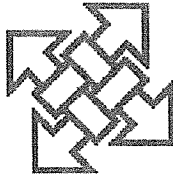


Community Connection



Of Northeast Oregon, Inc.
Baker, Grant, Union and Wallowa Counties

Community Action Agency
Aging and Disability Resource Connection (ADRC)
Area Agency on Aging (Dist. 13)
Housing Counseling Agency
Public Transit Provider
Youth Programs

Re" Housing Rehabilitation Loan Application

Rehab Applicant,

To help us proceed with your loan application quickly, please make copies of the following items checked below and return to Community Connection of Northeast Oregon, Inc., along with the application.

- ✓ Copy of tax return (2018 or 2019) with W-2's (If applicable)
- ✓ Pay Stubs (last three months) or pay stub with YTD earnings if applicable
- ✓ Verification of Social Security, Workers Compensation, Child Support or Other Income
- ✓ Most recent statements for checking and savings accounts
- ✓ County property tax statement showing value of house and land
- ✓ Verification of the amount of fire insurance
- ✓ Verification of amount owed on home
- ✓ Credit Report (Your bank can provide you with this)
- ✓ Written statement from a local bank stating that you would not qualify for a conventional loan
- ✓ Other (if you state that you have other income please have verification)

Enclosed is a copy of the Housing Rehabilitation Loan Policies. If you have any questions concerning the above items, be sure to call us at (541) 963-3186 or 1-(800) 838-3186. We can even come to you home and help you with your application if you need.

Sincerely,

Kale Elmer
Rehab/Weatherization Auditor/Inspector

**HOUSING REHABILITATION LOAN PROGRAM APPLICATION
HOUSEHOLD INFORMATION**

RACE:

WHITE___ AMERICAN INDIAN___ OR ALASKA NATIVE___ ASIAN___ AFRICAN AMERICAN___
NATIVE HAWAIIAN___ PACIFIC ISLANDER___ OTHER___

ETHNICITY: HISPANIC OR LATINO___ NOT HISPANIC OR LATINO

WX ELIGIBILITY___ ELDERLY APPLICATION___ RECEIVED LIHEAP___ PERSON WITH DISABILITY___
FEMAIL HEAD OF HOUSEHOLD___

APPLICANT (S) _____ PHONE # _____

PROPERTY ADDRESS _____

MAILING ADDRESS (IF DIFFERENT) _____

HOUSEHOLD MEMBERS NAME	SOCIAL SECURITY NUMBER	AGE
1		
2		
3		
4		
5		
6		

PROPERTY INFORMATION

TAX ACCOUNT # _____	LEGAL DESCRIPTION _____	YEAR BUILT _____
LENDER _____	FIRE INSURANCE COMPANY/AMOUNT _____	
COUNTY MARKET/APPRaised VALUE _____		
FIRST MORTGAGE/LEIN _____		
SECOND MORTGAGE/LEIN _____		
OTHER LEINS/JUDGEMENTS _____		
TOTAL LEINS _____		
PROPERTY EQUITY _____		
PROPOSED REHAB LOAN _____		
EQUITY AFTER REHAB LOAN _____		

THE APPLICANT CERTIFIES THAT ALL INFORMATION IN THE APPLICATION AND ALL INFORMATION FURNISHED IN SUPPORT OF THIS APPLICATION, IS GIVEN FOR THE PURPOSE OF OBTAINING A HOUSING REHABILITATION LOAN, UNDER A FINANCIAL ASSISTANCE PROGRAM DEVELOPED BY THE LENDER WITH FUNDS PROVIDED UNDER THE HOUSING AND COMMUNITY DEVELOPMENT ACT OF 1974, AS AMENDED, AND IS TRUE AND COMPLETE TO THE BEST OF THE APPLICANTS KNOWLEDGE AND BELIEF.

THE APPLICANT FURTHER CERTIFIES THAT HE/SHE IS NOW THE OWNER OF THE PROPERTY DESCRIBED IN THIS APPLICATION, AND THAT THE REHABILITATION LOAN PROCEEDS WILL BE USED ONLY FOR WORK AND MATERIALS ALLOWABLE UNDER AND AUTHORIZED BY THE HOUSING REHABILITATION LOAN PROGRAM FOR THE PROPERTY DESCRIBED IN THIS APPLICATION. IF THE APPROVING OFFICER DETERMINES THAT THE REHABILITATION LOAN PROCEEDS WILL NOT OR CANNOT BE USED FOR THE PURPOSES DESCRIBED HERIN, THE APPLICANT ACKNOWLEDGES THAT HE/SHE SHALL HAVE NO FURTHER INTEREST, RIGHT, OR CLAIM TO THE LOAN PROCEEDS.

