUD);
- Local Health and Safety Codes, as required by the local planning and zoning office; and
- If a home is on or is eligible for the State and/or National Register of Historic Places, all rehabilitation must comply with the Secretary of the Interior's Standards for Rehabilitation.

I/we understand that the GMHR will follow these procedures:

- If there are children under six (6) years old or pregnant women living in the home, a lead-based paint test will be conducted. If lead-based paint is present, all rehab work will be conducted in a lead-safe manner and lead abatement activities may be included in the scope of work and will be paid for by the homeowners if no grant funding is available. The hazard will be defined by the children's blood-lead levels, as defined by the Vermont State Department of Health;
- An energy audit will be strongly recommended unless the scope of work does not involve the interior living space;
- A priority repair scale will be used to address the most serious problems (mechanical and structural systems) before including less severe conditions in the scope of work.

<b>Applicant One:</b>		<b>Applicant Two:</b>	
Name (printed)	_____	Name (printed)	_____
Signature	_____	Signature	_____
Social Security #	_____	Social Security #	_____
Date signed	_____	Date signed	_____