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REHABILITATION LOAN PROGRAM FOR OWNER OCCUPIED PROPERTY

The City of Santa Ana is very interested in helping property owners rehabilitate their homes within the city. The City has created a program that offers extremely low interest loans to be utilized by homeowners in rehabilitating their property. Depending on fund availability deferred payment, one to two percent interest rate loans may be available.

Attached is a program description and application. Please read the eligibility criteria carefully. If you wish to apply for a loan, we ask that you complete the attached preliminary application and return it, with **all documents** referenced on the attached checklist, so that we may process your loan request. For your convenience, a return envelope has been provided.

The City has limited funds to use for these loans, and they are awarded on a first come-first serve basis. As a result, we encourage all persons who are interested in obtaining a loan to complete the application and return it, along with all documents referenced on the checklist, as soon as possible.

If you need assistance in completing your application or have any questions, please contact **Claudia Shaw at 714-667-2265**. She can also be reached at cshaw@santa-ana.org.

Si usted necesita ayuda en completar su aplicación o tiene cualquier pregunta, por favor de llamarle a Claudia Shaw en 714-667-2265.

CITY OF SANTA ANA RESIDENTIAL LOAN PROGRAM

One of the primary goals of the City of Santa Ana is to revitalize and improve its residential neighborhoods. To that end, the City has created a program that allows for extremely low interest loans to be utilized by homeowners in rehabilitating their property. Depending on fund availability deferred payment, one to two percent interest rate loans may be available. The following program may meet your needs.

Single-Family Owner Occupied Loans

Use of Loan Proceeds:

Loan amount depends upon the eligible repairs to be completed.

Loan funds may be utilized for a variety of home improvements which address code, health and safety deficiencies. Improvements may include, but are not limited to plumbing, electrical, heating, roofing, structural (foundation), landscaping, interior/exterior painting, driveway repair/replacement, and bedroom/bathroom additions to relieve overcrowding.

Requirements:

Maximum gross family income to be eligible is 80 percent of county median, based on family size. The following table is effective April 14, 2018.

Household Size	Low Income
1	\$ 61,250
2	\$ 70,000
3	\$ 78,750
4	\$ 87,450
5	\$ 94,450
6	\$ 101,450
7	\$ 108,450
8	\$ 115,450

The total of all loans on the property, including the City's loan, cannot exceed 90 percent of its appraised value.

Maximum Loan Amounts:

Maximum loan amount is \$75,000. Cost of all but \$2,500 of work to remediate hazardous substances may be forgiven. All owners of record must have an acceptable credit history. There can be only one other mortgage on the home.

DOCUMENT CHECK LIST

In order for your application to be considered, it will be necessary for you to supply us with the **copies** of following documents. Please use this checklist to ensure all applicable items are included with your application.

1. Signed – Credit Information Disclosure Authorization (executed by all borrowers)
2. Signed – Fair Lending Notice
3. Signed – Statement of Household Composition
4. Completed – Homeowner’s Insurance Policy Information
5. Signed – Homeowner’s Consent Lead Based Paint Test
6. Signed – Homeowner’s Consent Termite Inspection
7. Completed – Loan Application
8. Completed – Confidential Information Statement

The following documents are required (copies only):

9. Fire Insurance policy and flood Insurance policy (if required)
10. Last year’s Federal Income Tax Return with W-2 (self employed, last 3 year’s tax returns)
11. Last 3 payroll check stubs for all employed household members
12. Mortgage payment coupon or statement
13. Proof of property tax payment
14. Other income documentation; please supply **copies** of your most recent award letters or copies of checks for **all members of the household**:
 - a. Social Security, SSI benefits statements
 - b. Retirement or Pension statements
 - c. Disability
 - d. Child Support / Alimony
 - e. State benefits (Cal Works, AFDC, Welfare)
 - f. Last 2 months checking account statements (***All Pages***)
 - g. Last 2 months savings account statements (***All Pages***)

15. Other document _____

Please attach **copies** of personal documents. We will not be responsible for originals

LISTA DE DOCUMENTOS

En orden para su aplicación a considerarse, será necesario para que usted nos proporcione con **copias** de los siguientes documentos. Por favor utilice esta lista de comprobación para garantizar que todos los elementos aplicables se incluyen con su aplicación.

