

City of Balaton SCDP Rental Rehabilitation Grant Funding

Dear Balaton, Rental Property Owner,

As you may have heard, the City of Balaton has been awarded a Small Cities Development Program (SCDP) grant for rental properties from the Minnesota Department of Employment and Economic Development.

Based on our available information, we understand that you are a rental property owner interested in receiving rental rehabilitation grant funding. If that is not correct, please get in touch with our office immediately for further directions. If you are an interested rental property owner, please follow the below directions.

1. Complete & sign the enclosed Rental Rehabilitation SCDP Application.
2. Have EACH tenant/Unit complete and sign the enclosed Tenant Survey. **Please note:** If more than one tenant survey is needed, you may make additional copies OR request more from our office.
3. Provide all other applicable documentation described on the enclosed checklist and return the completed packet to our office by **Friday, November 3rd, 2023, or ASAP.**

At this point, the funds are first come, first serve, so we cannot guarantee that the appropriate funds for your potential project will always be available. We will move on to the next applicant if we do not receive your application and supporting documents by the above deadline.

If you need more time to meet this deadline, please call Christy Lundberg at 507-694-1552.

We would like you to proceed with your application as soon as possible.

If you have any questions or need assistance filling out this information, please do not hesitate to contact me at (507) 694-1552 or by email at christy@dsi-services.com.

Respectively,



Christy Lundberg
Services Coordinator



Small Cities Development Program Fact Sheet

Rental Property Rehabilitation Program

Eligibility Requirements:

- **Ownership** - The applicant must own or be purchasing a rental property within the designated city. **Single-wide Mobile Homes, Life Estates, Contract for Deed, and Trusts are not eligible.** SCDP funds cannot be used for these types of properties or to rehabilitate any residential structure that is within a 100-year flood plain.
- **Eligible Repairs** - Repairs that are permanent and necessary are eligible. Examples include roofing, foundations, siding, heating units, electrical, plumbing, and other health and safety items. Additions are not allowed.
- **Real Estate Taxes** – The owner must be current with property taxes.
- **Insurance** – The owner must have property insurance for the loan's full term.
- **Program Financing** - The maximum Housing Repair assistance is \$25,000 for a single-family home and up to \$12,500 per unit with a building of 2 or more units.
 - 70% of the financing will be structured as a 0% deferred loan for a 5-year term. 100% deferred after 5 years, provided the rental property owner follows income and rent guidelines for 5 years. The balance is reduced by 20% each year.
 - 30% - Owner match.
- **Income** – The program does have income guidelines for tenants of your property. At least 51% of tenants must meet your County's 80% area median income limits set by HUD.
- **Rent Guidelines:** Property owners must maintain affordable rents during the term of the SCDP financing. Affordable rents are defined as HUD's Section 8 Fair Market Rents or another acceptable standard. To be eligible for funding, the rent charged to tenants plus the utility allowances for tenant-paid utilities should not exceed HUD allowances.

Housing Repair Process: The program will follow the guidelines as set forth below.

- **Application** – The applicant will need to complete a full application for the program that requires proof of property ownership, verification of tenant income, and other eligibility requirements.

- **Application Ranking** – All applications submitted that are complete, signed, and accurate, including all the requested supporting documents, will be ranked as per the date they arrive. Property owners that participated in the survey process and requested to be on the waiting list will have the first chance to apply for the funds. After 30 days, the applications will open up to targeted areas. DSI will review applicants for verification of eligibility based on the ranking system. All property owners will be served on a first-come, first-served basis.
- **Property Inspection** – DSI will inspect the property, identify any housing problems, and work with the applicant to determine what repairs should be done. **LEAD RULES AND REGULATIONS DO APPLY.**
- **Work Write-Up** - The DSI Housing Inspector will develop specifications on the work to be completed and how the work should be done. The property owner will select the contractor of their choice or from a list of contractors provided by DSI they would like to bid on their project, and bid packets will be distributed to these contractors.
- **Bid Awards** – DSI will meet with the owner and review the bids after receipt of bids from the contractor. The owner will then accept or reject the bids which have been submitted.
- **Repayment Agreement** - The owner shall enter into a repayment agreement with the City to accept the conditions of the loan. The repayment agreement will be filed at the County Recorder's Office.
- **Proceed to Work** - The DSI inspector will notify the contractor via letter that work may begin at the owner's property. The contractor will be required to secure any necessary building permits.
- **Payments** - Payments to contractors can be made on a full or partial basis as each contractor's work has been completed. To receive payment, the contractor must submit a lien waiver, a billing statement, and a signed completion certificate (all furnished). To make payment, the DSI housing inspector must inspect the property, and the property owner must give signed permission to pay the contractor.
- **Project Completion** – A final inspection and lead clearance assessment will be done upon completion, and the project will be closed.

