



GENERAL INFORMATION

RENTAL PROPERTY REPAIR ASSISTANCE PROGRAM

1. The Rental Property Repair Assistance Program (“Program”) may be able to provide eligible landlords of single-family housing (1-4 dwellings per property) low-interest loans to help correct housing code violations and/or make exterior improvement.
2. Please read below and if you are interested in seeing if you qualify, please complete, and submit this application to the CHSA, Inc. Staff will review your application and let you know if you are eligible and, if so, how it may help you depending upon available resources both from the City and/or from other organizations. You can call (912)651-2169 or if you need help with the application or to talk with someone about the program.

Community Housing Services Agency, Inc. (CHSA)
20 Interchange Drive, Savannah, GA 31415
912-651-2169

3. Property must be within Savannah City limits.
4. Rents cannot exceed HUD published Fair Market Rents for loan term.
5. The Program typically provides 5-year, deferred payment, 3% interest, loans not to exceed \$5,000 per dwelling.
6. A \$150 non-refundable application fee is required.
7. Loan Origination Fees up to 3% are paid by the applicant.
8. Closing costs are paid by the applicant.
9. Income limits do not apply.
10. Funding in excess of \$5,000 per dwelling may be available from other funding source. When other funding sources are used tenant income restrictions, as published by HUD based upon household size, apply.
11. City and County tax accounts must be current.
12. Applicants are encouraged to have a will. Assistance may be available from Georgia Legal Services to help you obtain a will if you do not have one. You are **NOT** required to give a copy of your will to CHSA.
13. Landlord must have property inspected by CHSA to determine scope of work required to bring it into code compliance. The property must be code compliant upon completion of repairs.
14. Property must be generally safe and habitable once repairs have been made.
15. Repairs are generally limited to correcting code violations, repairing roofs, exterior surfaces/components, structure, electrical, plumbing or heating/cooling systems. It may not be possible to provide funding for all the improvements desired by the applicant.
16. Priority may also be given to applicants with the most serious repair needs, the elderly, disabled, first time participants.
17. Interior repairs that disturb painted surfaces in houses built prior to 1978 may not be permitted. Neither are general property or cosmetic improvements. There simply is not enough money to make all desired improvements.
18. Property owners should file claims with insurance, home warranty and service line warranty policies and submit the resulting determination letter with the application.



19. Applications will be processed on a first submitted first reviewed basis, except applicants with hazardous conditions may be given priority.
20. **Applicants must fill out the application completely, submit all required documents (listed on Required Document Checklist) and sign all pages where indicated before the application can be processed.**
21. CHSA will notify property owners when an assistance determination has been made and if the request is approved.
22. **Completing the application does not guarantee the application will be approved and the home repaired. Funding is limited.**



RENTAL PROPERTY REPAIR ASSISTANCE APPLICATION

Please complete and deliver this application to CHSA, Inc. 20 Interchange Drive OR mail to P. O. Box 1027, Savannah, GA 31402.

Name _____ SSN/EIN# _____

Co-Applicant _____ SSN/EIN# _____

Home Address _____ ZIP _____ Email Address _____

Telephone # _____ (Cell #) _____ Number of years at Address above _____

Marital Status: [] Married [] Separated [] Unmarried, Widowed, Divorced Birthdate: _____

Have you filed for bankruptcy in the last 10 years? [] Yes [] No If yes, what year? _____

Employment: _____ Start Date: _____ Monthly Amount: _____

Additional Source of Income: _____ Amount _____

Source of Income: _____ Amount _____

Do you have a mortgage on your primary home? [] Yes [] No Mortgage Company _____

Rental Property Address _____ ZIP _____ Neighborhood _____

How did you hear about this program? _____

Repairs Desired: [] Code [] Roof [] Exterior Paint [] Other _____

Do you have a mortgage on home? [] Yes [] No Mortgage Company _____

Dwelling [] One-Story [] Duplex [] Two-Story [] _____ Metal Roof [] Yes [] No

of Buildings _____ # of Bedrooms per dwelling _____ # of Bathrooms per dwelling _____

Current amount of Monthly Rent? _____ Vacant Occupied

Do you own any additional properties [] Yes [] No If yes, please list below:

Address _____ Mortgage [] Yes [] No Occupied Vacant Current Rent _____

Address _____ Mortgage [] Yes [] No Occupied Vacant Current Rent _____

Please use another sheet to list any additional properties owned.