1. Firmado – Autorización de Revelación de información de su credito (Credit Information Disclosure)
2. Firmado – El Aviso de Prestamo Justo (Fair Lending Notice)
3. Firmado – Declaracion de la Composición de la Casa
4. Completada – la Poliza de Seguros de Propiedad
5. Firmado – Directrices de la pintura con base de plomo
6. Firmado – Consentimiento de Propietario – inspección de termite
7. Completada – Solicitud de prestamo
8. Completada – Solicitud de Declaración de información confidencial

Los siguientes documentos son necesarios (copias únicamente):

9. Póliza de seguro y contra incendios y póliza de seguro contra inundación (si es necesario)
10. La Declaración Federal de Impuestos del año pasado con W-2. (si auto-empleado los ultimos 3 años de declaracion Federales de Impuestos)
11. Los 3 ultimos talones del trabajo (de todos los miembros del hogar que están empleados)
12. Cupón de hipoteca o declaración
13. Comprobante de pago de impuestos sobre la propiedad
14. Otra documentación de ingresos. Por favor provea sus cartas de premio mas recientes o **copias** de los cheques para todos **los miembros de la casa:**
 - a. Pruebas de Seguro Social, beneficios de SSI
 - b. Beneficios de Retiro
 - c. Beneficios de Incapacidad
 - d. Manutención
 - e. Beneficios de Ayuda Estatal (AFDC, CALWORKS, Welfare)
 - f. Los 2 ultimos meses de cuenta de banco - chequera (***todas las paginas***)
 - g. Los 2 ultimos meses de cuenta de banco – ahorros (***todas las paginas***)

15. Otra documentación _____

Por favor envíe solamente **copias**. No seremos responsables de los documentos originales

AMERINATIONAL COMMUNITY SERVICES, INC.

CREDIT INFORMATION DISCLOSURE AUTHORIZATION

I/We hereby authorize you to release to the City of SANTA ANA or its agent, AmeriNational Community Services Inc., for verification purposes, information concerning:

Employment history; dates, title, income, hours worked, etc;

Banking and savings account records;

Mortgage loan information including open date, high credit, payment amount, due date, loan balance, interest rate, and payment record

The above reports are for confidential use in compiling information regarding a real estate loan requested by the applicant(s) signing this form.

A photographic or carbon copy of this authorization (being a photographic or carbon copy of the signature(s) of the undersigned) may be deemed to be the equivalent of the original and may be used as a duplicate original.

Your prompt attention to this matter will help to expedite my real estate loan application.

Thank you,

Applicant Signature

Social Security Number

Date

Applicant Signature

Social Security Number

Date

FAIR LENDING NOTICE

RIGHT TO PRIVACY ACT: This is notice to you as required by the Right to Financial Privacy Act of 1976 that the Department of Housing and Urban Development, and the Veterans Administration have a right to access financial records held by a financial institution in connection with the consideration or administration of assistance to you. Financial records will be made available to the Department of Housing and Urban Development, and the Veterans Administration without further notice or authorization, but will not be disclosed or released to another government agency or department, or private entity without your consent except as required or permitted by law.

FAIR CREDIT REPORTING ACT: AmeriNational Community Services Inc., as part of the processing of your loan application, will request both a consumer and business credit report bearing information on your credit worthiness, standing, capacity, character general reputation, personal characteristics, or mode of living. This notice is given pursuant to the Fair Credit Reporting Act of 1977, Section 606(a) (1). Pursuant to Section 606(b), you are entitled to such information within 5 days of written demand made within a reasonable period of time to: AmeriNational Community Services Inc., 8121 East Florence Ave., Downey, Calif. 90240.

EQUAL CREDIT OPPORTUNITY ACT: Pursuant to Section 209.9, paragraphs (a) (2) and (b) (1) of Regulation B regarding Section 701(a) the following notice is given. The Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, and age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income is derived from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency which administers compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington D.C. 20580.

I/We acknowledge receipt of a copy of this notice.

Applicant Signature

Date

Applicant Signature

Date

AMERINATIONAL COMMUNITY SERVICES, INC.

Statement of Household Composition

Please complete and/or provide the following information:

Name	Age	Relationship	Student Y/N *1	Employed Y/N *2	Other Income Y/N *3
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*1 If student is over 18, please provide name of college or trade school and number of units

Student Name	College or Trade School	# of Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*2 If employed, please provide name, address, and phone number of employer and one-month's copies of most recent paystubs, if not previously submitted.