Timeline:

- The timeline to complete projects usually is 30 months, depending on the project size and scope.

Resources:

- **DEED Small Cities Development Program**



Required Documentation Checklist For Rental Housing Rehabilitation Applications

Please check the box to the left of the form to confirm that you have completed the following:

- I understand: The property must be operated as rental housing to be eligible for grant funds. Single-wide mobile homes, Life Estates, contracts for deeds, and trusts are not eligible.
- A copy of the deed to your property. To request a copy, please contact your County Recorder's Office.
- A copy of your current real estate tax statement.
- I understand: The property must have and maintain property insurance. To request a copy of your current property insurance policy (Declaration page only), please contact your insurance agent.
- A copy of your most recent Monthly Mortgage Statement, if applicable.
- Completed and signed Small Cities Development Program Rental Application
- Completed and signed Conflict of Interest Form – Included in the application packet.
- Completed and signed Renovate Right Brochure Sign-Off Form – Included in the application packet.
- Tenant Survey –All tenant households must complete a Tenant Survey. Income must be reported for anyone living in the home 18 or older receiving any form of payment.
- A picture of the front of your property. Please send the picture with your application or submit it via e-mail to christy@dsi-services.com.

- Properties that complete their income verifications can submit reports in place of tenant surveys that provide all necessary information.

If you need to mail original items to us, please note the originals, and we will make copies, and the sources will be sent back to you as quickly as possible.

Sincerely,

Items can be mailed – e-mailed to:
Christy Lundberg
Development Services, Inc.
402 N. Harold Street - PO Box 48
Ivanhoe, MN 56142
Ph: 507-694-1552
Cell: 507-530-1090
Email: christy@dsi-services.com

CONFLICT OF INTEREST

Have you or any member of your household been (during the last 12 months) an employee, consultant, officer, elected official, or appointed Official of this City or State of Minnesota?

___ Yes ___ No

If yes, describe:

Do you or have you had immediate family ties or a business relationship with any of the above-named member of your household (minus yourself as the named family member above)?

___ Yes ___ No

If yes, describe:

Note: If a conflict exists, it may be possible for the grantee and its agents to request an exception to the conflict from the funding agency.

Signature: _____ Date: _____

Signature: _____ Date: _____



EQUAL HOUSING OPPORTUNITY
We Do Business in Accordance with the Federal Fair Housing Law
(The Fair Housing Amendments Act of 1988)
Development Services Inc. is an equal opportunity provider and employee.

The Lead-Safe Certified Guide to Renovate Right

(EPA-740-K-10-001)- Revised September 2011

I hereby certify that I have received the publication information entitled "Renovate Right" found at <http://dsi-services.com/services/small-cities-development-program/> or <https://www.epa.gov/lead/renovate-right-important-lead-hazard-information-families-child-care-providers-and-schools> pamphlet and I have read and understood the information.

- If you prefer that a copy of the pamphlet be mailed to you, call Christy Lundberg at DSI Services Inc. at 507-694-1552.

Applicant's Signature

Date

Applicant's Printed Name

Joint Applicant's Signature

Date

Joint Applicant's Printed Name



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RENTAL REHABILITATION PROGRAM TENANT SURVEY

Name of Owner: _____ Name of Tenant: _____

Project Address: _____ Apartment Number: _____

Number of Bedrooms: _____

Data Privacy:

The information being collected is considered private and will not be available to the public. This information will be used only to determine eligibility for the owner to receive funds under the Rental Housing program. Not supplying the requested information may jeopardize the rehabilitation project.

This information is requested solely for the purpose of determining compliance with Federal civil rights law and your response will not affect consideration of your application.

Gender of Head of Household

- Male
 Female

Race/Ethnicity of Applicant (check one)

- White
 Black or African American
 Asian

Hispanic Ethnicity

- Yes No

Does any member of the household have disabilities?

