FOR OFFICE USE ONLY	Date Received	Application complete	
	Ву		



City of Coeur d'Alene, CDBG Entitlement Program
CDBG Community Development Specialist
Michelle Cushing
710 E. Mullan Ave.
Coeur d'Alene, ID 83814

email: mcushing@cdaid.org, phone: 208-769-2382

The City of Coeur d'Alene's Emergency Minor Home Repair and Accessibility Improvement Program (EMRAP) is designed to assist low to moderate income persons make emergency/minor home repairs or accessibility modifications to their home. Emergency repairs are those repairs which are necessary to safeguard against imminent danger to human life, health or safety, or to protect property from further structural damage. Applications are accepted and processed on a first come, first served basis. All projects are subject to an Environmental Review. Please see Page 10 for the Application Checklist, which will assist you in accurately completing this application as well as in providing the required supporting documentation (be sure to return page 10 as part of the completed application). Incomplete or unsigned applications will not be processed. A maximum of \$5,000.00 in grant funding per household does apply.

Please check applicable boxes					
Applicant is Homeowner	☐ Yes	Home is Applicant's	☐ Yes	Home is located within	☐ Yes
	☐ No	primary residence	☐ No	Coeur d'Alene City limits	☐ No
If no to any question, ap	plicant does not qualify.	Age of Home:			
•	does not exceed the m	aximum amount for	,	n to owner-occupants who conding household size lis	
Household Size	Maximum Income	Household Size	N	faximum Income	
1	\$51,700	5		\$55,850	
2	\$41,400	6		\$60,000	
3	\$46,550	7		\$64,150	
4	\$51,700	8		\$68,250	
Please contact the City's CDE	3G Grant Administrator for inc	ome limits relating to ho	useholds of 9 o	or more.	
conditions. Activities wh	nich may be eligible und	ler the CDBG Eme	rgency/Mind	e, sanitary and secure li or Repair program include lease circle that which ap	, but
Roof			Hot W	/ater Heater	
Plumbing			Furna	ce/Heating System	
Floor (structural)			Electr	ical	
Accessibility Improven	nents for Homes where Disab	led Individuals Reside	•	ode Violation	
Other:			Emer	gency Sewer/Water Line Replace	ement
Non-income earning as	ssets may not exceed	\$35.000. Non-inco	me earning	assets can include cars	and

Non-income earning assets may not exceed \$35,000. Non-income earning assets can include cars and property owned beyond primary residence and primary vehicle. Applicants must certify that the value of all of their 'Non-income earning assets' does not exceed \$35,000. Non-income earning assets do not include revenue derived from rental property and revenue derived from retirements savings. These real-income benefits must be counted toward gross income and be included with income documentation.



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APPLICANT'S NAME		Social Sec	curity_No.	
		Phone Nu	mber	
Date of Birth Year Home Was Built:				
ARE YOU (check one)	———— □ Married □ □		ated Single	
1				_
ADDRESS			_Zipre	ars at residence
CO-APPLICANT'S NAM	E	Social Sec	curity No.	
		Phone Nu		
Date of Birth				
·		_		_
ARE YOU (check one)	☐ Married ☐ D	ivorced Separa	ated Single	Widowed
Please provide income unless stated otherwis				
before taxes or deducti		-	is the total amount	or earning
			Other Adult	Other Adult
Sources of Income	Applicant	Co-Applicant	Household	Household
Flov	\$		Members \$	Members
Employment/Salary		\$	3	3
Pay Period Company				+
Telephone Number				
Interest & Dividends	\$	¢	¢.	g
Business Net Income	\$	s	s	\$
Rental Net Income	\$	\$	\$	\$
Social Security/SSI	\$	\$	\$	\$
Pension/Retirement	\$	\$	\$	\$
Child Support/Alimony	\$	\$	\$	\$
Unemployment	\$	\$	\$	\$
Workers Compensation	\$	\$	\$	\$
Income from Assets	\$	\$	\$	\$
	\$	\$	\$	\$
Other	\$	\$	\$	\$
Other	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$
Total Household size				
Total Household Income	\$))	LMI 🗌 Yes	☐ No

Please indicate the type of repair with an explanation of the existing problem. Include a brief description of the work to be done (repair/modification) under the CDBG Emergency/Minor Home Repair Program. Emergency repairs are those repairs which are necessary to safeguard against imminent danger to human life, health, or safety, or to protect property from further structural damage. Other eligible program activities may include handicap accessibility. If additional space is needed, please attach a separate page. Please label any additional pages with homeowner's name and address.

