



CITY OF NEW LONDON
CONNECTICUT
**LEAD HAZARD REDUCTION PROGRAM
(L-HARP)**

111 Union Street
New London, CT 447-5245

Welcome to New London's Lead Hazard Reduction Program

New London's Lead Hazard Reduction Program is offering financial aid to homeowners for Lead Abatement in residential buildings. The program is designed to correct the serious risk of lead-based paint, lead dust and code violations that can be dangerous to infants, children and pregnant women. The City is now accepting applications from property owners for aid to improve housing for tenants and owners. Up to **\$15,000** per unit may be awarded. The property must be in the target area shown in the HUD contract and the units must contain lead-based paint hazards. HUD requires that housing units approved for assistance have occupants who meet income requirements and rents that remain at fair market levels for 5 years and owners must give preference to families with children when renting. Attached you will find Income Verification Forms, one form is to be completed for each residential unit, owner occupied included. These forms **MUST** be returned with this application.

HUD guidelines of the Median

New London Area eff. 03/10/09

Family Size	80% Income	50% Income	30% Income
1	\$44,800	\$28,200	\$16,900
2	51,200	32,200	19,300
3	57,600	36,250	21,750
4	64,000	40,250	24,150
5	69,100	43,450	26,100
6	74,250	46,700	28,000
7	79,350	49,900	29,950
8	84,500	53,150	31,900

Fair Market Rents

eff. 10/01/08

# Bed Rooms	Rent Amount
0	\$700
1	\$830
2	\$961
3	\$1,176
4	\$1,299

Once a building has been found to be eligible, it will be given a ranking based upon the following priority points system:

1. Children under the age of six (10 Points)
2. Dwellings within the target area (10 Points)
3. Level of lead hazards present (1-5 points; sliding scale)
4. Owner occupied (5 Points)

Total point tally will depend on the number of requirements met. Since there is only enough funding to rehabilitate **70** dwelling units, projects will be chosen on the basis of priority ranking. **Because funding is limited, it is important that you complete the application quickly and accurately.**

If your application is chosen, you will be asked to complete a Letter of Intent showing your commitment to continue with the inspection phase. Additional forms will be required of you and your tenants at that point in the process. Only then will formal inspections for lead hazards and code problems be scheduled.

Send applications to Judi Cox, Loan Specialist at 111 Union Street, New London, CT 06320. If you need information or assistance, please contact the Lead Hazard Reduction Program at (860) 447-5245.

New London LEAD HAZARD REDUCTION PROGRAM 111 Union Street, New London, CT 06320 (860) 447-5245

City of New London Lead Hazard Reduction Program (L-HARP) Owner Application

For further information or assistance call the L-HARP office at 447-5245

DATE: _____

APP. # _____

Part 1: Property Information

Application for (check one): Single Multi-family Is building owner occupied? Yes No

Property Address: _____ # of Dwelling Units: _____

How did you hear of the Lead Hazard Reduction Program? _____

Number of Children under the age of 6 in residence: ___ Approximate year of initial construction: _____

Are any tenants pregnant? Yes No

Number of children under the age of 6 being cared for in the residence: _____

Part 2: Applicant Information

NAME OF APPLICANT _____ AGE _____ SS# _____
Individual, Partnership, Trust or Corp. (circle one)

APPLICANTS ADDRESS _____ HOME PHONE _____
No. and street

RACE _____ BUSINESS PHONE _____
City, State, Zip

If more than one Owner, complete the following section.

SECOND APPLICANT _____ AGE _____ SS# _____
Individual, Partnership, Trust or Corp. (circle one)

APPLICANTS ADDRESS _____ HOME PHONE _____
No. and street

RACE _____ BUSINESS PHONE _____
City, State, Zip

If additional owners please attach a separate sheet or continue on back and check here.

Part 3: Financial Information

Name & Address of Mortgage Co. _____

Are you and other owner(s) current (up to date) on all **mortgage** payments on the subject property? _____

If not, please explain: _____

Are you and other owner(s) current on all **municipal taxes and assessments** levied on the property? _____

If not, please explain: _____

Are you and other owner(s) current on all **State and Federal Taxes** and assessments on the property? _____

If not, please explain: _____

Have you or any other owner(s) filed for **bankruptcy** during the past 5 years? _____

If yes, please explain: _____

Attached most recent 1040 for owner(s) _____

Part 4: Resident Information **Property address** _____ **App #** _____

Unit	# of Bed rms	Name of Resident (or Vacant)	Race	# in House hold	# of Child <6	Unit Rent	Util. Inc. Y/N	Phone Number	Copy of Disclosure Form
						\$			
						\$			
						\$			
						\$			

Are there any young children with elevated blood lead levels (**EBL**) residing in the building? _____
 Has the property ever been tested for lead-based paint? _____ When? _____ If yes, did it test positive? _____
 Do you have a code or lead order? _____ If yes explain _____ Date: _____

CERTIFICATIONS

The undersigned hereby makes a preliminary application to the City of New London (the “City”) for aid for residential lead paint abatement. The undersigned acknowledges that this application is made pursuant to a program offered by the City and that the methods for abating lead paint hazards, cost of such abatement and other permitted costs will be determined by the City. The undersigned further agrees to permit the Abatement of lead paint hazards in the property by a contractor approved by the City through a competitive bid process.

