



Community Development Department
Housing Division

1115 Seminary Street P.O. Box 660 Napa, California 94559-0660

Dear Property Owner,

Thank you for your interest in the City of Napa Housing Division **Owner Occupied Rehabilitation Loan Program**. This program is part of the City's effort to preserve and improve housing stock for low to moderate income families. Qualified property owners may be eligible to receive a 0% interest deferred loan for home repairs and improvements, depending on the household's annual income and equity in owned property.

In addition to providing 0% interest loans to eligible applicants, the City of Napa Housing Division offers assistance throughout the application, loan, and construction phases of the work, including contractor selection and construction management. A Housing Rehabilitation Specialist will perform an inspection of your home, prepare a scope of work to initiate the contractor bidding process, assist you in selecting a contractor, monitor the construction activities, and administer all payments, documents, and closing statements necessary to ensure satisfactory completion of the work.

Examples of eligible work include foundation, structural, electrical, mechanical, plumbing, windows, flooring, painting, insulation, and termite repairs. Limitations do apply and the work that is eligible on your home will be determined during the application process.

If you have any questions please call (707) 257-9642.

Sincerely,

Hernando Guillem
Housing Rehabilitation Supervisor

NAPA COUNTY

MEDIAN INCOME LIMITS

FAMILY SIZE	LOW INCOME (80 % OF MEDIAN)
1	\$70,550
2	\$80,600
3	\$90,700
4	\$100,750
5	\$108,850
6	\$116,900
7	\$124,950
8	\$133,000

INCOME LIMITS FY 2022 *(Effective June 15, 2022)*

OWNER'S MANUAL

How to Apply

1. Complete the enclosed application.
2. Provide copies of all supporting documentation listed on page 2 of the application.

Deliver completed application to the City of Napa Housing Division located at 1115

Seminary Street, Napa, CA 94559.

The Scope of Work

1. Once you have qualified for the program, the Housing Rehabilitation Specialist (HRS) will schedule an inspection of your property.
2. A list of corrective actions for all health and safety deficiencies, combined with a limited amount of general property improvements, will be developed and used as the scope of work for the project.

The Bidding Process

1. Once a scope of work is agreed upon, the HRS will prepare a work write-up which is a list of bid specifications for the project. (eg. Materials, color of paint, flooring selection, construction specification, etc.)
2. The project is then advertised on the City of Napa Housing Division's contractor bid line. The bid line information does not give out the applicant's name, phone number or address.
3. When three or more contractors have expressed interest in bidding on the project, a jobsite bid walk is scheduled.
4. The contractors and HRS will come to the applicant's home on an agreed upon date and time to walk the project, take measurements and photos, and prepare to bid on the work.
5. The bid results are then sent to the applicant and each bidding contractor.

The owner is then allowed to select any of the responsible bids and is not required

to choose the lowest bid.

Contract Signing and Loan Closing

1. On the scheduled date, the owner, contractor, and HRS will sign the Owner-Contractor contract. The contract will specify the complete scope of work to be performed, cost to owner, length of time allowed to complete the work, procedure for paying the contractor, qualifications and insurance requirements, process for changing the terms of the contract, warranty period, and other contract issues which protect the rights of the owner and contractor.
2. Once the contract is signed, your loan, covering the cost of the construction (and contingency) will be closed (signed). You will be asked to sign loan documents including: a promissory note for the amount of the loan; a deed of trust to secure the promissory note; and a loan disclosure statement describing the terms of the

loan.

3. As with all legal contracts, you (owner) will have three business days (72 hours) after signing, to exercise your "Right to Cancel" during which time you may change your mind and withdraw from the program. "Business Days" include Saturdays, but do not include Sundays or Holidays. Should you opt to withdraw from the program, you are not disqualified from applying again at a later date. However, the City of Napa Housing Division does ask you to carefully consider your commitment to our program, as many hours of administrative time go into processing each application.

Construction and Completion

1. When the Rights of Rescission period ends and on the agreed upon date, the HRS issues the Notice to Proceed and the contractor is allowed to begin the work.
2. The length of the contract may be extended if additions or changes to the contract are agreed upon, or if unavoidable delays such as inclement weather occur.
3. During the course of construction, the contractor may request periodic "progress payments" prior to completion of the project. These payments will be made on an agreed upon schedule and will only pay for items of work which are complete, signed off by the Building Division (if necessary), and meet the standards set forth by the City of Napa Housing Division.
4. Upon completion of all work items, the HRS will perform a final inspection, verify that all building permits have been signed off, collect final lien waivers, process a final progress payment and issue a Notice of Completion.



Our goal at the City of Napa Housing Division is to support you, the homeowner, in the successful rehabilitation of your home. Please contact me if you need assistance at any point in the application process.

Thank you,

Hernando Guillem
Housing Rehabilitation Supervisor



City of Napa Housing Division



APPLICATION CHECKLIST OWNER OCCUPIED REHABILITATION

Applicant's Name: _____
(First) (Last) (Middle intl.)

