

SCRANTON HOMEBUYER ASSISTANCE PROGRAM ELIGIBILITY SURVEY

The Scranton Homebuyer Assistance Program provides cash assistance for homebuyers toward <u>exterior</u> improvements/repairs needed. Please complete the following Eligibility Survey to qualify for this program:



Eligibility

To qualify as a recipient, applicants are required to complete a full application along with supplemental documentation necessary and meet all following eligibility requirements:

PLEASE ANSWER BY CIRCLING YES or NO

Yes or No	Homebuyer Applicant has an active sales agreement for a home purchase in the City of Scranton with an upcoming closing date
Yes or No	Home will be the primary residence for the homebuyer applicant
Yes or No	Home purchase is within Scranton city limits
Yes or No	Home purchase does not exceed \$120,000 to meet affordable housing needs
Yes or No	Up to \$5,000 of funds available to be requested will be utilized for exterior home improvements/repairs made to the property once purchased
Yes or No	Homeowner currently meets all requirements of the lender and mortgage insurer/guarantor
Yes or No	The property is a single-family dwelling; one-unit residence; or approved condominium
Yes or No	Homebuyer agrees to participate in a NeighborWorks homebuyer education program prior to closing

Intake Process

If you answered yes to all of the above eligibility statements, please complete the following application steps:

- **1.** Complete and submit a **completed** intake application form, along with supplemental documentation requested.
 - o Applicants must apply **BEFORE** the home purchase/closing date; supplemental documentation is needed:
 - Copy of current Sales Agreement, which contains the closing date, indicated purchase price of the property at or below \$120,000 as well as the intended address of the property for purchase.
 - Copy of government Issued ID card
- **2.** Applicant must submit the project details in request to be considered, which includes:
 - Photos of the project area
 - o Contractor estimate(s); copies of contactor liability insurance and HIC license
- **3.** If all above is submitted and complete, the <u>Homebuyer Applicant is responsible for submitting the</u> following:
 - o a copy of the final closing HUD document
 - o Homeowner's insurance for the new address

Since this program operates on a first come, first serve basis, **both documents must be submitted no more than 15 day** from when the closing takes place as proof of home purchase price and ownership.

Questions? Contact Ellen Holden at (570) 558-2490 or eholden@nwnepa.org



SCRANTON HOMEBUYER ASSISTANCE PROGRAM APPLICATION

I. Homebuyer Information Last Name: First Name: Home Purchase Street Address: City, State and Zip: _____ Primary Contact Person (if other than applicant): Phone number: ______ Alternate number: _____ Referred by: The following questions are used for internal reporting purposes only. Gender: Male Female Non-comforming Date of Birth: ____/____ Race: Latino? Yes No No Total Household Annual Income: _____ Total Members living in Household: _____ Pets (number and type): _____ Please indicate if any household members (including applicant) are: Elderly (65+) Under 18 Disabled Military Veteran Active Duty Military **II.** Property Details Is the address listed your intended primary residence? Do you own any other property or assets valued at or more than \$15,000. If yes, please explain? Do you plan to carry homeowners insurance? Do you know if your home resides in a moderate or high-risk flood zone? _____ If yes, do you intend to carry flood insurance? _____ Do you currently have a mortgage at another property? If yes, is your mortgage current? _____ Have you ever filed for bankruptcy (if yes, when)?



III. Exterior Improvement/Repair Needs — Please check and provide a brief description of items requested (attach separate sheet if needed and/or contractor estimate)

Needed	Improvement/Repair Item	Notes					
	Exterior doors						
	Exterior Painting						
	Porches and screens						
	Roofing						
	Siding						
	Foundation						
	Chimney						
	Landscaping						
	Fencing						
	Windows						
	Railings						
	Locking Systems						
	Tree/Stump removal						
	Outdoor lighting						
	Pest control						
	Demolition						
The project requested is expected to start:/ and end:/ OR the projected is expected to take weeks / months (please indicate) If you are using a contractor: Please give the full name of the company and address:							
Please list their PA HIC license Is the contractor licensed to work in the City of Scranton? Yes \text{No } \text{No } \text{No } \text{No } No							
Do you have a working heating system? Yes \square No \square							
Do you have a working water heater? Yes \Box No \Box							
Are you currently aware of any structural damage? Yes \square No \square							
To the best of your knowledge, is the area to be repaired free of mold, asbestos, lead and debris? Yes \Box No \Box							



Please explain I quality of life a	•	ents requeste	d in the applicatio	n will improve	your overall
Signature:		 	Date:		

Please, return completed application with necessary supplemental documents including:

- sales agreement
- photos of repair request
- contractor estimates
- timeline schedule

Submit application and documents to:

Ellen Holden, Program and Volunteer Coordinator NeighborWorks Northeastern Pennsylvania 1510 North Main Avenue Scranton, PA 18508 Phone: (570) 558-2490

Fax: (570) 558-2496

