

Owner-Occupied Rehabilitation Program Guidelines

Thank you for your interest in the City of North Miami (“City”) Owner-Occupied Rehabilitation Program. The Residential Rehabilitation Program is administered by the Department of Housing and Social Services through funds provided by Federal, State and Local programs. The Program is designed to provide homeowners with assistance to correct and repair issues that threaten the life, health, and/or or safety of the occupants. The Housing staff encourages applicants(s) to carefully review the application to obtain a clear understanding of program participation and requirements.

Should you desire to apply for the program, please complete and submit the application in accordance with the instructions outlined below.

INSTRUCTIONS

1. Review **Program Guidelines**
2. Complete application (**Household Information and City Internal Forms**)
3. Gather required documents. (*see application checklist*)
4. Complete Applications will be accepted by **appointment only**. Contact Housing at **(305) 893-6511 ext. 20000** to schedule an appointment. If you have questions regarding this application or general questions, feel free to contact the Housing and Social Services Department via mail, email or phone at:

Housing and Social Services Department
12300 NE 8 Avenue North Miami, FL 33161
(305) 893-6511 ext. 20000
housing@northmiamifl.gov

Owner-Occupied Rehabilitation Program Guidelines

Program Overview

Introduction

The Owner-Occupied Rehabilitation Program is designed to provide financial assistance to homeowners to address and repair items that compromise the life, health, and/or safety of the household.

The Program assists owner-occupied properties (single-family, duplex, condominium) by:

- Eliminating housing conditions which threaten the life, health or safety of the occupants;
- Correcting City Building Code violations;
- Eliminating conditions resulting in a home being severely energy inefficient.

Eligible Applicants

Total household income must not exceed 80% of the Area Median Income (“AMI”) limits established by the U.S. Department of Housing and Urban Development (HUD) for the participating jurisdiction. The applicable low-to-moderate income limits for determining program eligibility are published by HUD in the Federal Register and are updated annually.

Maximum Income Limit-Adjusted for Household Size

Household Size	Maximum Income Limit
1	\$54,600
2	\$62,400
3	\$70,200
4	\$78,000
5	\$84,250
6	\$90,500
7	\$96,750
8	\$103,000

Income Limits Effective 04/18/2022 (subject to change)

Residents who apply will be selected through a lottery process. Reasonable accommodations can be made for applicants with special needs who require assistance with the completion or submission of their application.

Applicants will be required to complete a City approved Home Maintenance Counseling course prior to the completion of project.

Eligible Improvements*

- | | | | |
|-----------------|---------------------|---------------------|-------------------------------|
| ✓Roof | ✓Windows | ✓Doors | ✓Safety & Compliance upgrades |
| ✓Exterior Paint | ✓Sliding Glass Door | ✓Hurricane Shutters | ✓Energy Efficiency upgrades |

** Work not eligible for program funding includes, but is not limited to, luxury/cosmetic improvements, additions, conversions (basement, garage, porch, attic, etc.), repairs to structures separate from the living units (detached garage, shed, etc.), furnishings, pools and landscaping.*

All rehabilitation work shall be performed by a City approved Contractor.

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Form of Financial Assistance

Assistance is in the form of a deferred zero percent interest forgivable loan, **up to the amount approved** per grant fund program. The loan is forgivable throughout the life of the affordability period, from the date of execution of security documents provided that the title remains under the ownership of the owner(s) and the property remains their primary residence.

Assistance Amount	Occupancy / Affordability Period**
Below \$25,000	7 Years
\$25,000 to \$40,000	10 Years
\$40,000 & Over	15 Years

***Exceptions may apply, depending on funding program.*

Public Records Disclosure

Information provided by the applicant may be subject to Chapter 119, Florida Statutes regarding Open Records. Information provided that is not protected by Florida Statutes may be requested by any individual for their review and/or use, regardless of whether or not you qualify for funding under the program(s) for which you are applying.

Notice of Collecting Social Security Numbers

The City collects your social security number for a number of different purposes. The Florida Public Records Law (specifically, section 119.071(5)(a)5, Florida Statutes (2021), requires the City to give you this written statement explaining the purpose and authority for collecting your social security number.

Your Social Security Number is being collected for the purposes of income certifying you for the City's Owner-Occupied Rehabilitation Program which requires third-party verification of assets, employment and income. In addition, this information may be collected to verify unemployment benefits, social security/disability benefits and other related information necessary to determine income and assets and your eligibility for the program that is funded by local, Federal and/or State program dollars. Your social security number will not be used for any other intended purpose other than verifying your eligibility for the City's program.

Conflict of Interest Disclosure

In accordance with 24 CFR 570.611 and 24 CFR 92.356 applicants can be denied participation in the Owner-Occupied Rehabilitation Program if a conflict of interest exists. A conflict of interest exists if an applicant is currently or has been an employee, agent, consultant, officer, elected official or appointed official of the City or within the past 12 months:

- Exercised any functions or responsibilities with respect to funds for this program.
- Participated in the decision making process related to funds for this program.
- Was in a position to gain inside information with regard to program activities.

A conflict of interest may also arise if an applicant is related by family or has business ties to any employee, officer, elected or appointed official or agent of a unit of local government who exercises any functions or responsibilities with respect to the Owner-Occupied Rehabilitation Program. When a conflict of interest or perceived conflict of interest exists, the applicant must acknowledge the conflict.

Required Documents

The documents listed below must be submitted with your completed application, which comprise:

- A completed application form
- City Internal forms (*for all household members over 18 years of age*)
- All the applicable supporting documentation as listed below.

