



Hallandale Beach Community Redevelopment Agency

Senior NIP Mini Grant Program Application

Creation - April 22, 2019
Revised - May 18, 2020

SENIOR NIP MINI GRANT PROGRAM

Program Overview:

The purpose of the *Senior NIP Mini-Grant Program* is to assist seniors sixty-seven (67) years and older with financial assistance for exterior residential facade improvements in the redevelopment district for the purpose of improving property conditions and value and aiding in the elimination of slum and blight. The grant can also assist with interior repairs to mitigate life safety issues including removal of asbestos, mold, home barriers to the disabled and/or elderly or other life safety issues as determined by the Building or Code Compliance Officer

A property can be assisted twice every four years under this program.

Eligibility Requirements:

- The property must be located within the HBCRA district.
- Applicant must be sixty-seven (67) years of age or older.
- Residence must be an owner-occupied (homesteaded) single-family home.
- Applicant cannot be in bankruptcy (If an applicant filed bankruptcy and receive a discharge, the three-year waiting period is waived).
- Property cannot be in foreclosure or pending foreclosure proceeding. All property taxes and homeowners' insurance must be current in order to apply and must remain current while receiving assistance.
- Will accept application from applicants whose water bill is in the arrears as long as there's a payment plan, in place, and payments are made as per the payment plan.
- Participants must show proof of income and meet the household income requirements. Based on Gross Broward Median Income as outlined in Appendix I, applicants must be of moderate household income or below. Household size will be determined by the number of people an applicant declares and is able to provide documents that substantiate that claim. Documents must show proof of joint residency. This may include but is not limited to:
 - a) Tax returns indicating dependents
 - b) School registration
- Any and all projects involving work that has already commenced prior to the execution of a grant with the HBCRA will not be funded.
- The work must be completed by a licensed contractor. The HBCRA will not finance any improvements in which the applicant does the work, also known as sweat equity.
- Trailer Parks and cooperative units are not eligible for the Senior NIP Mini-Grant program.

Eligible Uses:

HBCRA funding assistance can be used for the following improvements:

- Repair or replacement of roof
- Impact windows and doors
- Walkway and driveway, including swale
- Repair or cleaning of exterior masonry or stucco
- Pressure cleaning
- Painting
- Landscaping

- Fencing
- Energy efficient air conditioning, water heater
- Termite removal
- Seawall repair or replacement
- Other exterior improvements not listed above may be considered on a case by case basis.

While this program is designed to perform exterior improvements, emergency interior repairs can also be included if they mitigate life safety issues including: Removal of asbestos, mold, home barriers to the disabled and/or elderly or other life safety issues as determined by the Building or Code Compliance Official.

Costs may include other work necessary to complete the project, including: Architectural, landscape architectural or engineering fees for the preparation of construction drawings, construction supervision, permits and inspection fees.

Terms:

Owner Occupied Properties: Under the Senior NIP Mini-Grant Program, the HBCRA will provide assistance of up to 15,000 for homesteaded residential properties.

The SMGP can be used in conjunction with the Paint the Town Program.

All improvements must be completed by a licensed contractor and must be completed within 120 days of loan execution.

Payments are made directly to the contractor on behalf of the applicant.

Fees:

There is no application fee for this program.

Required Documents

Application packets must include “copies” of all the following documentation:

- Property Deed
- Most recent Property Tax Bill from Broward County
- Homeowner Insurance, Windstorm Insurance
- Flood Insurance (if in designated flood zone)
- Proof of Occupancy (City Utility bill)
- Most recent mortgage statement showing current balance (if applicable) or mortgage satisfaction
- Recent bank statements for all accounts [checking, savings, etc. for the last three (3) months]
- Social Security Statement

Pension Distribution

Disability

- Contractor estimated price proposals for all work to be completed (at least two (2) for each improvement)

- Florida driver's license or Florida ID card

NOTE: Applications can be submitted online. Once received, the application will be reviewed within 10 business days to determine eligibility. Written notification will be sent to the applicant within the 10 business days. The HBCRA will not accept incomplete applications.

Submission of application is not a guarantee of funding. It is the responsibility of the applicant to READ AND UNDERSTAND all aspects of the program's rules/requirements and application.

NOTICE TO THIRD PARTIES: The HBCRA program application does not create any rights for any parties, including parties that performed work on the project. Nor shall issuance of grant/loan result in any obligation on the part of the HBCRA to any third party. The HBCRA is not required to verify that entities that have contracted with the applicant have been paid in full, or that such entities have paid any subcontractors in full. Applicant's warranty that all bills related to the project for which the applicant is directly responsible is sufficient assurance for the HBCRA to award grant/loan funding.

