## West End Housing Improvement Fund Application



Seven Hills Neighborhood Houses: 901 Findlay St. Cincinnati, Ohio 45214

Contact: Tia Brown Phone: 513-407-5362 Email:tia.brown@7hillsnh.com

West End Housing Improvement Funds (HIF) will be used to support the immediate housing needs of low and moderate income residents in the West End.

- -HIF Funds will initially be used for preservation and creation of affordable homeownership and rental housing opportunities, including but not limited to assisting residents with code enforcement orders or citations. Future HIF funds will be used to assist residents with down-payment and rental assistance, legal representation, and landlords for a resident's rental assistance, if feasible, such funds should be provided on the condition that the landlord will agree to keep the rents at an affordable rate (as defined by HUD standards) and/or continue to accept Section 8 subsidies at the property for at least 10 years.
- -Due to the limited amount of funds, appropriate projects must cost \$5,000 or less. Any request considered that is estimated to be in excess of \$10,000 will be discussed with the Port before approving such request.
- -Funds shall be available to individuals who have exhausted other resources that may be available to them. Other resources include: Home Ownership Center, People Working Cooperatively, Habitat Veteran funds and the Harbor Program.

## Requirements to apply for funds:

West End Resident

Income **below** 80% Area Median Income (AMI)

Signed and dated application

Income Verification (paystubs & recent 1040 (Tax return)

Copy of Mortgage Statement

Copy of Tax Bill (If applicable)

Copy of one Identification Doc (Birth Certificate, Social Security Card, Picture I.D., etc.)

Persons in Household

1	\$45,500
2	\$52,050
3	\$58,500
4	\$65,050
5	\$70,300
6	\$75,500
7	\$80,700
8	\$85,900

Add \$4,320 for each person over 8

Seven Hills Neighborhood Houses 901 Findlay Street 513-407-5362 www.7hillsnh.com

## **Housing and Financial Resources:**

Brighton Center- Financial Class Pamela Willis- Office: 859- 491-8303 ext.2323 pwillis@brightoncenter.com

Legal Aid- Living Will Volunteer Lawyers Program- 513-241-9400

People Working Cooperatively- Home Safety Assistance 513-351-7921

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Name:		
Phone:	2 <sub>nd</sub> Phone:	
Email:		
Address:		
Today's Date:	Date Issue Began: _	
Type of assistance needed? Home Repair Funds		
Other (i.e. Mortgage Payment, Pr	operty Tax, Utility Bill, Renta	l Repair Funds):
Number of people in household:		
How long have you lived in your prop	perty?	
Current source(s) of income:		
What is the cost of solving your hous		
*If known, please provide proof/example		work
Do you have City Citations on your p	roperty?	
Yes No		
Have you applied for any other funding		
Yes No If Yes, where	did you apply?	
Have you spent your own money on	this issue in the past?	
Yes No If Yes, how mu	uch was spent?	
Over the age of 50?YesNo		
Are you a Veteran, married to a Vete	eran, widow or widower of a	√eteran?
Yes No		. 0.0.
Applicant Certification:		
I, reque	st one time assistance from the	e West End Housing Improvement
Fund to help pay for the housing related		
information on this application may result		- · · · · · · · · · · · · · · · · · · ·
West End Housing Improvement Fund, I the housing specialist to verify all informations.		
this application to determine eligibility an		ising review committee to review
Applicant's Signature:		Date:
Received By:		

Contractor/ Vendor Information: STAI	FF USE ONLY				
Legal Name of Vendor: (ex. Contractor/Utility Company)	Contact person:				
Payment payable to:	Mailing address:				
Account:					
	Email address:				
	Phone number:				
Administrative Application Check	list: ( Completed by Seven Hills Neighborhood Houses)				
☐ Signed and dated application					
☐ Income Verification (paystubs	, W-2s etc.)				
<ul><li>Copy of <u>one</u> Identification Dod etc.)</li></ul>	cument (Birth Certificate, Social Security Card, Picture I.D.				
Copy of Eviction Notice					
Copy of lease or rental agreer	ment				
□ Copy of Mortgage Statement					
<ul> <li>Applicant connected to Bright</li> </ul>	on Center to enroll in Free Financial Class				
□ Applicant connected to Legal	Applicant connected to Legal Aid to obtain Living Will (HIF assistance requirement)				

☐ Applicant connected to People Working Cooperatively for home safety assistance