FOR OFFICE USE ONLY	Date Received	Application complete	
	Ву		



City of Coeur d'Alene, CDBG Entitlement Program

CDBG Community Development Specialist
Chelsea Nesbit
710 E. Mullan Ave.
Coeur d'Alene, ID 83814

email: cnesbit@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, app	olicant does not qualify.	Age of Home:			
	does not exceed the m	naximum amount for	•	n to owner-occupants who ponding household size lis	
Household Size	Maximum Income	Household Size		Maximum Income	
1	\$41,550	5		\$64,050	
2	\$47,450	6		\$68,800	
3	\$53,400	7		\$73,550	
4	\$59,300	8		\$78,300	
Please contact the City's CDB	G Grant Administrator for inc	come limits relating to ho	useholds of 9	or more.	
conditions. Activities wh are not limited to, the re to your household.	ich may be eligible un	der the CDBG Eme	rgency/Mino ollowing. *P	re, sanitary and secure li or Repair program include lease circle that which app	, but
Roof				Vater Heater	
Plumbing			Furna Electi	ice/Heating System	
Floor (structural)	and for House where Disal	blad ladi iduala Dasida			
Other:	nents for Homes where Disal	oleu iridividuais Reside		Code Violation gency Sewer/Water Line Replace	ement
		207.000.11			

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 Security No.				
	Phone Number				
Date of Birth					
ARE YOU (check one)	☐ Married ☐ Di	vorced	ted	☐ Widowed	
ADDRESS			Zip Yea	rs at residence	
CO-APPLICANT'S NAM	E	Social Sec	urity No.		
		Phone Nur	mber		
Date of Birth			*		
ARE YOU (check one)	☐ Married ☐ Di	vorced	ted	☐ Widowed	
Please provide income unless stated otherwise before taxes or deducti	e, verification will be re	quired. Gross income	is the total amount o	f earning	
Sources of Income	Applicant	Co-Applicant	Other Adult Household Members	Other Adult Household Members	
Employment/Salary	\$	\$	\$	\$	
Pay Period					
Company					
Telephone Number					
Interest & Dividends	\$	\$	\$	\$	
Business Net Income	\$	\$	\$	\$	
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)

	GLITO I / WILLIAM			
	Roof (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:			
	*Building permits, whether required und	er Coeur d'Alene Ci	y Code or by State Statute,	
	shall be the responsibility of the propert	•		
	contractor obtain and maintain all permi	ts necessary for the	project work.	
	NOT begin work or incur any costs u			
	or costs accumulated for purchases le for repayment under the EMRAP		e Notice to Proceed issued by the	City <u>WILL NOT</u> be
	ne purpose of participating in this prog any inspection of my (our) house, ind		_	
	toring, and completion of this project			
	certify that I am the owner(s) of this			
	y that the <u>City</u> of Coeur d'Alene shall r rs/modifications done under this gran		nages that may arise out of, or in col	nnection with, home
			Care to fault Amora and accordance to	the best of well-
	certify, under penalty of law, that t ledge. I/We understand that any wil	(1)/4		
	ulent, fictitious or false statement on			
	<u>cial help in full.</u>	s) below constitu	<u>te my/our consent to verifying inf</u>	formation from any
	ssary source.			
Appli	cant Signature	Date	Co-Applicant Signature	Date
		Chelsea Nesbit		
Retu	rn completed application to:	710 E. Mullan A	ve.	
		Coeur d'Alene, I	D 83814	

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 on the following representation purposes on the following representation purposes on the following representation purposes of the following representation pur	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 lome Repair and Accessibility Improvement grant offered through the City of
This authorization entitles:  All financial including copy of  Places of employment	deed, contract of sale, and/or escrow agreement
	access to pertinent information
to release said information to the C this document.	ty of Coeur d'Alene, when a written request is supplied along with a copy of
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		
Race:	<ul> <li>White</li> <li>Black/African American</li> <li>Asian</li> <li>American Indian/Alaskan Native</li> <li>Native Hawaiian/Other Pacific Islander</li> <li>American Indian/Alaskan Native &amp; White</li> <li>Asian &amp; White</li> <li>Black/African American &amp; White</li> <li>American Indian/Alaskan Native &amp;</li> <li>Black African American</li> <li>Other Multi-Racial</li> </ul>		White Black/African American Asian 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		
Gender:	Female Male		Female Male		
Head of Household:  Yes  No			Yes No		
☐ I do not wish to furnish this information		☐ I do not wish to	furnish this information		



Address

Signature

### Application for Emergency/Minor Home Repair Program

City of Coeur d'Alene, CDBG Entitlement Program

Chelsea Nesbit
710 E. Mullan Avenue
Coeur d'Alene, ID 83814
email: cnesbit@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
· · · · · · · · · · · · · · · · · · ·



Application submittal must include the following:

### Application for Emergency/Minor Home Repair Program

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# **Application Checklist**

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	, please write "NA" next
to the item.	
Current year's Income Tax Return with W-2's and/or 1099s, for a tax return	each household member who file
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 housel	hold member
All bank statements (checking, savings, etc.) for the last two mont	hs for each
household member over 18 years of age	
Copy of property deed, contract of sale, and/or escrow agreeme	ent
Mortgage Balance Statement	
Certificate of fire insurance coverage	
Divorce decree, if you were awarded the property through a divo	orce
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:	Chelsea Nesbit
	710 E. Mullan Ave.
Incomplete or unsigned applications will not be processed.	Coeur d'Alene, ID 83814
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