South Carolina State Housing Finance and Development Agency

Emergency Repair Application

300-C Outlet Pointe Blvd., Columbia, SC 29210

| Authority Use Only - Project #: |
|---------------------------------|
| Approved for Processing |
| By: |
| Date: |
| |

All Requested Information Must Be Complete and Accurate.

A hard copy of this application and all other required information must be submitted for funding consideration.

| Sponsor Information: | |
|---|---|
| Sponsor Name | Contact |
| Address | Email |
| City, State, Zip | Phone |
| | Fax |
| Alternate Contact | Phone |
| Email | Cell Phone |
| Funds Requested | |
| HTF Amount Requested \$ - | |
| Construction amount up to \$8,000 | _ |
| HTF Developers Fee \$ - | Other Sources Requested \$ - |
| Developer's fee is up to \$750 | <u> </u> |
| Total HTF Amount Requested \$ - | Total Rehabilitation Costs \$ - |
| Beneficiary/Property Information | |
| Homeowner's Name | Phone |
| Address | |
| City, State, Zip | County |
| # of Household Members | |
| Population Disabled | ☐ Elderly ☐ Handicapped |
| Property meets definition of substandard unit? | ☐ Yes ☐ No |
| Are property taxes current? | No Tax Assessor's Map # |
| Provide a copy of the most recent property tax receipt. | |
| Provide a legible copy of the most recent recorded deed with | the beneficiaries name and legal description. The deed must |
| include the recordation date, book, and page numbers. | • |
| Date Deed Recorded | |
| Deed Book # All individuals with an | — interest in the property who are listed on the deed as "Grantees" |
| | , , , , , , , , , , , , , , , , , , , |
| Dood Page # | |
| Deed Page # | |
| | |
| Is the Homeowner's Name the same as the deed "Grantees"? | ∐ Yes ☐ No |
| If no, please explain. | |
| | |
| | |
| Does the homeowner have homeowner's insurance? | Yes No If yes, provide a copy. |
| Sponsor must submit for the beneficiary completed income for | rms along with third party income documentation for each |
| household member (See forms HTF-3A, HTF-3B, HTF-3C). | |
| | |

Provide the completed Declaration of Citizenship (HTF-3D) form.

| Project Summary | | | | | | |
|------------------------------|--|-----------------------|----------------------|----------------------|-------------------------|-------------|
| D : 15 | A 1: 1 1 1 | | | | | |
| • | Applicants must describe | • | iirs for the propose | ea project, the | beneficiary(s) to be se | ervea, |
| | e for project completion. | • | | | | |
| Describe the emer | gency repair below. | | | | | |
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| Manager (III Albania and all | | 2 | | | | |
| How will the repai | r benefit the beneficiary? | <u> </u> | | | | |
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| Time frame for the | e project completion belo | ow. | | | | |
| | , projection production productio | | | | | |
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| Site and Construct | ion Information | | | | | |
| | | | | | | |
| Site Information (d | check all that apply) | | | | | |
| | Building Type | Foundation | on | | Finished Frame | |
| | Detached Single Family | Slab on G | rade | | Block | |
| | Manufactured Housing | Foundation | on with Crawl Spac | ce | Brick | |
| | Mobile Home | Partial Ba | sement | | Vinyl Siding | |
| | Other: | Full Baser | ment | | Stucco | |
| | | I | | | Other: | |
| | | 1 | | ĺ | | |
| Rehabilitation Cor | nstruction Requirements | s: Each applicant mus | t submit a detaile | ا d work write-ur | (Form HTF-2B). | |
| | | | | | , | |
| Funding Information | on | | | | | |
| G | | | | | | |
| Applicant must pro | ovide financial commitme | ents (if applicable). | | | | |
| | d amount requested: | \$ | _ | | | |
| Grants from other | • | \$ | - | | | |
| Loans from other s | | \$ | - | | | |
| TOTAL SOURCES O | | \$ | - | | | |
| TOTAL SOUNCES O | T TONDING. | Ι Υ | | | | |
| Funding Sources | | | | | | |
| | | | | | | |
| Source 1 | SC Housing Trust Fund | | Amount \$ | | - | |
| Award Type | Grant | Deferred | Forgivable Loan | | Repayable Loan (Local | Gov't Onlv) |
| Rate | per annum | Term | years | Payment | \$ - | |
| | 1 2 2000 | | 1. | - | | |
| Source 2 | | | Amount \$ | | - | |
| Award Type | □Grant | Deferred | Forgivable Loan | | Repayable Loan | |
| Rate | per annum | | years | Payment | \$ - | |

Acknowledgments

The Applicant certifies that all information furnished in support of this application is true and complete to the best of the Applicant's knowledge and belief. The Applicant understands and agrees the Authority has the right to conduct its own independent review and analysis of the application and all documents submitted with the application and may, in its sole discretion, require additional information or make adjustments in required documentation.

The Applicant certifies it is in compliance with all Authority programs in which it participates or has participated. Neither the Applicant nor any of its officers, principals, advisors, consultants, or any other member of its development team is presently debarred or within the past five years has been debarred from participation in any federal program (including but not limited to: the U.S. Housing and Urban Development, the U.S. Internal Revenue Service and the U.S. Department of Agriculture) or any Authority program. The Applicant certifies it is not delinquent on any financial obligation owed to the Authority and neither it nor any of its officers or principals have been convicted of or are under investigation for civil or criminal fraud with respect to any of the Applicant's activities.

The Applicant agrees to abide by all South Carolina Housing Trust Fund Program rules and regulations. The Applicant understands and agrees the Authority may suspend or debar the applicant and its principals from participation in the Housing Trust Fund or all Authority programs when the Authority determines the Applicant has expended Housing Trust Fund monies inappropriately and/or has acted in a manner that the Authority determines warrants suspension or debarment. If the Authority has sufficient reason to believe an Applicant has violated federal, state, or local laws, the Authority may request the assistance of law enforcement. The Authority may assist law enforcement personnel in completing their investigation and with the prosecution of any criminal acts. The Authority may also seek any available civil remedies in instances where there has been a misappropriation of Housing Trust Fund award proceeds.

The failure to abide by the procedures contained in the Housing Trust Fund Manuals may result in the Authority declining to accept an application. Further, the failure to abide by the program requirements will result in the disqualification of the Applicant and all other persons or organizations involved with the Applicant from further Housing Trust Fund participation. If proceeds subject to recapture are not repaid when requested, the mortgage will be foreclosed where notes and mortgages are used. When restrictive covenants are used, recapture may occur as defined within the Restrictive Covenants document.

The Applicant acknowledges and understands that Submission of a complete application does not guarantee a Housing Trust Fund award.

| Sponsor | | |
|--------------|------|--|
| Certified By | | |
| Title | Date | |