

HAMBURG COMMUNITY DEVELOPMENT

6100 South Park Avenue * Hamburg * New York * 14075

(716) 648 - 6216 * www.townofhamburgny.gov/195/community-development

Director: Christopher Hull * Assistant Director: Timothy J. Regan

Hamburg Town Supervisor: Randall A. Hoak

Council Members: Frank M. Bogulski * Megan A. Comerford * Elizabeth C. Farrell - Lorentz * Daniel M. Kozub



2024 Program Year

Mobile Home Renovation Loan Program Application

Thank you for your interest in the **Town of Hamburg's Mobile Home Renovation Loan Program**. We are pleased to include the attached program application packet. Should you decide to apply for this program, fully complete the enclosed application and compile the required income verification documents pertaining to your situation as listed on **(Exhibit "A")**. Once you have completed the application and have compiled all of the required income documents, please call our office at 648-6216 so we can arrange a meeting with you to go over important items you will need to know about this program, including our approval process, inspection procedures, contractor selection and any waiting list that may be in place for program funding.

This owner-occupied, **Mobile Home Renovation Loan Program** is offered by the Town of Hamburg through its Department of Community Development and is funded by the United States Department of Housing and Urban Development (HUD) through the town's Community Development Block Grant (CDBG) program. Funding for this program changes each year and may not be available when you apply. If funding is not available, our office will initiate a waiting list for entry into this program. Any waiting list for program funding will be based upon priority improvements and income status. If you are funded through this program, all contracts for renovation work to be completed will be between you and the contractor/worker you select to complete the work approved through this program. In addition, no work or activity can be initiated at your dwelling prior to authorization by the Department of Community Development. As a point of information, eligible contractors/workers are not assigned nor recommended by the Town of Hamburg or the Department of Community Development. Finally, when funded, our program works very efficiently and allows for approved repairs to be completed at your dwelling, which in turn allows you/your family to live within a decent, safe, and improved environment.

Income Eligibility Schedule as of May 1, 2024 (subject to change at any time by HUD)

# of Persons in Home	Max Income for a 2% Loan
1	\$54,250
2	\$62,000
3	\$69,750
4	\$77,500
5	\$83,700
6	\$89,900
7	\$96,100
8 or more	\$102,300

Eligible Improvements (subject to department approval)

**Electrical replacement
Plumbing replacement
Furnace replacement
Roofing/Window replacement
Skirting**

This loan program has been successful over the years because your loan payments figuratively go right back into a neighbor's mobile home loan. Please read this application packet carefully, if you have any questions or concerns about this program, please contact us at 648-6216. We look forward to working with you!

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Town of Hamburg Mobile Home Renovation Loan Application

1) APPLICANT'S NAME(S) (AS ON TITLE TO MOBILE HOME)

2) ADDRESS OF PROPERTY:

E-MAIL ADDRESS:

3) PHONE NUMBERS: (CELL) _____ (WORK) _____
(HOME) _____ (WORK) _____

4) SOCIAL SECURITY #: _____ (We keep this confidential)
_____ (We keep this confidential)

5) NAME(S) & AGE(S) OF ALL PERSONS WHO RESIDE AT THE ABOVE ADDRESS:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6) DO YOU CURRENTLY RESIDE AT THIS LOCATION? YES [] NO []

7) HOW LONG HAVE YOU OWNED THE MOBILE HOME? _____

7a) DO YOU HAVE THE TITLE? YES () NO ()

7b) WHAT YEAR WAS THE HOME MANUFACTURED? _____

8) IS YOUR MOBILE HOME EASILY RELOCATED? YES [] NO []

8a) IS THERE A TRAILER HITCH ON THE MOBILE HOME ITSELF? YES [] NO []

9) EMPLOYMENT RECORD:

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

EMPLOYER'S NAME: _____

EMPLOYER'S ADDRESS: _____

10) WHAT RENOVATION MEASURES ARE YOU APPLYING FOR?:

11) GROSS ANNUAL INCOME FOR HOUSEHOLD: \$ _____

See Exhibit "A" for required income documentation!

12) TOTAL NUMBER OF PERSONS RESIDING IN HOUSEHOLD: _____

CONFIDENTIAL FINANCIAL STATUS

APPLICANT NAME(S): _____

ADDRESS: _____

REPAIRS COMPLETED OVER THE PAST 3 YEARS: _____

TOTAL GROSS MONTHLY INCOME FOR ENTIRE HOUSEHOLD: \$ _____

LIABILITIES

MORTGAGE PAYMENTS: [] YES [] NO CURRENT BALANCE: _____

MORTGAGEE: _____ [] CONVENTIONAL [] PRIVATE

MONTHLY LOT RENT PAYMENTS: \$ _____

PAYMENT STATUS [] CURRENT [] DEFAULT # MONTHS IN DEFAULT: _____

Monthly Bills Owed:

Payee: _____	Amount: _____
Payee: _____	Amount: _____
Payee: _____	Amount: _____
Payee: _____	Amount: _____
Payee: _____	Amount: _____

UTILITY BILLS:

Heating (Source): [] Gas [] Electric \$ _____ Monthly Average

Electric: \$ _____ Monthly Average

TV/Net: \$ _____ Monthly Average

Phone/Cell: \$ _____ Monthly Average

Others _____ \$ _____ Monthly Average

_____ \$ _____ Monthly Average

HOMEOWNERS INSURANCE: [] YES [] NO \$ _____ PER YEAR.