Name	Employer Name & Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*3 If receiving Unemployment, Retirement, Pension or Social Security Benefits, indicate amount and provide copies of award letter or similar documentation, if not previously submitted.

Name	Source of Income/ Benefit	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Prepared by: _____
Signature
Printed Name
Date

HOMEOWNER'S CONSENT — LEAD-BASED PAINT TEST — SINGLE-FAMILY

The use of lead-based paint was banned in 1978. If your home was built before 1978 there's a possibility that it may contain lead-based paint.

Both the State of California and the federal government have adopted guidelines designed to reduce or eliminate the risk of lead-based paint hazards in homes. Some homes built before 1978 may contain lead-based paint that can be harmful to anyone living or working within the home, especially pregnant woman and children. Such hazards may occur as a result of exposure to contaminated lead paint dust and paint chips.

For homes built before 1978 testing for lead-based paint and the completion of all work necessary to reduce and/or eliminate lead-based paint hazards is a requirement of the City's residential rehabilitation loan programs.

The cost for the initial lead-based paint testing (approximately \$500) and the work necessary to reduce and/or eliminate lead-based paint hazards will be incorporated into your rehabilitation loan. Lead related costs in excess of \$2,500 may be forgiven. If you decide to cancel your loan application or your loan is denied, the City will cover the cost for the initial testing.

In the event that you sell your home, you may be required to notify the buyer of any known lead-based paint hazards and you should provide the buyer with any records pertaining to lead-based paint and/or lead-based paint hazards.

By signing below the homeowner certifies that they have read, understand, acknowledge and agree:

- **To the above information.**
- **To have their home tested for lead-based paint by a qualified environmental consultant selected by the City if necessary.**
- **That the City is not responsible for the outcome of the paint testing or the operation of the consultant.**

Homeowner's Name (Please Print)

Homeowner's Signature

Date

Homeowner's Name (Please Print)

Homeowner's Signature

Date

HOMEOWNER'S CONSENT — TERMITE INSPECTION

A termite inspection and the completion of all termite related work is a requirement of the City's rehabilitation loan programs.

There is no cost for the initial termite inspection. The cost for all termite related work is included in your rehabilitation loan.

If fumigation is required there will be some inconveniences. All persons must vacate the property for at least two nights; all living things (pets, fish aquariums, live plants, etc.) must be removed from the property; and all items for consumption (foods, beverages, drugs, medicines, etc.) that are not in an airtight container (sealed glass or metal) must be removed from the dwelling or stored in special bags provided by the termite company. The cost for temporary relocation (lodging) and/or the boarding of pets during fumigation is not covered by the City and cannot be included in your rehabilitation loan.

By signing below the Homeowner certifies that they have read, understand, acknowledge and agree:

- **To the above information.**
- **To have a termite inspection of their home performed by two qualified termite companies approved by the City.**
- **That the City is not responsible for the outcome of the termite inspections or the operation of the termite companies.**

Homeowner's Name (Please Print)

Homeowner's Signature

Date

Homeowner's Name (Please Print)

Homeowner's Signature

Date

**LOAN APPLICATION
COMMUNITY DEVELOPMENT AGENCY
CITY OF SANTA ANA
OWNER OCCUPIED REHABILITATION LOAN PROGRAM**

Applicant Name: _____ Social Sec. No. _____ Age: _____

Spouse/Titleholder _____ Do you own Rental Property? _____

Address: _____ Zip Code: _____

Home #:() _____ Cell #:() _____ Work #:() _____

Next of Kin Phone #: () _____ Are you a Veteran? _____

E-Mail Address: _____

Have you ever filed for Bankruptcy? **NO** _____ If **YES**, please list date of bankruptcy _____

Number of People in Household: _____ Ages: _____

Applicant's Yearly Gross Salary \$ _____ Other Monthly Income \$ _____

Total monthly income for other household members _____

Spouse's/Titleholder's yearly gross salary \$ _____

Employer _____ Phone No. () _____

Employer Address _____

Supervisor _____ Year/Month Started _____

Spouse Employer _____ Phone No. () _____

Employer Address _____

Supervisor _____ Year/Month started _____

PROPERTY / FINANCIAL INFORMATION

Year of purchase _____	Purchase price \$ _____
Number of bedrooms: _____ Number of bathrooms: _____	
Monthly mortgage payment (1 st) \$ _____	Mortgage balance (1 st) \$ _____
Monthly mortgage payment (2 nd) \$ _____	Mortgage balance (2 nd) \$ _____
Monthly auto loan payment \$ _____	Total monthly charge card payments \$ _____
Total monthly payments-personal/consumer loans \$ _____	Other payments (alimony, child support, etc.) \$ _____

Description of requested improvements: _____

APPLICANT'S STATEMENT

PLEASE READ BEFORE SIGNING

All the information I have given in this application is true and correct to the best of my knowledge. I understand that you will confirm the information and retain the application whether or not the loan is approved. I hereby authorize the City of Santa Ana to verify my credit status and any of the above information as a condition of this application.

