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

<table>
<thead>
<tr>
<th>FAMILY SIZE</th>
<th>LOW INCOME (80% OF MEDIAN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$70,550</td>
</tr>
<tr>
<td>2</td>
<td>$80,600</td>
</tr>
<tr>
<td>3</td>
<td>$90,700</td>
</tr>
<tr>
<td>4</td>
<td>$100,750</td>
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<tr>
<td>5</td>
<td>$108,850</td>
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<tr>
<td>6</td>
<td>$116,900</td>
</tr>
<tr>
<td>7</td>
<td>$124,950</td>
</tr>
<tr>
<td>8</td>
<td>$133,000</td>
</tr>
</tbody>
</table>

**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. (e.g. 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.

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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
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
  
  EPA brochure PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME can be found at: [https://www.epa.gov/sites/default/files/2020-04/documents/lead-in-your-home-booklet-bw-2020-508.pdf](https://www.epa.gov/sites/default/files/2020-04/documents/lead-in-your-home-booklet-bw-2020-508.pdf)
- [ ] HOMEOWNER’S INSURANCE FORM; PLEASE SUBMIT A COPY OF YOUR POLICY
- [ ] BORROWER’S CERTIFICATION AND AUTHORIZATION TO RELEASE INFORMATION

**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
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 race, color, religion, national origin, age, sex, marital status, or ancestry.

35811. No financial institution shall discriminate in the availability of, or in the provision of, financial assistance for the purpose of purchasing, constructing, rehabilitating, 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
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
BORROWER’S CERTIFICATION AND
AUTHORIZATION TO RELEASE INFORMATION

The undersigned certify the following:

1. I/We have applied for a mortgage loan from the City of Napa (the Lender). In applying for the loan, I/We completed a loan application containing information pertaining to qualifications for the loan, including but not limited to current residence address, the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.

2. I/We understand agree that the City of Napa and City of Napa Housing Authority, reserve the right to verify the information provided on the application with the employer and/or the financial information.

3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statement when applying for this mortgage, as applicable under the provisions of the Title 18 United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a mortgage loan from the City of Napa. As part of the application process, the City of Napa and and its program operator, the City of Napa Housing Authority, may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.

2. In addition, I/We understand and authorize that my application and/or closed loan file may be selected by the City of Napa, the City of Napa Housing Authority, their agents, successors or assigns for a quality control review. Should such a review be conducted, it may involve the re-verification of employment, income, credit, debt, or other information obtained during the processing of my loan application and the evaluation of the property, the appraisal, or value of the property.

3. I/We authorize you to provide to the City of Napa, the City of Napa Housing Authority, or a third party authorized by the Lender, any and all information and documentation that they request. Such information includes, but is not limited to: employment history and income; bank, money and similar account balances; credit history; and copies of income tax returns.

4. The City of Napa and/or the City of Napa Housing Authority may address this authorization to any party named in the loan application.

5. A copy of this authorization may be accepted as an original.

Borrower/Applicant Signature  Print Name  SSN  Date

Borrower/Co-Applicant Signature  Print Name  SSN  Date

RIGHT TO FINANCIAL PRIVACY ACT NOTICE

The City of Napa certifies that in connection with this request for access to financial records, it is in compliance with applicable provisions of the Right to Financial Privacy Act of 1978. Prior to the time your financial records are disclosed, you have the right to revoke this authorization; however, refusal to provide information may cause your application to be delayed or refused.