Provide a copy of your policy!

SEE EXHIBIT "A" FOR THE REQUIRED INCOME VERIFICATION DOCUMENTS (COPIES ONLY)

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Town of Hamburg

Mobile Home Renovation Loan Program "Certifications"

- 1) I hereby certify that I/We am/are the owner(s) and occupant(s) of the mobile home to be included within the Town of Hamburg Mobile Home Renovation Loan Program. To the best of my knowledge, all of the information provided above is true and accurate. I agree to cooperate with the Town of Hamburg Department of Community Development which is administering this program and to comply with their specified rules and procedures.
- 2) I understand that any contract for renovation work paid for in whole or in part by a Mobile Home Renovation Loan from this program will be between the contractor(s) and myself/ourselves, and that I should not sign any contract for work under this program until authorized to do so by the Department of Community Development.
- 3) I also understand that the Town of Hamburg and the United States Department of Housing and Urban Development are not RESPONSIBLE or LIABLE for any breach of contract, faulty workmanship, accident liability, or damage which might arise from my relationship with the contractor through this program.
- 4) The above information is true and accurate to the best of my knowledge. I am aware that Section 1001 of Title 18 of the United States code makes it a criminal offense to make willful false statements or misrepresentations to any department or agency of the United States as to matters within its jurisdiction. In addition, I also certify that all information provided in this program application and all financial information provided to the Town of Hamburg is true and accurate. If upon further review, information that was provided to the Town of Hamburg for program purposes is found to be false, I understand that criminal proceedings will be commenced.
- 5) The Town of Hamburg and the United States Department of Housing and Urban Development are NOT responsible or liable for the installation, performance, workmanship, liability, or any damages which might arise from my participation in this program. Upkeep of the device(s) installed through my participation with this program is my/our responsibility. My/Our signature(s) below indicates my understanding of this statement.
- 6) In addition, I understand that any contract for work to be completed at my/our home through a Town of Hamburg Housing Program is between the Contractor I/we have selected and myself/ourselves. The Town of Hamburg, the County of Erie, the State of New York or the United States Department of Housing and Urban Development and their employees and agents assume no liability or responsibility for the cost of repairing or replacing any defects and/or deficiencies, either current or arising in the future or for any property damage or any injury, whether it be bodily or mentally of any nature, resulting from my/our participation with the Town of Hamburg Housing Program pertaining to Lead Based Paint.

Signature(s): _____

Date: _____

Signature(s): _____

Date: _____

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"AUTHORIZATION TO RECEIVE AND VERIFY CREDIT INFORMATION"

I\We hereby consent to the sharing among you of any credit information which we obtain for the purpose of processing my\our application for the Town of Hamburg Mobile Home Renovation Loan Program. I\We waive any rights which I\We may have to keep that information confidential so long as it is shared only among you for determining my eligibility to receive a Loan through this program. I\We also agree to hold harmless the Town of Hamburg from any claims for damages for use of that information in the manner provided by this waiver. Notice to Applicant:

By signing this form you consent to lenders sharing credit information about you to process this application.

SIGNATURE(S): _____

DATE: _____

"AUTHORIZATION TO RECEIVE AND VERIFY EMPLOYMENT INFORMATION"

I\We hereby consent to the sharing among you of any employment information which we obtain for the purpose of processing my\our application for the Town of Hamburg Mobile Home Renovation Loan Program. I\We waive any rights which I\We may have to keep that information confidential so long as it is shared only among you for determining my eligibility to receive a Loan through this program. I\We also agree to hold harmless the Town of Hamburg from any claims for damages for use of that information in the manner provided by this waiver. Notice to Applicant:

By signing this form you consent to employers sharing employment information about you to process this application.

SIGNATURE(S): _____

DATE: _____

"AUTHORIZATION OF INSPECTION"

I hereby grant the **Town of Hamburg Department of Community Development** permission to inspect and be on my property located at:

for the purpose of evaluating program need and for all other program procedures and purposes including the inspection for Lead Based Paint. I also agree to hold harmless the Town of Hamburg from any claims for damages for access to my property provided through this program.

SIGNATURE(S): _____

DATE: _____