Signature _____ Date _____ Signature _____ Date _____

APPLICANT STATISTICAL INFORMATION

The following information is requested by the Federal Government for certain types of loans related to a dwelling, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

CHECK ONE SPACE ONLY FOR THE ETHNIC CATEGORY YOU MOST CLOSELY IDENTIFY WITH:

- I do not wish to furnish this information.
- WHITE** (not of Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa, Middle East, or the Indian Subcontinent.
- BLACK** (not of Hispanic Origin): All persons having origins in any of the black racial groups.
- HISPANIC**: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or Spanish culture of origin, regardless of race.
- ASIAN** or **PACIFIC ISLANDERS**: All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands.
- AMERICAN INDIAN** or **ALASKAN NATIVE**: All persons having origins in any of the original peoples of North America.

SEX: Male Female AGE: Under 40 40 or Over

Signature _____ Date _____



CONFIDENTIAL INFORMATION STATEMENT / DECLARACIÓN DE INFORMACIÓN CONFIDENCIAL

COMPLETION OF THIS FORM WILL EXPEDITE YOUR ORDER AND WILL HELP PROTECT YOU. COMPLETAR ÉSTA FORMA HARÁ MÁS RÁPIDO EL TRÁMITE Y LE PROTEJERÁ.

THE STREET ADDRESS of the property in this transaction is: _____
 EL DOMICILIO de la propiedad en ésta transacción es: _____ (leave blank if none) (deje en blanco si no tiene domicilio)

IMPROVEMENTS: Single Residence Multiple Residence Commercial
 OCCUPIED BY: Owner Lessee Tenants
 MEJORAS: Residencia Unifamiliar Residencia Multifamiliar Comercio
 OCUPADA POR: Dueño Arrendatario Inquilinos

WILL ANY PORTION OF NEW LOAN FUNDS BE USED FOR CONSTRUCTION? Yes No
 ¿PARTE DEL PRÉSTAMO SERÁ DESTINADO A CONSTRUCCIÓN? Sí No

NAME / NOMBRE			NAME / NOMBRE		
_____ FIRST / PRIMERO	_____ MIDDLE / SEGUNDO	_____ LAST / APELLIDO	_____ FIRST / PRIMERO	_____ MIDDLE / SEGUNDO	_____ LAST / APELLIDO
_____ BIRTHPLACE / LUGAR DE NACIMIENTO			_____ DATE OF BIRTH / FECHA DE NACIMIENTO		
_____ I HAVE LIVED IN CALIFORNIA SINCE HE VIVIDO EN CALIFORNIA DESDE			_____ SOCIAL SECURITY NUMBER NÚMERO DE SEGURO SOCIAL		
_____ WE WERE MARRIED ON NOS CASAMOS EN LA FECHA			_____ AT EN		
			_____ WIFE'S MAIDEN NAME NOMBRE DE SOLTERA DE ESPOSA		

RESIDENCE(S) FOR LAST 10 YEARS (LUGAR DE RESIDENCIA DURANTE LOS ÚLTIMOS 10 AÑOS)

_____ NUMBER AND STREET (NÚMERO Y CALLE)	_____ CITY (CIUDAD)	_____ FROM (DESDE)	_____ TO (HASTA)
_____ NUMBER AND STREET (NÚMERO Y CALLE)	_____ CITY (CIUDAD)	_____ FROM (DESDE)	_____ TO (HASTA)
_____ NUMBER AND STREET (NÚMERO Y CALLE)	_____ CITY (CIUDAD)	_____ FROM (DESDE)	_____ TO (HASTA)
_____ NUMBER AND STREET (NÚMERO Y CALLE)	_____ CITY (CIUDAD)	_____ FROM (DESDE)	_____ TO (HASTA)