I the undersigned applicant(s):

- Certify that with this application I received the pamphlet entitled "PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME" and will provide it to my tenant.
• Certify that all information reported in and submitted with this Application is true and correct. The undersigned applicant(s) understand that it is against the law to knowingly present false information on this application.
• Authorize Community Housing Services Agency, Inc. to verify this information, to include but not limited to obtaining and reviewing my/our credit report(s).

I hereby certify that I am: (YOU MUST INITIAL ONE)
US Citizen /or/ legal alien
Signature
Date
Demographic Information Optional
(Circle appropriate choices on each line)
Race: Black/White/American Indian/Asian/Other
Sex: Male/female
Hispanic /non-Hispanic

I hereby certify that I am: (YOU MUST INITIAL ONE)
US Citizen /or/ legal alien
Signature
Date
Demographic Information Optional
(Circle appropriate choices on each line)
Race: Black/White/American Indian/Asian/Other
Sex: Male/Female
Hispanic /non-Hispanic





U.S. Department of Housing and Urban Development
U.S. Environmental Protection Agency
U.S. Consumer Product Safety Commission

To: Owners, Tenants & Purchasers
Of Housing Constructed **before 1978**

Notification

Protect Your Family from Lead in Your Home

If your property was constructed **before 1978**, there is a possibility it contains lead-based paint. The enclosed pamphlet will give you more information about lead-based paint.

I have received a copy of the pamphlet entitled, "**Protect Your Family from Lead in Your Home**".

Date

Print Full Name of Owner

Signature of Owner



Property Owner Name: _____

Please complete, sign, and return to CHSA, Inc., P.O. Box 1027, Savannah, GA. 31402.

YOUR INCOME

Employer: _____ Employment Start Date: (MM/YY) _____

Hourly Rate: \$ _____ Hours Worked per Week _____ **OR**

Annual Salary: \$ _____

Do you receive Overtime? _____

YOUR NON-EMPLOYMENT INCOME

Alimony \$ _____ Child Support \$ _____ Pension \$ _____ Retirement \$ _____

Section 8 \$ _____ Social Security \$ _____ SSI \$ _____ VA Benefit \$ _____

Unemployment \$ _____ Rent \$ _____ Other \$ _____

YOUR EXPENSES

Student Loan Payment \$ _____ Balance \$ _____ Deferred (Y/N) _____

Car Note Payment \$ _____ Balance \$ _____

Credit Card Payment \$ _____ Balance \$ _____

Mortgage Loan Payment \$ _____ Balance \$ _____

Personal Loan Payment \$ _____ Balance \$ _____

Other Payment \$ _____ Balance \$ _____

Property Owner Signature

Date

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or any accompanying documentation is subject to penalties that may include fines, imprisonment, or both, under provisions of Title 18, United States Code, Sec. 1014.



REQUIRED DOCUMENT CHECKLIST

- Copy of current Deed
- Most recent mortgage statement
- Copy of current signed lease, if occupied
- Most recent year filed business federal tax return, signed – including all schedules
- Most recent year filed personal federal tax return, signed – including all schedules
- Copy of most recent 2 months bank statements – all pages, all accounts
- Copy of government issued photo ID - Applicant
- Copy of government issued photo ID – Co-Applicant
- Copy of most recent insurance declaration page
- Notification form indicating receipt of the pamphlet entitled
“Protect Your Family from Lead in Your Home”

Other forms that may be required

- Insurance, Home Warranty, Service Line Warranty claim determination letter
- Tenant Intake Form
- Tenant Income documents
- Documents not listed above deemed necessary after review of submitted documents