EMERGENCY/MINOR REPAIR

Roof (specify)

Electrical (specify)

Structural (specify)

	Electrical (specify)			
	Structural (specify)			
	Plumbing (specify)			
	Handicap Modifications (specify)			
	☐ Yes ☐ No Do you cla	aim a disability?		
	Heat (specify)			
	Code violation/enforcement			
	Sewer/Water Line			
	Other (specify)			
	Description of the work to be done:			
		**		
	X		William Control	
	*Building permits, wether required under	er Coeur d'Alene C	City Code or by State Statue, shall	
	be the responsibility of the property own			
	obtain and maintain all permits necesss			
lone	IOT begin work or incur any costs under costs accumulated for purchase the for repayment under the EMRAP	s made prior to		
or ti	ne purpose of participating in this pro	gram <u>I (we) will</u> :	allow the City of Coeur d'Alene and th	neir representatives to
	any inspection of my (our) house, in			
	toring, and completion of this project certify that I am the owner(s) of thi			
	y that the <u>City</u> of Coeur d'Alene shall i			
e <u>p</u> ai	rs/modifications done under this gran	<u>t.</u>		
now raud inan	certify, under penalty of law, that the ledge. I/We understand that any winderstand that any winderstand, fictitious or false statement or cial help in full. My/Our signature as any source.	Ilful misstateme this application	nt may be grounds for disqualifica will require repayment of grant dol	tion. In addition, any lars received or other
۱ppli	cant Signature	Date	Co-Applicant Signature	Date
Appli	cant Signature	Date	Co-Applicant Signature	Date
Appli	cant Signature			Date
		Michelle Cush	ning	Date
	rn completed application to:		ning Ave.	Date

The City of Coeur d'Alene does not discriminate on the basis of race, sex, color, age, national origin, religion or disability in its employment opportunities, programs, services or activities.



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Certification of Non-Income Earning Assets

Source	Amount	
	5	
Total		
	4 1	
from retirements savings. These real income benefits me and be documented. For illustration purposes only the following representation.	s a few examples of asset types:	
and be documented. For illustration purposes only the following representation purposes only the following representation. NON-INCOME PRODUCING ASSETS	s a few examples of asset types: INCOME EARNING ASSETS	
and be documented. For illustration purposes only the following representation purposes on the following representation purposes of the following representation	INCOME EARNING ASSETS Income from Qualified Retirement Plans	
and be documented. For illustration purposes only the following represent NON-INCOME PRODUCING ASSETS Summer House/Time Share Land Not Adjacent to Primary Residence	INCOME EARNING ASSETS Income from Qualified Retirement Plans Interest from Savings/Investments	
and be documented. For illustration purposes only the following representation purposes on the following representation purposes of the following representation	INCOME EARNING ASSETS Income from Qualified Retirement Plans	
and be documented. For illustration purposes only the following represent NON-INCOME PRODUCING ASSETS Summer House/Time Share Land Not Adjacent to Primary Residence	INCOME EARNING ASSETS Income from Qualified Retirement Plans Interest from Savings/Investments Farm Property/Equipment mation is full, true and complete to the best of mont may be grounds for disqualification. In addition will result in the calling in of any note, deferred grants.	n, any ant, or
and be documented. For illustration purposes only the following represent NON-INCOME PRODUCING ASSETS Summer House/Time Share Land Not Adjacent to Primary Residence Customized Cars/Motorcycles I/We certify, under penalty of law, that the above info knowledge. I/We understand that any willful misstatem fraudulent, fictitious, or false statement on this applicatio other financial help in full. My/Our signature(s) below	INCOME EARNING ASSETS Income from Qualified Retirement Plans Interest from Savings/Investments Farm Property/Equipment mation is full, true and complete to the best of mont may be grounds for disqualification. In addition will result in the calling in of any note, deferred grants.	n, any ant, or



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APPLICANT'S AUTHORIZATION

I/We,	Applicant, and			
Co-Applicant, who reside at	Home is Applicant's			
•	pertinent information to the City of Coeur d'Alene for use in determining my/our			
eligibility for an Emergency/Minor I Coeur d'Alene's CDBG Entitlement	Home Repair and Accessability Improvement grant offered through the City of Program.			
This authorization entitles:				
All financial including copy of	deed, contract of sale, and/or escrow agreement			
Places of employment				
Any other organization having	access to pertinent information			
to release said information to the City of Coeur d'Alene, when a written request is supplied along with a copy of this document.				
Signature of Applicant	Date			
Signature of Co-Applicant	Date			

Bid/Quote Process

- 1- Determine the scope of the project; enter details on the Bid/Quote Worksheet.

 Outline the problem and the activites necessary for correction; please be specific. This project information should be used to obtain the bids/quotes and should contain sufficient detail to allow bidders and/or suppliers to provide bids/quotes that are easily comparable.
- 2- Contact the City of CDA Building Department regarding permit requirements.

 Building permits, whether required under Coeur d'Alene City code or by State Statute, shall be the responsibility of the property owner. The owner may specify that their contractor obtain and maintain all permits necessary fo the project work.
- 3- Obtain a Minimum of Three bids/quotes for the work materials required for the project
 Bids/quotes must describe comparable services or materials. For example a bid to repair a portion
 of a leaky roof cannot be compared to a bid to replace the roof. The lowest responsive bid/quote will
 be used.
- 4- Enter information for each bid/quote on Bid/Quote Worksheet
- 5- Project Funding

If project costs are more than the maximum allowable grant amount, list other sources of funding to be used (savings, donation, cash gift, grant, loan, etc.). Sufficient funding to complete the project must be identified prior to project approval.