How did you hear about our program?

Internet Hallandale Happenings Comcast Other Forum _____

Hallandale Beach Community Redevelopment Agency

400 South Federal Highway, Hallandale Beach, Florida 33009

(954) 457-1422 | (954)-457-1303 | www.cohbcra.org

Senior NIP Mini Grant Program Application

Applicant:

Name: _____

Property Address: _____ Hallandale Beach, FL 33009

Mailing Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

Email Address: _____

Monthly Mortgage \$ _____ Living at this address since: _____ Date of Birth: _____

Social Security Number: _____ - _____ - _____ Male Female Household Size: _____

Marital Status: _____ Married _____ Separated _____ Unmarried (single, divorced, widow)

Income Source:

Alimony _____

Child support: _____

Social Security _____

Disability/Pension _____

Other (explain): _____

APPLICANT'S TOTAL MONTHLY INCOME: \$ _____

ALL OTHER HOUSEHOLD MEMBERS (Do not include Applicant and Co-Applicant on this page)

Name	Date of Birth	Relationship	Gross Annual Income

ASSETS (For Applicant, Co-Applicant and Other)

Bank accounts: Checking, Savings, Retirement, Certificates of Deposit, etc. Use additional pages if needed.

BALANCES

Type of account	Bank/Institution	Applicant	Co-Applicant	Other	TOTAL
Checking					
Savings					
Retirement					
Stocks					
Bonds					
Mutual Funds					
Other					
Vehicles, Boats					

TOTAL ASSETS \$ _____

LIABILITIES (For applicant, co-applicant, other):

Installment (Bank) loans, Auto loans, Credit Cards, Student loans, Hospital bills, and Other debt. Include child support and alimony payments. (*Rent, Utilities and Cable should not be included*) Place amount under proper person.

Bank or Creditor	Applicant	Co-Applicant	Monthly Payment	Balance Due

TOTAL DEBTS: \$ _____ \$ _____

IMPROVEMENT(S):

ESTIMATE:

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Approximate amount of assistance you are applying for:

\$ _____

CERTIFICATION:

I / we understand that this program provides assistance for homeowners and I / we state that I / we are not currently in bankruptcy.

I/we agree to participate in the promotion of this program and agree to be interviewed and accept pictures to be taken. I/we agree that HBCRA may use such photographs of me/us with my/our name(s) and for any lawful purposes, including such purposes as publicity, illustration, advertising and web consent.

I/we understand the terms of this program and sign acknowledging the following terms apply to me/us.

I/we declare that all information provided on all pages of this application is true and accurate to the best of my/our knowledge. I/we understand that misrepresentations or incorrect information provided can disqualify me/us from participating in this program.

IN WITNESS WHEREOF, I/we have set my/our hand(s) and seal this _____, 20_____.

WITNESSES:

Print Name: Applicant

Signature of Applicant

Print Name: Co-Applicant

Signature of Co-Applicant

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me this _____ day of _____ 2020, by means of (check one) [] physical presence or [] online notarization, by _____ who is [] personally known to me or who [] has produced a driver's license as identification.

My commission Expires:

Notary (Sign Name)

(Notary seal)

BROWARD COUNTY *INCOME CATEGORY CHART*

Broward County Median Income: \$68,600

HUD Released: 4/24/19

FHFC Posted: 5/15/19

<i>Household Size</i>	<i>Extremely Low (30%)</i>	<i>Very Low (50%)</i>	<i>Low (80%)</i>	<i>Moderate (120%)</i>	<i>Workforce (140%)</i>
1	\$17,700	\$29,500	\$47,150	\$70,800	\$82,600
2	\$20,200	\$33,700	\$53,900	\$80,880	\$94,360
3	\$22,750	\$37,900	\$60,650	\$90,960	\$106,120
4	\$25,750	\$42,100	\$67,350	\$101,040	\$117,880
5	\$30,170	\$45,500	\$72,750	\$109,200	\$127,400
6	\$34,590	\$48,850	\$78,150	\$117,240	\$136,780
7	\$39,010	\$52,250	\$83,550	\$125,400	\$146,300
8	\$43,430	\$55,600	\$88,950	\$133,440	\$155,680
9	Refer to HUD	\$58,940	\$94,304	\$141,456	\$165,032
10	Refer to HUD	\$62,308	\$99,693	\$149,539	\$167,462



Appendix II: CRA Area Map

The CRA area is bound to the North by Pembroke Road, to the South by the Dade-Broward County Line, to the West by Interstate 95 and to the East by NE 14th Avenue and the 14th Avenue Canal.