- Yes No

If "Yes," describe the nature of the disabilities:

- American Indian/Alaskan Native
 Native Hawaiian/Other Pacific Islander
 American Indian/Alaskan Native & White
 Asian & White
 Black/African American & White
 American Indian/Alaskan Native & Black/African American
 Other Multi-Racial

List all occupants, their Annual gross income and source of income including Social Security, Wages, Pensions, Child Support or Alimony, SSI, General Assistance (except for foster care or student financial aid), Self-employment, Farm income, and Rental income: (For self-employed persons, farm and rental property income, use the appropriate line for "adjusted gross income" from the 1040 IRS Income Tax Return.)

Name	Age	Annual Gross Income	Source of Income
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Gross Annual Income		_____	

Initial Date of Lease: _____

Term of Lease: _____

Rent and Expenses:

Monthly Rent \$ _____

Will rent be increasing? Y/N If so, when and how much per month? _____

Average monthly expense for gas (heat, hot water, etc) if tenant paid: \$ _____

Average monthly expense for electricity if tenant paid: \$ _____

Average monthly expense for municipal water, if tenant paid: \$ _____

Average monthly expense for municipal sewer, if tenant paid: \$ _____

Average monthly expense for garbage, if tenant paid: \$ _____

Is Household currently receiving rental assistance? Yes No

Tenancy Information

Do you plan on moving sometime in the next year? Y/N

Please list any disabilities that anyone in the household may have that you would like the program to be aware of: _____

Lead Based Paint/General Information Notice Statement

I, _____, hereby certify that I have received the September 2011 Environmental Protection Agency publication entitled The Lead Safe Certified Guide to Renovate Right (EPA 740-K-10-001) and the General Information Notice for In-Place Tenants, and that I have read and understood the information.

I/we certify that all statements on this application are true and correct to the best of my/our knowledge.

I/we authorize program representatives and contractors with the right to enter the property and my unit to be improved for the purpose of the Rental Rehabilitation program and to take photographs of the property and unit before and after rehabilitation.

Signature of Tenant: _____

Date: _____

Signature of Co-Tenant: _____

Date: _____



Balaton - Rental Small Cities Development Program Application

Grant Number

Full Application

Return this application to:

Development Services, Inc.
ATTN: Christy Lundberg
P.O. Box 48 / 402 North Harold
Ivanhoe MN 56142

507-694-1552 Ph.
507-694-1525 Fax
E-mail: christy@dsi-services.com

Date Received by Development Services, Inc.:

Section A. Owner's Information.

Name of Owner	
Name of Spouse / Business Partner	
Owner's Address	Telephone (Day)
Street Address Where Rental Property Is Located	Telephone (Evening)

Have you, in years past, ever qualified for a Small City Grant? Yes No

Section B. Property Information.

- Year property was built? (best estimate) _____
- Is the property in a flood plain? Yes No
- Number of rental units in the building? _____ Units
- Number of vacant rental units in the building? _____ Units
- Is the rental property a:

<input type="checkbox"/>	Single-family house	<input type="checkbox"/>	Single-wide mobile home (not eligible)
<input type="checkbox"/>	Duplex	<input type="checkbox"/>	Manufactured home
<input type="checkbox"/>	Apartment building	<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	Mixed-use building (example, rental unit above a commercial building)		

Section C. Credit History.

- | | | |
|--|------------------------------|-----------------------------|
| Are there any outstanding judgments or liens against you? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have you been declared bankrupt within the past 36 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have you had any property foreclosed upon? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you a co-maker or endorser on a note? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you have any unpaid or back due property taxes? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you have any unpaid or back due city utility bills? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Section D. Ownership Information.

- Please check the box which best describes the ownership status of your rental unit(s):

<input type="checkbox"/>	Title holder. Property is owned free and clear.
<input type="checkbox"/>	Mortgage. Payments made to: _____ Name: _____ Address: _____
<input type="checkbox"/>	Contract for Deed. NOT ELIGIBLE
<input type="checkbox"/>	Life estate/Trust. NOT ELIGIBLE
- The building is owned by:

<input type="checkbox"/>	Myself, as a sole proprietor.
<input type="checkbox"/>	A partnership, with (name): _____
<input type="checkbox"/>	A corporation. Corporation President (name): _____
	Corporation Secretary (name): _____
- Please list any parties (besides yourself) who will need to co-sign legal documents:

Name: _____	Address _____
Name: _____	Address _____
Name: _____	Address _____
- How many units are designated for low to moderate income? _____
- Number of units occupied by at least one-person age 62 or older? _____

Section E. Renter Information.