Some of the requested information may not pertain to you. Only provide the information that pertains to your household. Relevant information will be verified by third-parties. **Only copies will be accepted.**

1. **Proof of property ownership:**

- a) Deed (which may be a warranty deed, special warranty deed, personal representative deed or quit claim deed) **or**
- b) Satisfaction of Mortgage

If the deed lists anyone who does not reside in the home, a notarized, sworn statement must be provided by the non-resident(s) that attests to the fact that the individual(s) does not reside in the home and has his/her primary residence elsewhere. The individual(s) must provide proof such as, but not limited to, a copy of a residential property lease, identification showing new address or an ad valorem property tax bill indicating that their primary residence is elsewhere.

2. **Proof of Income.** Most recent eight (8) consecutive pay stubs, if paid weekly or four (4) consecutive paystubs, if paid bi-weekly. Paystubs must show employee's name, gross pay per pay period, deductions, and frequency of pay for all employed household members 18 years of age and older. If income is from Social Security, pension or public assistance, include award letter.
3. **Property Taxes.** Miami Dade Notice of Ad Valorem Taxes (must show Assessed Value of Property). This may be obtained by logging on to the Property Appraisers website at <http://www.miamidade.gov/pa/home.asp>
4. **Proof that you are current in the payment of your property taxes.**
 - a) Paid Property Tax Receipt from the Miami Dade Property Appraiser **or**
 - b) A printout from the Miami Dade Property Appraisers website
5. **Bank Statements.** Last six (6) months bank statements for every household member. *Include all pages.*
6. **Proof of hazard and flood insurance.** A copy of your homeowner's insurance policy. Policy must include flood insurance. If Flood Insurance is not required, please provide a Determination Letter from FEMA. If there is no insurance, homeowner must agree to purchase insurance and provide copy of coverage within 90 days of work completion.
7. **Federal Income Tax Returns.** Federal income tax returns filed with the IRS and W-2 forms for the most recent two (2) years. We will accept:
 - a) A copy of the original signed federal tax return with W-2's **or**
 - b) A transcript of your federal return from the IRS with W-2's. You can request a transcript by

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filling out IRS form 4506-T and sending to the IRS. The form can be obtained from the IRS website www.irs.gov, by calling the IRS at 1-800-829-3676, or by going to the IRS office.

8. **Proof of number of dependents claimed.** Dependents must be listed on your federal tax return. We will accept:
 - a) Birth Certificate on which the parent/applicant's name is listed **or**
 - b) School records which give the parents' names and address **or**
 - c) Court-ordered letters of guardianship **or**
 - d) Divorce decree **or**
 - e) Letters of adoption **or**
 - f) If a dependent over 18 years of age is a full time student, please submit a copy of his/her class schedule, in addition to the above documents.
9. **Social Security Cards. Social Security Cards are required for all household members.**
10. **Photo Identification. Photo ID are required for all household members over the age of 18.**
11. **Proof of citizenship or legal alien status documents.**
 - a) United States of America birth certificate **or**
 - b) Certificate of Naturalization **or**
 - c) Alien registration card
12. **Divorce Decree.** If you are divorced, provide a copy of your divorce decree or certified court documents.
13. **Self-Employment Income.** Schedule C, E, or F must be included with your federal income tax return **AND**
 - a) Accountant or bookkeeper's statement of net income expected for the next 12 months printed on the accountant/book keeper's company letterhead, **or**
 - b) A notarized, sworn statement, from the self-employed individual, of net income expected for the next 12 months.
14. **Social Security, Supplemental Security Income (SSI), and Disability benefits.** An award or benefit notification letter is required.
15. **Unearned Income. Provide documents for all that apply.**
 - a) Unemployment Compensation - Unemployment benefit award notice with three (3) copies of unemployment check stubs or (3) bank statements showing proof of direct deposit.
 - b) Disability Compensation - Notice of eligibility from employer or authorizing agency and three (3) copies of check stubs or (3) bank statements showing proof of direct deposit.
 - c) Worker's Compensation - Notice of eligibility with amount awarded and three (3) copies of check stubs.
 - d) Severance Pay - Notice from employer stating the amount received in severance pay.
 - e) Welfare or other needs-based payments given to any household member
 - f) Unemployed household member not receiving unemployment benefits or income must

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provide a notarized, sworn statement indicating that neither unemployment benefits nor income are being received or fill out City Unemployment Affidavit form.

16. Alimony or Child Support Payments.

- a) A Printout from the court or governmental agency through which payments are being made, **or**
- b) An original notarized letter from the non-custodial parent stating the amount given weekly, bi-weekly, or monthly, **or**
- c) An original notarized statement from custodial parent stating that child support is not received for each child.

17. Assets.

Most current statements for the below assets for each household member, if applicable. All pages of each statement listed on your application form are required to be submitted.

- a) 401(K) / 403(B) account statement
- b) Retirement statement
- c) Pension statement
- d) IRA statement and/or Certificate of deposit (CD) statement
- e) Annuities

18. Recurring Contributions and Gifts.

Example: non-household member paying all or part of bills, mortgages or contributing money on a regular basis. The following are required:

- a) Notarized statement or affidavit signed by the person providing the assistance, giving the purpose, dates and value of the gifts **or**
- b) A letter from a bank, attorney, or a trustee providing required verification.

19. Mortgage Statements.

If there is currently a mortgage on the property, or an equity line, provide a copy of your most recent mortgage statement(s).

For further information, please contact us at:

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