## **CDBG Home Rehabilitation Loan Pre-Application**

If you determine you are eligible, please complete and return to:

> City of Moorhead **CDBG Home Rehabilitation** 500 Center Avenue Moorhead MN 56561-0779

**Receipt Date** 

OWNER NAME(S): \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_\_ MOORHEAD, MN 56560

PHONE: (\_\_\_\_\_) \_\_\_\_\_ EMAIL:\_\_\_\_\_

Carefully read and answer each statement listed below. If you do not understand the statement, contact our office at 218.299.5375 for clarification. (Incomplete applications may be returned.)

If you answer false to any of these statements, you are ineligible for a Home Rehabilitation Loan; however, if emergency repairs are needed to your home to protect the safety of your life or health, contact the Planning and Neighborhood Services Department; if you have insufficient equity or your home is newer than 15 years old, you may still be granted an emergency loan. If you are eligible, your application may receive priority on the waiting list.

We will notify you if your name has been placed on the waiting list. When your name comes up on the waiting list, we will send you an application packet, which will need to be completed at that time. NOTE: The waiting list for this programis typically 6-12 months.

True	False	1.	I have <u>never</u> had a rehabilitation loan from the City of Moorhead or Housing & Redevelopment Authority on this property.
□True	False	2.	The property contains <u>no more</u> than two dwelling units AND one of them <u>is</u> owner-occupied.
□True	□False	3.	The property is <u>not</u> a mobile home.
□True	False	4.	The property is <u>not</u> on or eligible for the National Register of Historic Places.
□True	False	5.	The property is <u>not</u> located in the flood plain.
□True	False	6.	The property is located in a residentially zoned district.
□True	False	7.	The property is located in the City Limits of Moorhead.
□True	False	8.	The home <u>is</u> at least 15 years old.
□True	□False	9.	All mortgage payments, contract-for-deed payments, and any other obligations on my property are current.
□True	False	10.	I have <u>no</u> outstanding liens on my property, other than the above mortgages.
□True	False	11.	The property taxes and special assessments are paid up to date.
☐ True	False	12.	The total gross annual income earned by residents of my household, age 18 and over, is

equal to or less than the amount listed in the chart below. (**Note:** Self-employment income is "net profit", subtract foster care payments, IRS reported childcare expenses and extraordinary medical expenses for the handicapped or elderly.)

(Please i	indicate your	familys	<u>No. in Family</u> ize)	<u>Maximum Ir</u>	<u>ncome</u>
			- 1 2 3 4 5 6 7 8	\$50,050 \$57,200 \$64,350 \$71,500 \$77,250 \$82,950 \$88,700 \$94,400	
True	□False	13.	I have adequate equity 3.	n my home as per the af	ter rehab equity calculation worksheet on page
True	□False	14.	the amount of the reh	bilitation loan. For con	to execute a promissory note and mortgage in tract for deeds, include a letter of consent from nclude their acknowledgement of co-signing
Yes 🗌	No 🗌 15.	Is this p	roperty being purchase	contract for deed?	

I certify that the above statements are true, accurate and complete to the best of my knowledge and belief. This checklists hall remain the property of the City of Moorhead for the purpose of screening my eligibility for a home rehabilitation loan.

Signature

Date

Signature

Date

## EQUITY CALCULATION WORKSHEET

Return this sheet with your application. If you have any questions, please call 218.299.5375.

## Section 1. After-Rehab Estimated Market Value:

4.	Equals: After-rehab Estimated Market Value (add lines 2 & 3)	= \$
3.	Plus: One-half of the Total Rehab Cost (half of line 5)	+
2.	Divided by 95% (0.95)	\$
1.	Estimated Market Value ( <u>www.moorheadproperty.org</u> or call 218.299.5310)	\$

## Section 2. Total Of All Mortgages On The Property:

5. Proposed CDBG Loan/Mortgage (How much do you want to borrow? Between \$5,000-\$20,000)

		\$
6.	Plus: 1st Mortgage Balance Owing (If any)	+
7.	2nd Mortgage Balance Owing (If any)	+
8.	Equals: Total of All Mortgages	=\$
<u>Sectior</u>	3. After-Rehab Equity:	
9.	Line 4	\$
10	. Subtract Line 8	

11. Equals: Total After-Rehab Equity (Use this total to answer question #13 on page 2) = \$\_\_\_\_\_