Provide the following information for renters occupying the building at the time of this application.

Rent Roll spreadsheets that contain the same information may be attached. Use additional pages for more than 4 units.

	Unit #1	Unit #2	Unit #3	Unit #4
Tenant(s) Name				
Tenant moves In date				
Tenant(s) Income				
Number of bedrooms				
Tenant(s) monthly rent amount				
Utility Allowance (See Fact Sheet)				
Total Monthly rent plus utility allowance				
Proposed Rent per unit after rehabilitation				

- Property owners are responsible for verifying income to ensure that they meet the SCDP Procedural Guidelines. Property owners must also ensure that rent plus tenant-paid utility allowances are affordable based on the 80% rent limits. Failure to do so could result in repayment of the SCDP loan. 51% of the total units in the property must be occupied by tenants that report income(s), by household size, of equal to or less than 80% Area Median Income.

Utilities Paid by OWNER - Mark with "X" in the box below each item as applies, circle "Gas or Electric, etc."

HEATING	COOKING	OTHER	WATER	WATER, SEWER & TRASH	TENANT-supplied Appliances	OTHER	OTHER
Natural Gas	Natural Gas	ELECTRIC & COOLING	HEATING	SEWER & TRASH	Range/Microwave		
Bottle Gas/Propane	Bottle Gas/Propane	Other	Natural Gas	Water	Refrigerator		
Electric	Electric	Electric (Lights & Appliances)	Bottle Gas/Propane	Sewer			
Electric Heat Pump		Air	Electric Heat	Trash			
Oil			Pump				

If tenant paid, what is the total of the cost below that tenant households pay when averaged out on a monthly basis?

HEATING	COOKING	OTHER	WATER	WATER, SEWER & TRASH	TENANT-supplied Appliances	OTHER	OTHER
Natural Gas	Natural Gas	ELECTRIC & COOLING	HEATING	SEWER & TRASH	Range/Microwave		
Bottle Gas/Propane	Bottle Gas/Propane	Other	Natural Gas	Water	Refrigerator		
Electric	Electric	Electric (Lights & Appliances)	Bottle Gas/Propane	Sewer			
Electric Heat Pump		Air	Electric Heat	Trash			
Oil		Conditioning	Pump				
\$	\$	\$	\$	\$	\$	\$	\$

Section F. Repair Information.

Briefly describe the repairs which you believe your rental property needs. (The actual repairs will be determined by an inspection by the Housing Inspector, working together with you.)

1. Provide an Estimated number of units proposed for Rehabilitation. _____
2. List the Proposed Source(s) of owner match and any other funds that is needed to complete the project. _____

Section G. Notices to Applicant.

PRIVATE INFORMATION: The information requested in this application is classified as private data under the Minnesota Data Practices Act unless otherwise specified below. Under the provisions of this Act, we are hereby notifying you that:

- 1.) This information is being collected in order to determine if you qualify for rental repair assistance under the Small Cities Development Grant Program.
- 2.) You are not legally required to provide the information that is requested in this application, and you may refuse to do so. If you do provide the information that is requested, the Program Administrator will be able to determine your eligibility for rental repair assistance. If you do not provide the information, the Program Administrator will not be able to determine your eligibility, and you will not receive rental repair assistance.
- 3.) You have the right to see, receive copies of, and challenge the accuracy and completeness of any and all information relating to you that the Program Administrator has on file relating to your application.

4.) To determine your eligibility for rental repair assistance, or to deliver such assistance, information relating to your application may be made available to the staff of the Program Administrator (Development Services, Inc. of Ivanhoe, MN) and other sources of rental repair assistance which, with your permission, may be involved in the financing of repairs for your building.

5.) As enacted by the Minnesota State Legislature in 2003: The names and addresses of applicants for and recipients of benefits, aid, or assistance through programs administered by any political subdivision, state agency, or statewide system that are intended to assist with the purchase, rehabilitation, or other purposes related to housing or other real property are classified as public data on individuals. If an applicant or recipient is a corporation, the names and addresses of the officers of the corporation are public data on individuals. If an applicant or recipient is a partnership, the names and addresses of the partners are public data on individuals. The amount or value of benefits, aid, or assistance received is public data.

