

Schenectady Lead Safe Housing Program 107 Nott Terrace, Suite 300 Schenectady, New York 12308-3170 Telephone: (518) 386-2818 Fax: (518) 386-2822

INITIAL APPLICATION CHECKLIST FOR LEAD – Owner Investor

LEAD staff can provide assistance prior to submitting an application to make sure that all applicable items will be submitted. LEAD Staff will review all applications for completeness and will return incomplete applications.

1)	Completed Application (Pages 1-4), signed by the owner(s) and certifying that: (1) All information is true and correct	
	(2) Authorizes the Agency to verify the information provided;	
	(2) Hamorizes the regency to roung the intermedian provides,	
2)	A Copy of your recorded deed to the property must be turned in with your application.	
3)	Evidence of adequate property insurance, including flood insurance if required must be	
3)	provided with the <u>City of Schenectady listed as a Loss Payee or Mortgagee on your policy</u>	
	as follows:	
	Schenectady Lead Safe Housing Program	
	105 Jay St	
	Schenectady, NY 12305	
4)	A copy of your Property Tax receipt for prior twelve months must be turned in with your	
4)	application.	
	application.	
5)	A copy of your Mortgage Statement showing principal (paid to date), interest and escrow	
	amounts must be turned in with your application.	
	Each tanent MUST fill out a Tanent Information Form, and MUST provide us with proof of	
6)	Each tenant MUST fill out a Tenant Information Form and MUST provide us with proof of ALL household income <i>4 current pay stubs and a copy of the most recent Federal Income</i>	
	Tax Return with all attachments, including W-2's, (SSI or Disability statements if	
	applicable).	
7)	Release form for Blood Lead Test for each tenant with children under the age of six.	
	(EOD OFFICE USE ONLY)	
	(FOR OFFICE USE ONLY)	
APPLICATION #: DATE RECEIVED:		





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OWNER(S) INFORMATION

1) Owner(s) Name				
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2) Address				
City	State	e	Zip Code	
3) Telephone Numbers:	Home	Work	Cell	
4) Email address:				
	OWNER'S EMP	LOYMENT INFOR	<u>MATION</u>	
Head of household				
1) Name:				
2) Employer:				
3) Employer's Address:				
4) Occupation:			5) Years Employed:	
<u>Spouse</u>				
1) Name:				
			5) Years Employed:	



PROPERTY INFORMATON

1)	Propert	ty Address				
	City <u>Sc</u>	chenectady State N	IY Zip Code			
2)	Numbe	er of Living Units				
3a) [House	built before 1978? Y	ES NO	3b) Year house wa	as built?	
4) E	Existing	Mortgage? YES N	NO if yes,			
		Name Bank				
		Address				
		City		State	Zip Code_	
5) N	/lortgag	e: Monthly Payment	\$			
	a) Mor	tgage payment includ	es Property Tax	? □ YES □ NO		
	L) Mass			manusa 2 D VES		
	b) Mor	tgage payment includ	ies nomeowner	insurance? Lifes	LINO	
6) Is	s this pı	operty subject to a H	UD or EPA Lead	d Disclosure enforce	ment action? YES	NO
			PROPER	ΓΥ CHARACTERI	STICS	
1) A	are you	currently doing rehab	oilitation or repai	ir on the property:	YES □ NO	
2) B	Building	Type: Fram		Brick Veneer: □	Masonry: □	
	_		Story □ T			1 1 4
4) Ii vaca		below rents charged	for each unit, are	e utilities included, n	umber of bedrooms, an	d whether occupied or
Uni	t #	Rent per month	Section 8 Yes or NO	#of bedrooms	Occupied = O Vacant = V	Location by floor (1st, 2nd, 3rd etc)

APPLICATION CERTIFICATIONS PLEASE INITIAL NEXT TO EVERY STATEMENT BELOW

	eceived by Date				
Pr	operty Owner's Signature Date	Property Owner's Signature	Date		
Pr	operty Owner (please print name)	Property Owner (please print na	me)		
5.6.	Property insurance listing The City of Schenectac additional insured must be maintained in good stathed the Grant Agreement is signed. InitialOwner will be responsible for contribution if cost Initial	anding for the full 3 year period from			
4.	three years. If the property is sold within three Agreement is signed, or in the event of default th	e (3) years of the date that the Grant			
3	For LEAD grant made to assist rental units in the below 50% of the Schenectady area median completions of LEAD hazard control activities under 6 years of age . Initial	income for not less than 3 years for	ollowing the		
2.	. The City of Schenectady is further authorized to perform such verifications of any source named in this application including credit, banking, pensions, employment, etc, as necessary. Initial .				
1.	. The applicant certifies all information in this application is true to the best of his or her knowledge and belief. The applicant realizes that any wrongful information knowingly provided for the qualifying for this program will disqualify me from receiving any assistance and may subject me to criminal prosecution. Initial				



2019 HUD Income Guidelines

- 1) For owner-occupants, all units assisted with grants shall be the principal residence of families with income at or below 80 percent of the area median income level and not less than 90 percent of the units assisted with grants under this section shall be occupied by a child under the age of six years or shall be units where a child under the age of six years spends a significant amount of time visiting;
- 2) For rental property, at least 50% of the units must be occupied by or made available to families with incomes at or below 50% of the median income and the remaining units shall be occupied or made available to families with incomes at or below 80% of the area median income level. In all cases the landlord shall give priority in renting units assisted to families with children under the age of six years.

Building with five or more units may have 20% of the units occupied by families with incomes above 80% of median income level.

80% median is as follows:

Household Size	Maximum Income
1	\$50,350
2	\$57,550
3	\$64,750
4	\$71,900
5	\$77,700
6	\$83,450
7	\$89,200
8	\$94,950

50% median is as follows:

Household Size	Maximum Income
1	\$31,500
2	\$36,000
3	\$40,500
4	\$44,950
5	\$48,550
6	\$52,150
7	\$55,750

8 \$59,350