6- Bids/Quotes

Attach copies of bids and/or quotes to completed Bid/Quote Worksheet; submit to City of Coeur d'Alene's CDBG Grant Administrator.

DO NOT begin work or incur any costs until **Notice to Proceed** is issued by the City of Coeur d'Alene. Any work done or costs accumulated for purchases made prior to the Notice to Proceed issued by the City WILL NOT be eligible for repayment under the EMRAP program.

Quotes for materials/appliances may be obtained by telephone or internet. Written documentation of quotes must include:

1)Specifications of item to be purchased 2)Company name/contact name 3)Company address, telephone number or internet address 4)Date and time of quote 5)Timeline and delivery information 6)Warranty (if applicable) 7) Costs, including tax & shipping 8)Any other pertinent information

Bid/Quote Worksheet

Applicant Name		ress	
Activities to b	pe completed:		
			oid to repair a portion of a leaky roof ant could submit more than 3 bids.
	·	• •	which specific project to complete.)
•		•	compare costs across bidders and
ensure cost i	reasonableness. The lowest response	onsive and responsible bid/quote	will be used.
Budget Wor	ksheet - Attach copies of Bi	ds/Quotes	
	Project Estimate - 1	Project Estimate 2	Project Estimate - 3
Company			•
Phone #			
Work Task			
Materials			
Materials			
Materials			
Labor			
Permits			
Other			
Other			
Other Tax			
Total Cost			
Low			
Bid/Quote			
	Amo	unt of Grant funds requested:	\$
Other funds	or contributions to complete proje	·	•
Source:			Amount: \$
Source:			Amount: \$
		Total Projec	t Cost: \$
Estimated St	art Date:		
Estimated Co	ompletion Date:		



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Information for Monitoring Purposes - Optional Section

You are not required to answer the following questions, however, this information is being requested for reporting purposes. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not wish to furnish the information, please check the box below. **Applicant** Co-Applicant Ethnicity: ☐ Hispanic or Latino Ethnicity: ☐ Hispanic or Latino ■ Not Hispanic or Latino □ White Race: Race: White
 ■

Output

Description

D ☐ Black/African American ☐ Black/African American ☐ Asian ☐ Asian ☐ American Indian/Alaskan Native ☐ American Indian/Alaskan Native □ Native Hawaiian/Other Pacific Islander □ Native Hawaiian/Other Pacific Islander ☐ American Indian/Alaskan Native & White ☐ American Indian/Alaskan Native & White Asian & White Asian & White ☐ Black/African American & White ☐ Black/African American & White ☐ American Indian/Alaskan Native & American Indian/Alaskan Native & Black African American Black African American ☐ Other Multi-Racial Other Multi-Racial Gender: □ Female Gender: □ Female Male **Head of Household:** Head of Household: ☐ Yes ☐ Yes ☐ No No I do not wish to furnish this information I do not wish to furnish this information



Signature

Application for Emergency/Minor Home Repair Program

City of Coeur d'Alene, CDBG Entitlement Program
Michelle Cushing

710 E. Mullan Avenue Coeur d'Alene, ID 83814 email: mcushing@cdaid.or, phone: 208-769-2382

Confirmation of Receipt of Lead Pamphlet

Date

I have received a copy of the pamphlet, Protect Your Family From Lead in Your Home,
informing me of the potential risk of the lead hazard exposure from renovation activity to be
performed in my dwelling unit. I received this pamphlet before the work began.
Printed Name
Address
Address



activities.

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Application Checklist

Application submittal must include the following:	
☐ Page 1: Completed homeowner information	
Page 2: Completed worksheet listing all household income, mortgage/	tax, and age of home
information. If any of the items do not apply to your individual situation, to the item.	, please write "NA" next
Current year's Income Tax Return with W-2's and/or 1099s, for eatax return	each household member who filed
If applicant is self-employed, two year's tax return	
Social security number(s), with most current income statements	for household members who
receive social security	
Paycheck stubs for the last two months for each employed house	nold member
All bank statements (checking, savings, etc.) for the last two month household member over 18 years of age Copy of property deed, contract of sale, and/or escrow agreeme Mortgage Balance Statement	
Certificate of fire insurance coverage	
Divorce decree, if you were awarded the property through a divo	rce
Page 3: Signed description of problem and potential repair.	
Copy of written report of city code violation, if applicable	
Page 4: Certification of Non-Income Earning Assets.	
Page 5: Signed Applicant Authorization.	
Page 7: Completed Bid/Quote Worksheet.	
Include and attach a minimum of 3 quotes for each activity	
Page 8: Optional Selection.	
Page 9: Confirmation of Lead Pamphlet Receipt.	
Page 10: Completed Application Checklist.	
Return completed application to the CDBG Grant Administrator: Incomplete or unsigned applications will not be processed.	Michelle Cushing 710 E. Mullan Ave. Coeur d'Alene, ID 83814
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