FALSE STATEMENTS: Any person who knowingly makes a false statement or misrepresentation in connection with this application shall be subject to a fine or imprisonment under provisions of the Minnesota Criminal Code, under provisions of the United States Criminal Code, and/or may be required to return all or part of the housing repair assistance provided under the terms of the Small Cities Development Program.

INSPECTION. An authorized representative of the City or its Small Cities Grant Program Rehabilitation Advisor (Development Services, Inc.) shall have the right to inspect the property to be rehabilitated at any time from the date of this application upon giving due notice to the occupant(s).

WATCH OUT FOR LEAD PAINT POISONING: Please read carefully: If your building was constructed before 1978, it may contain substantial amounts of lead-based paint. Lead-based paint is especially harmful to children under seven years of age. If lead-based paint is found in your building, steps may be taken to remove or cover the paint surfaces.

1.) Children get lead poisoning when they eat bits of paint that contain lead. If a child eats enough lead paint, his brain will be damaged. He may become mentally disabled or even die. Older houses often have layers of lead paint on the walls, ceilings, and woodwork. When the paint chips off or when the plaster breaks, there is real danger for babies and young children. Outdoors, lead paints, and primers may have been used in many places, such as walls, porches, and fire escapes. If you have seen your child putting pieces of paint or plaster in his mouth, you should take him to a doctor, clinic, or hospital as soon as you can. In the beginning stages of lead poisoning, a child may not seem really sick. Do not wait for signs of poisoning.

2.) A child might eat paint chips or chew on a painted railing of a windowsill while parents aren't around. Has your child been especially cranky? Is he eating very little? Does he throw up or have stomach aches often? These could be signs of lead poisoning. Take him to a doctor's office or to a clinic. A blood lead level screening test is advisable and available for children under seven years of age. Be sure to tell the rest of your family and people who babysit for you about the danger of lead.

3.) Look at your walls and ceilings and woodwork. Are there places where the paint is peeling? Get a broom or stiff brush and remove all loose pieces of paint from walls, woodwork, and ceilings. Sweep up all the pieces of paint and plaster. Put them in a paper bag, wrap them in newspaper, and put the package in the trash can. Always keep the floor clear of loose bits of paint and plaster. Children will pick loose paint off the walls, so be extra careful about keeping the lower parts of the walls free of loose paint. You can cover up at least the lower part of the walls by moving heavy furniture against them. If you want to know how to keep your child safe from lead poisoning, talk to your doctor, public health nurse, or social worker at the clinic or health department.

FAIR HOUSING: Every citizen of the United States is entitled to housing of their choice which they can afford. When you are buying or renting a home, a person may not deny you that home because of your race, color, creed, disability, religion, sex, or national origin, or because of your marital, familial, or public assistance status. It is illegal to: Refuse to sell, rent to, deal with, or negotiate with anyone because of their status; to discriminate in terms or conditions for buying or renting housing; to discriminate by advertising that housing is available only to persons of a certain race, color, religion, sex, or national origin; to deny that housing is available for inspection, sale, or rent when it really is available; to persuade owners to sell or rent housing by telling them that minority groups are moving into the neighborhood; to deny or make different terms or conditions for home loans by lenders, such as banks, savings & loan associations, and insurance companies; and to deny to anyone the use of or participation in any real estate services, such as

brokers' organizations, multiple listing services, or other facilities related to the selling or renting of housing.

DISPLACEMENT. Based on the requirements of the Small Cities Development Grant Program, the undersigned acknowledges and certifies that: (a.) No renter of the property to be rehabilitated will be involuntarily displaced from their dwelling due to the property owner's participation in the Rental Housing Repair Program; and (b.) The property owner shall minimize any activities that may result in the displacement of a renter. If a renter is forced to relocate due to construction activities, the property owner agrees to provide alternative housing for the affected renter and agrees to reimburse the displaced renter for allowable expenses under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (the "Uniform Act").

LABOR STANDARDS. Owners of buildings to be rehabilitated which contain eight (8) or more rental housing units must comply with the requirements of the **Davis-Bacon Act**, which requires that all persons working on the site be paid at an hourly rate not less than the minimum rate specified in the Department of Labor Wage Determination issued for a particular project.