Property Address: _____
(Number and Street)

(City)

(Zip Code)

Thank you for your interest in the City of Napa Housing Division's Owner-Occupied Rehabilitation Program. Please complete the forms included in this application package and attach all necessary documents. A checklist below is provided for your convenience.

If you have questions regarding the forms or need assistance in completing them, please call (707) 257-9359. We look forward to assisting you with your rehab needs.

Have you read, completed, signed and dated application forms enclosed?

- APPLICATION
- FAIR LENDING NOTICE/RIGHT TO FINANCIAL PRIVACY
- LEAD BASED PAINT DISCLOSURE
- HOMEOWNER'S INSURANCE FORM; PLEASE SUBMIT A COPY OF YOUR POLICY

Have you provided copies of the following information?

Pay stubs for the most recent two-month period or other current proof of income (including but not limited to Social Security, retirement, pension, TANF, etc.) for all household members, 18 years of age and older who are not full-time students, receiving income at the time of application.

Statements for the last six consecutive months for checking and most current for savings accounts, **(all pages)**, (including, but not limited to stocks, IRAs, pension accounts, mutual funds, etc.) for all household members, 18 years of age and older who are not full-time students, receiving income at the time of application.

Please include ALL pages of each bank statement even if they are blank.

Federal income tax returns from the last two years for all household members, 18 years of age and older, receiving income at the time of the application.

Mortgage statements for the last two months and the amount of the remaining mortgage.

Utility bills for the two most-recent, consecutive months (PG&E, water, sewer, and garbage)

Current homeowner's insurance policy or declarations statement that specifies policy number, policy period and amount of coverage.

Copy of property tax statements for most recent year. Mobile home owners and manufactured homeowners, supply copies of HCD Title and Registration.

Copy of Whole Life Insurance policy, if applicable

Copy of Trust, if applicable



City of Napa Housing Division

OWNER-OCCUPIED RESIDENTIAL REHABILITATION LOAN APPLICATION

Property Address:

_____ (Number and Street)

(City)

(Zip Code)

Please describe the repairs needed to the property: _____

E-mail Address: _____

Day time phone number: (____)____ - ____ Evening phone number: (____)____ - ____

Preferred language: () English () Spanish () Other: _____

I. Owner Information:

Please complete the following information about the owner of the house. If there is a second owner living in the home, be sure to also complete Section II.

Owner's Name:

_____ (First) (Last) (Middle intl.)

Social Security Number: _____ - _____ - _____

Date of Birth: (Month/Day/Year) _____

Income from sources (wages, social security, retirement, pension, AFDC, etc.)

Employer: _____ Monthly Salary: \$ _____

Other Source of Income: _____ Monthly Amount: \$ _____

Other Source of Income: _____ Monthly Amount: \$ _____

Assets/Accounts (checking, savings, stocks, pension, IRA, etc.)

Bank Name & Type of Account Type:

Current Balance: \$ _____ Annual Interest Rate: _____%

Bank Name & Type of Account Type:

Current Balance: \$ _____ Annual Interest Rate: _____%

Whole Life Insurance Yes No

II. Co-Owner Information

Please complete the following information on the co-owner of the house.
If there is no co-owner skip to Section III.

Co-Owner:

_____ (First) (Last) (Middle intl.)

Social Security Number: _____ - ____ - _____

Date of Birth: (Month/Day/Year) _____

Income from all sources (wages, social security, retirement, pension, AFDC, etc.)

Employer: _____ Monthly Salary: \$ _____

Other Source of Income: _____ Monthly Amount: \$ _____

Other Source of Income: _____ Monthly Amount: \$ _____

Assets/Accounts (checking, savings, stocks, pension, IRA, etc.)

Bank Name & Type of Account Type:

Current Balances: \$ _____ Annual Interest Rate: _____%

Bank Name & Type of Account Type:

Current Balance: \$ _____ Annual Interest Rate: _____%

Whole Life Insurance Yes No

III. Property Information:

Please provide the following information about your home:

Date of Purchase: ____/____/____ Purchase Price: \$ _____

1st Mortgage Holder:

Balance: \$ _____ Monthly Payment: \$ _____

2nd Mortgage Holder:

Balance: \$ _____ Monthly Payment: \$ _____

Is your home in a trust or are you a party to a trust? Yes No

IV. Household Information

How many people live in your home: _____ How many receive income: _____

What are the names and ages of all other people living in your home?

- 1. _____ 2. _____
- 3. _____ 4. _____
- 5. _____ 6. _____

What is the combined **monthly** income of everyone 18 or over living in your home:
\$ _____

What is your combined **annual** gross household income: \$ _____

Do you expect your household composition to change in the next 6 months?

- Yes No

V. Program Information:

How did you hear about the program for which you are applying?

Please furnish the following information for the **head of the household** in all 6 categories.

SEX: Male Female

AGE: Under the age of 62 62 or older

RACE: Check all that apply.