OCCUPATION(S) FOR LAST 10 YEARS [OCUPACION(ES) DURANTE LOS ÚLTIMOS 10 AÑOS]

HUSBAND (ESPOSO) _____

_____ PRESENT OCCUPATION (OCUPACIÓN)	_____ FIRM NAME (NOMBRE DE COMPAÑÍA)	_____ ADDRESS (DOMICILIO)	_____ # OF YEARS (CUÁNTOS AÑOS)
_____ PRIOR OCCUPATION (OCUPACIÓN PREVIA)	_____ FIRM NAME (NOMBRE DE COMPAÑÍA)	_____ ADDRESS (DOMICILIO)	_____ # OF YEARS (CUÁNTOS AÑOS)
_____ PRIOR OCCUPATION (OCUPACIÓN PREVIA)	_____ FIRM NAME (NOMBRE DE COMPAÑÍA)	_____ ADDRESS (DOMICILIO)	_____ # OF YEARS (CUÁNTOS AÑOS)

WIFE (ESPOSA) _____

_____ PRESENT OCCUPATION (OCUPACIÓN)	_____ FIRM NAME (NOMBRE DE COMPAÑÍA)	_____ ADDRESS (DOMICILIO)	_____ # OF YEARS (CUÁNTOS AÑOS)
_____ PRIOR OCCUPATION (OCUPACIÓN PREVIA)	_____ FIRM NAME (NOMBRE DE COMPAÑÍA)	_____ ADDRESS (DOMICILIO)	_____ # OF YEARS (CUÁNTOS AÑOS)

FORMER MARRIAGES (MATRIMONIOS ANTERIORES)

IF NO FORMER MARRIAGES, WRITE "NONE"
 SI NO SE HA CASADO ANTERIORMENTE, ESCRIBA "NINGUNO"

NAME OF FORMER WIFE _____
 NOMBRE DE SU EX ESPOSA

DECEASED _____ WHEN _____ WHERE _____
 FALLECIDA _____ CUÁNDO _____ DÓNDE

NAME OF FORMER HUSBAND _____
 NOMBRE DE SU EX ESPOSO

DECEASED _____ WHEN _____ WHERE _____
 FALLECIDO _____ CUÁNDO _____ DÓNDE

DATE (FECHA) _____

HOME PHONE (TELÉFONO DOMICILIO) _____ BUSINESS PHONE (TELÉFONO OFICINA/TRABAJO) _____

**CURRENT LOANS ON PROPERTY
 (PRÉSTAMOS ACTUALES EN ÉSTA PROPIEDAD)**

PAYMENTS ARE BEING MADE TO (ESTÁ HACIENDO SUS PAGOS A):

1. _____

2. _____

3. _____

4. _____

SIGNATURE (FIRMA)

SIGNATURE (FIRMA)

CHILDREN LIVING IN THE HOUSEHOLD (HIJOS VIVIENDO EN CASA)

_____ NAME (NOMBRE)	_____ AGE (EDAD)	_____ DRIVER'S LICENSE (# DE LICENSIA)	_____ SOCIAL SECURITY (SEGURO SOCIAL)
_____ NAME (NOMBRE)	_____ AGE (EDAD)	_____ DRIVER'S LICENSE (# DE LICENSIA)	_____ SOCIAL SECURITY (SEGURO SOCIAL)

CHILDREN BY CURRENT OR PREVIOUS MARRIAGE (HIJOS POR CASAMIENTO RECIENTE O PREVIO)

_____ NAME (NOMBRE)	_____ AGE (EDAD)	_____ DRIVER'S LICENSE (# DE LICENSIA)	_____ SOCIAL SECURITY (SEGURO SOCIAL)
_____ NAME (NOMBRE)	_____ AGE (EDAD)	_____ DRIVER'S LICENSE (# DE LICENSIA)	_____ SOCIAL SECURITY (SEGURO SOCIAL)

OTHER INDIVIDUALS LIVING IN THE HOUSEHOLD (OTRAS PERSONAS VIVIENDO EN CASA):

_____ NAME (NOMBRE)	_____ AGE (EDAD)	_____ DRIVER'S LICENSE (# DE LICENSIA)	_____ SOCIAL SECURITY (SEGURO SOCIAL)
_____ NAME (NOMBRE)	_____ AGE (EDAD)	_____ DRIVER'S LICENSE (# DE LICENSIA)	_____ SOCIAL SECURITY (SEGURO SOCIAL)