RENTER'S INCOME STATUS. Based on requirements of the Small Cities Development Grant Program, the undersigned acknowledges and certifies that after completion of the building rehabilitation work, at least 51% of the units in the building must be occupied by low- and moderate-income (LMI) persons as defined by the U.S. Department of Housing & Urban Development (HUD) for a period of five (5) years. These LMI Income Guidelines are subject to periodic revision by HUD, and any such revisions shall be binding upon the property owner and shall supersede those in effect as of the date of this application, which currently are **2023 Lyon County Income Guidelines.**

1-person household	\$49,600 per year	5-person household	\$76,500 per year
2-person household	\$56,650 per year	6-person household	\$82,150 per year
3-person household	\$63,750 per year	7-person household	\$87,800 per year
4-person household	\$70,800 per year	8+ person household	\$93,500 per year

AFFORDABLE RENTS. Based on requirements of the Small Cities Development Grant Program, the undersigned acknowledges and certifies that the property owner will be required to enter into specific rental agreements to assure that rents are affordable to low- and moderate-income persons for a five (5) year period. Affordable rents are defined as those that do not exceed HUD Fair Rent limits for the County. The Rent limits may be amended from time to time. The current Rent Limits for Lyon County 2024 are:

Efficiency unit	\$613 per month	3-bedroom unit	\$1,275 per month
1-bedroom unit	\$715 per month	4-bedroom unit	\$1,514 per month
2-bedroom unit	\$905 per month		

RENT INCREASES. Existing rents shall not be increased for the term of the lease period, or until six months after completion of the building repairs, whichever is longer. Completion of repairs shall be evidenced by the "Completion Certificate and Acceptance of Work" form. At such time as a rent increase is permitted, the monthly rent (plus utilities) for the unit will not be increased to more than 30% of the LMI occupants' income.

AUTHORIZATION FOR RELEASE OF INFORMATION. I hereby authorize and give permission to any person, group, organization, government agency or department, bank, insurance company or agency, or financial institution to disclose to the administrators of the Rental Housing Rehabilitation Program any and all information which they may request concerning me and my financial affairs. I understand that any such information will be treated in a strictly confidential manner and will only be used to determine eligibility for housing repair assistance.

APPLICANT'S ACKNOWLEDGEMENT.

- 1.) I the undersigned, certify that:
 - (a.) Under penalty of law, the information provided in this application is true and correct to the best of my knowledge.
 - (b.) I have read, understand, and agree to the terms of the "Private Information," "False Statements," "Inspection," "Watch Out for Lead Paint Poisoning," "Fair Housing," "Displacement," "Labor Standards," "Renter's Income," "Affordable Rents," "Rent Increases," and "Authorization for Release of Information notices which are printed above.

- 2.) I understand that the City cannot at this point guarantee the actual amount of assistance, if any, which the dwelling I own may receive because this will depend on:
 - (a.) the household income eligibility of the occupants of the dwelling and rent limits.
 - (b.) a detailed inspection of the dwelling.
 - (c.) the types of repairs that are needed and allowable under the program's guidelines.
 - (d.) the cost of the repairs, based on bids.
 - (e.) the financial and structural feasibility of undertaking a repair job for the dwelling.

- 3.) I further understand that:
 - (a.) The grant program serves properties on a first-come-first-served basis.
 - (b.) Once I am approved for the program, and the bid documents for my dwelling are prepared and turned over to me, it becomes my responsibility to contact various contractors and obtain the necessary bids.
 - (c.) Projects that have all the necessary bids turned in ahead of other projects are placed under contract and move forward on that basis.
 - (d.) The program operates on a first-come-first-served basis, it is possible that the grant money may run out before all bids for the dwelling I own are received and before I make a decision to move forward and that, in that case, the dwelling I own will not receive any rental housing repair assistance.
- 4.) My signature also serves as my authorization for digital pictures or photos of my home to be taken by Development Services Inc. (DSI). I give permission for photographs of my home to be used for publications and public relations activities by DSI. This may include use in print and electronic media, social media (Facebook, Instagram, etc..) including the Internet (DSI website).

Applicant's Signature

Date

Spouse's Signature (If Applicable)

Date