THE APPLICANT COVENANTS AND AGREES THAT HE/SHE WILL COMPLY WITH ALL REQUIREMENTS IMPOSED BY OR PURSUANT TO REGULATIONS OF THE SECRETARY OF HOUSING AND URBAN DEVELOPMENT EFFECTUATING TITLE VI OF THE CIVIL RIGHTS ACT OF 1974 (78 STAT .252). THE APPLICANT AGREES NOT TO DISCRIMINATE UPON THE BASIS OF PROPERTY REHABILITATED WITH THE ASSISTANCE OF THIS PROGRAM. THE LENDER SHALL BE DEEMED TO BE A BENEFICIARY OF THESE PROVISIONS BOTH FOR AND IN ITS OWN RIGHT AND ALSO FOR THE PURPOSE OF PROTECTING THE INTEREST OF THE COMMUNITY AND OTHER PARTIES, PUBLIC OR PRIVATE, IN WHOSE FAVOR OR FOR WHOSE BENEFIT THESE PROVISIONS, TO MAINTAIN ANY ACTIONS OR SUITS AT LAW OR IN EQUITY OR ANY OTHER PROPER PROCEEDINGS TO ENFORCE THE CURING OF SUCH BREACH.

VERIFICATION OF ANY OF THE INFORMATION CONTAINED IN THE APPLICATION MAY BE OBTAINED FROM ANY SOURCE NAMED HEREIN. APPLICANT CONSENTS LENDER OBTAINING A CREDIT REPORT FOR THE PURPOSES DESCRIBED IN THE LENDER'S REHABILITATION LOAN PROGRAM POLICIES.

APPLICANT FURTHER COVENANTS AND AGREES TO MAKE, EXECUTE AND DELIVER TO THE LENDER A PROMISSORY NOTE AND TRUST DEED SECURING REPAYMENT OF THIS LOAN UPON COMPLETION OF THE PROJECT OR AT SUCH A TIME AS THE LENDER MAY REQUIRE.

OWNER EXPRESSLY AGREES TO INDEMNIFY THE LENDER AND TO HOLD IT HARMLESS FROM ANY AND ALL LAWFUL CLAIMS RESULTING FROM FALSE, OR FRAUDULENT STATEMENTS, ERRORS, OMISSIONS, REPRESENTATIONS, OR DOCUMENTS SUBMITTED WITH THIS APPLICATION.

Community Connection of Northeast Oregon, Inc. (CCNO)

Basic steps of a Housing Rehabilitation Loan Project

A typical loan project can take 4 to 6 months. Difficulty in finding contractors can inflate this timeline.

1. Client completes full application.
2. CCNO reviews application and orders a title report and floodplain check.
3. CCNO approves or denies application and notifies client.
 - a. For denied applications client may work to remedy deficiencies in application and resubmit updated documentation.
4. CCNO schedules an audit of the home to determine what repairs are need as well as perform environmental review of home. A 30 day wait for historic review of older homes is likely.
5. CCNO staff write up bid list and review with client.
6. Client is given bid list and will obtain bids for the entire project by at least three general contractors. (Each contractor should bid all items included in the list even when subcontractors will be needed to complete items such as electrical and plumbing repairs.)
7. Contractors will write their bid amount on the original bid forms provided by the client and return completed bids to client or CCNO.
8. Client and CCNO review bids and client chooses a contractor from the obtained bids. CCNO and the client can finalize the repair list at this meeting. (When contractor bids come in above the maximum loan amount, non-critical repair items will be removed from the list to allow the project to move forward.)
9. CCNO, client and contractor sit down together to sign contract and loan documents.
10. CCNO records loan document with the county clerk's office local to the client.
11. Work may begin after three full business days following the loan signing. NO WORK PRIOR TO THIS DATE WILL BE REIMBURSED OR FUNDED WITH LOAN FUNDS.
12. Contractor completes work and requests payment via CCNO forms. This form must be signed by the contractor and the client.
13. CCNO inspects completed work and pays contractor.
14. Contractor signs warranty and lien waiver prior to receiving final payment.
15. Client signs acceptance of improvements document.

- Keep this document to help you navigate our loan process -

COMMUNITY CONNECTION OF NORTHEAST OREGON, INC.
2802 ADAMS AVENUE
La Grande, Oregon 97850
(541) 963-3186 or Fax: (541) 963-3187

Insurance Company: _____

Agent's Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

I, _____, have applied for housing rehabilitation funds from Community Connection of Northeast Oregon, Inc., or one of the agencies they represent. In order for them to process my application, it is necessary that I verify fire and hazard insurance coverage of my property. For this purpose, I hereby authorize you to furnish verification if current coverage and the expiration of said coverage.

Your verification of this information, together with and other information that may be of assistance in rendering a decision, is for the confidential use of this Public Body.

Signature of Applicant

Date

Property Address

Return to: Community Connection Northeast Oregon, Inc.
2802 Adams Avenue
La Grande, Oregon 97850

Fire Insurance Company _____

Insurance policy coverage dates: _____

If this document has been signed by the lender below, then the loan is approved or already in place. At this time, we ask you to add Community Connection of Northeast Oregon, Inc. as a "Mortgagee", and state the amount of coverage on the dwelling and expiration date.

We request that you send the updated policy to Community Connection of Northeast Oregon, Inc. annually. It is agreed by the applicant and required by the trust deed for this loan that the dwelling be covered by fire insurance for the duration of the loan.

Thank you.

Lender Representative Signature

Title

Date