The undersigned certifies that the property to be improved with the L-HARP benefits will be continuously rented to persons or families whose income does not exceed HUD’s guidelines for low/moderate income and rent that does not exceed the HUD Fair Market limits. In all cases, the landlord shall give priority in renting units for not less than three years following the completion of lead abatement activities, to families with a child under the age of six years.

Building owners agree to maintain the property physically and retain home insurance. Building owners agree to maintain tax payments, public fees on the property and mortgage payments.

The undersigned further agrees that he/she will not discriminate against any person on the basis of race, color, religion, national origin, sex, marital status, physical or mental handicap or age in any aspect of the program and will comply with all applicable Federal, State and Local laws regarding discrimination and equal opportunity in employment, housing, and credit practices, including Title VI of the Civil Rights Act of 1964 and regulations pursuant thereto, Title VIII of the Civil Rights Act of 1968, as amended.

All Lead-Safe dwellings created under this program will be placed on a list accessible to all City Departments. Other agencies will have access to this list, including; Community Health Center, Department of Child & Families Services, New London Housing Authority and other pertinent agencies. The undersigned agrees that the information be accessible as specified to the above departments and agencies.

The undersigned understands that failure to comply with L-HARP requirements may result in recapture, by the City, of the monies advanced.

The undersigned certify under penalty of law that to the best of their knowledge, all statements made in this application and supporting documentation are true and accurate, correct and complete.

Printed Name

Printed Name

Applicant Signature

Date

Applicant Signature

Date

New London Lead Hazard Reduction Program (LHARP)

Income Verification Form of Unit Occupants

To Resident:

The owner of the building in which you reside has applied for and/or received funds from the Department of Housing and Urban Development. The City is required by HUD to assure that it is improving buildings whose tenants are within certain income limits. To assist the City in determining this project's eligibility, please complete this form. The information you provide is for the use of the City of New London and the City will, to the extent permitted by law, keep such information confidential. This form must be filled out for each residential unit, including a unit occupied by a tenant or an owner-occupant. Please circle the appropriate block that correctly reflects your current total annual household income, which is the **current total gross annual income before deductions from all household occupants**.

Please circle the box that pertains to you. (2009)

1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
\$16,900 or less	\$19,300 or less	\$21,750 or less	\$24,150 or less	\$26,100 or less	\$28,000 or less	\$29,950 or less	\$31,900 or less
\$16,901 to \$28,200	\$19,301 to \$32,200	\$21,751 to \$36,250	\$24,151 to \$40,250	\$26,101 to \$43,450	\$28,001 to \$46,700	\$29,951 to \$49,900	\$31,901 to \$53,150
\$28,201 to \$44,800	\$32,201 to \$51,200	\$36,251 to \$57,600	\$40,251 to \$64,000	\$43,451 to \$69,100	\$46,701 to \$74,250	\$49,901 to \$79,350	\$53,151 to \$84,500
More than \$44,801	More than \$51,201	More than \$57,601	More than \$64,001	More than \$69,101	More than \$74,251	More than \$79,351	More than \$84,501

PLEASE NOTE - PROOF OF INCOME IS REQUIRED

Acceptable forms for proof of income are; copies of last three paycheck stubs, award letters from any social service agency, bank statements showing interest or dividends.

Owners who resided in subject property must also provide a copy of the most recent IRS 1040.

INCOME INCLUDES current wages, salaries, tips and self-employment income, interest, dividends, net rental income, income from trusts and estates, Social Security, Supplemental Security Income, Aid to Families with Dependent Children, or other public assistance or public welfare, retirement, survivor or disability pensions, Veterans (VA) payments, unemployment compensation and alimony.

Please check if you receive any of the following: ___ SAGA, ___ Medicaid, ___ Husky A, ___ WIC, ___ Title 19, ___ SSI, ___ Section 8 Housing.

I certify that this information is correct and true.

Head of Household Sex: M F Age: _____ Race: _____ # of Child <6 _____

Name: _____ Phone #: _____

Address: _____ Apt #: _____ # of Bedrooms: _____ Rent: \$ _____

Child's (<6) Name: _____ Age: _____ Child's (<6) Name: _____ Age: _____

Child's (<6) Name: _____ Age: _____ Child's (<6) Name: _____ Age: _____

Total annual household income: \$ _____ Source: _____

Signature: _____ Date: _____

FAIR MARKET RENTS EFFECTIVE 10/01/08

	0 BDRM	1 BDRM	2 BDRM	3 BDRM	4 BDRM
Rent with Utilities	\$700	\$830	\$961	\$1,176	\$1,299

These figures include all utilities and must be adjusted depending on utility assignment.

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