White American Indian or Alaska Native

Asian Native Hawaiian or Other Pacific Islander

Black or African American

ETHNICITY: Hispanic or Latino Not Hispanic or Latino

DISABLED: Yes No

ARE YOU A VETERAN: Yes No

The City of Napa Housing Division offers rehabilitation financing. To assist with this goal I agree to release information regarding INCOME, MORTGAGES, and/or BANK ACCOUNT(s). I give my permission to use copies of this consent form in obtaining the required information and hereby certify that to the best of my knowledge, all information given is true and complete.

Owner Date

Co-Owner Date



**City of Napa Housing Division
FAIR LENDING NOTICE AND
NOTICE OF RIGHT TO FINANCIAL PRIVACY**



FAIR LENDING NOTICE

To all borrowers for a real property secured to purchase, construct, rehabilitate, improve, or refinance an owner-occupied one to four family residence; and all owner-applicants for a real property secured home improvement loan to improve a one to four family residence (whether or not owner-occupied):

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, or age (provided that the applicant has the capacity to enter into a binding contract); because all or part of an applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the consumer Credit Protection Act. The Federal Agency that administers compliance with this law concerning this credit is the U.S. Comptroller of the Currency, Consumer Affairs division, Washington, D.C. 20219.

In Addition to your rights under Federal law, you may also have rights afforded under state law.

FOR CALIFORNIA RESIDENTS ONLY: In accordance with California law, the following notice is given to applicants who are residents of California.

The California Housing Financial Discrimination Act of 1977 provides in part as follows: 35810. No financial institution shall discriminate in the availability of, or in the provision of, financial assistance for the purpose of purchasing, constructing, rehabilitating, improving, or refinancing housing accommodations due, in whole or part, to the consideration of conditions, characteristics, or trends in the neighborhood or geographic area surrounding the housing accommodation, unless the financial institution can demonstrate that such consideration in the particular case is required to avoid an unsafe and unsound business practice.

35811. No financial institution shall discriminate in the availability of, or in the provision of, financial assistance for the purpose of purchasing, constructing, rehabilitation, improving refinancing housing accommodations due, in whole or in part, to the consideration of race, color, religion, sex, marital status, national origin, or ancestry.

35812. No financial institution shall consider the racial, ethnic, religious, or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, and under what terms and conditions, to provide financial assistance for the purpose of purchasing, constructing, rehabilitating, improving, or refinancing a housing accommodation. No financial institution shall utilize appraisal practices that are inconsistent with the provisions of this part.

If you wish to file a complaint, or if you have questions about your rights, contact: Comptroller of the Currency, Administrator of National Banks, Western District, Consumer Complaint Department, 50 Fremont Street, Suite 3900, San Francisco, California 94105.

NOTICE OF RIGHT TO FINANCIAL PRIVACY:

This is notice to you as required by the Right of Financial Privacy Act of 1978 that the Department of Housing and Urban Development has a right of access to financial records held by any financial institution in connection with the consideration or administration of the housing rehabilitation loan for which you have applied. Financial records involving your transaction will be available to the Department of Housing and Urban Development without further notice or authorization but will not be disclosed or released to other except as required or permitted by law.

Owner

Date

Co-Owner

Date



City of Napa Housing Division



LEAD-BASED PAINT DISCLOSURE FOR OWNER-OCCUPIED RESIDENCE

The City of Napa Housing Division has provided me with a copy of the EPA brochure *PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME*. I have read and understand the contents of this brochure in its entirety.

Owner's Signature

Date

Co-Owner's Signature

Date

Address

Zip



City of Napa Housing Division HOMEOWNER'S INSURANCE POLICY



IN ADDITION TO PROVIDING THE FOLLOWING INFORMATION, PLEASE PROVIDE A COPY OF HOMEOWNER'S INSURANCE POLICY OR A COPY OF THE DECLARATION STATEMENT.

The undersigned does hereby declare, under penalty, that the following "homeowner insurance policy" is in effect (or will be in effect by the date the loan is funded) upon the subject property:

Property Address: _____
_____ (Number and Street)
_____ (City) _____ (Zip Code)

Insurance Company: _____
Name of Insurance Agent: _____
Address of Agent: _____
_____ (Number and Street)
_____ (City) _____ (Zip Code)

Phone Number of Agent: () _____

Policy No.: _____ Policy Period from: ____ / ____ / ____ to ____ / ____ / ____

Amount of Coverage: \$ _____ Annual Premium: \$ _____

As the holder of the Deed of Trust on our property, we acknowledge that the City of Napa Housing Division's insurance requirements are as follows:

- 1) A valid and collectable policy of insurance including the perils of fire and hazards covered by special form must be maintained at all times.
- 2) The amount of insurance is to be not less than the outstanding loan balances, or improvement costs.
- 3) The Borrower's insurance company will be notified of the City of Napa Housing Division's loan and the amount of required coverage. The City of Napa will be added to the policy as "Additional Loss Payee." Proof of these changes will be provided to the City of Napa Housing Division in writing.

Owner _____ Date _____

Co-Owner _____ Date _____

