



Better Places, Better Lives

Cumberland County Whole Home Repairs Small Landlord Loan Application

PROGRAM USE

This program is focused on improving habitability, energy efficiency, and disability accommodation concerns in affordable rental units owned by a small landlord. Once an application is submitted and approved, an Authority Inspector will visit the property to determine the scope of work needed and the approximate cost of said work.

APPLICATION FEE

The program requires a \$100 application fee. Checks may be made payable to the Redevelopment Authority of the County of Cumberland. Checks may be mailed to:

ATTN: Mikayla Kitchen
The Redevelopment Authority of the County of Cumberland
114 N. Hanover St.
Carlisle, PA 17013

ELIGIBILITY

A small landlord is one who owns no more than five properties and no more than 15 rental units, all of which are rented to tenants at or below 60% of the area median income (AMI). Interest-free loans up to, but not exceeding, \$50,000 per rental unit are available. Acceptance of loan funds will result in a mortgage being recorded against the rental property. The owner must be current on all property taxes and municipal utilities.

Tenant income eligibility is to be based upon the Pennsylvania Housing Finance Agency (PHFA) PennHOMES countywide limits. Tenant income must fall at or below 60% as defined below.

Household Size	1	2	3	4	5	6	7	8
60% AMI	\$39,660	\$45,300	\$50,940	\$56,580	\$61,140	\$65,640	\$70,200	\$74,700

2022 Pennsylvania Housing Finance Agency (PHFA) PennHOMES countywide limits

LOAN FORGIVENESS

Loan forgiveness may be granted upon meeting the following conditions:

1. The small landlord offered a three-year extension of the lease to a tenant occupying a unit when the loan funds were accepted by the small landlord.
2. Annual increases in monthly rent have not exceeded 3% of the base rent or the unit has been occupied by a tenant participating in the Housing Choice Voucher Program for a period of no less than 15 years beginning on the date the loan was received.
3. In the prior 15 years from the date the loan was received, the small landlord has not committed a serious code violation at the rental property which this application regards and has not taken substantial steps to correct the violation.
4. The small landlord has maintained ownership of the unit(s) for a period of no less than 15 years beginning on the date the loan was received.

ELIGIBILITY CHECKLIST

- Property owned by applicant
- Property located within Cumberland County
- Owns no more than 5 properties or 15 rental units, combined
- Rents to tenants at or below the 60% AMI income limit as defined by PHFA
- Properties listed in application are up to date on all property taxes and municipal utilities

REQUIRED DOCUMENTS CHECKLIST

Applicants must provide all of the following along with this application:

- Proof of Identity
- Proof of ownership (per property)
- Proof of property insurance (per property)
- Proof of rental income (per property)
- Proof of tenant income (one Self-Certification Form per occupied rental unit) - Must also include two most recent paystubs or letter from employer on an official letterhead stating wages/compensation and dates of employment.



HOUSING & REDEVELOPMENT AUTHORITIES
OF CUMBERLAND COUNTY

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APPLICANT INFORMATION

Applicant Name: _____

**Please note that the applicant should be the owner of all properties listed on this application.*

Home Address: _____

Social Security Number: _____

Phone Number: _____ Email: _____

PROPERTY INFORMATION

Property Address #1	Number of Units	Gross Rental Income	Current on Taxes/Utilities?	Accepts Housing Vouchers?
Description of Work to Be Done:				

Property Address #2	Number of Units	Gross Rental Income	Current on Taxes/Utilities?	Accepts Housing Vouchers?
Description of Work to Be Done:				

Property Address #3	Number of Units	Gross Rental Income	Current on Taxes/Utilities?	Accepts Housing Vouchers?
Description of Work to Be Done:				

Property Address #4	Number of Units	Gross Rental Income	Current on Taxes/Utilities?	Accepts Housing Vouchers?
Description of Work to Be Done:				

Property Address #5	Number of Units	Gross Rental Income	Current Taxes/Utilities?	Accepts Housing Vouchers?
Description of Work to Be Done:				

MORTGAGE DETAILS

Include all properties owned by applicant/business entity (even if not submitted for loan funds).

Address	Name of Bank	Original Mortgage Amount	Unpaid Balance	Monthly Payment	Is this a rental property?	Monthly rental income

INSTALLMENT DEBTS

Show all banks/credit unions and finance companies from which you have borrowed, or you are authorized to use.

Creditor - Address/Account Number	Original Amount	Unpaid Balance	Monthly Payment
TOTALS			

APPLICATION REVIEW AND SIGNATURE

Everything that I have stated in this application is correct to the best of my knowledge. I understand that CCHRA may retain this application whether or not it is approved. By signing this application, I also agree that CCHRA is able to run a credit and background check.

Prepared by: _____

Title: _____

Phone: _____

Fax: _____

Date: _____

Return this completed application and \$100 application fee to:

Mikayla Kitchen, Community Redevelopment Specialist
Cumberland County Housing and Redevelopment Authorities
114 N. Hanover St.
Carlisle, PA 17013

mkitchen@cchra.com
(717) 249-0789 x172



HOUSING & REDEVELOPMENT AUTHORITIES
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Conflict of Interest Disclosure

All applicants for the Cumberland County Housing and Redevelopment Authorities (CCHRA) loan programs are required to disclose if they are employees of or are related to employees of CCHRA. If you are a CCHRA employee or are related to a CCHRA employee, CCHRA must obtain a conflict of interest waiver from its Board of Directors.

Name: _____

Please indicate the following condition that applies:

- I am not an employee of and am not related to an employee of CCHRA
- I am an employee of CCHRA
- I am related to an employee of CCHRA: _____

Please indicate the relationship: _____

I acknowledge and agree that any misrepresentation in this Conflict of Interest Disclosure may result in the cancellation of my loan application or, if the misrepresentation is discovered after the loan is made, I may be required to repay the loan in full on demand.

Borrower's Signature: _____

Date: _____



HOUSING & REDEVELOPMENT AUTHORITIES
OF CUMBERLAND COUNTY

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Cumberland County Whole Home Repairs Self-Certification of Annual Income for Tenants

Applicant Name(s): _____

	Legal Address	Mailing Address (if different)
Street, Apt./Unit #		
State, City, Zip Code		
Phone Number(s)		
Email(s)		

WRITTEN ATTESTATION OF RESIDENCE

To be completed by tenant.

Rental Unit Address	
Address 2	
City	
Zip Code	
Name of Landlord	
Landlord Email Address	
Landlord Phone Number	
Monthly Rent Owed	

ANNUAL INCOME

Sources of income include:

- Money, wages, and salaries before taxes and any deductions
- Net receipts from non-farm or farm self-employment (receipts from a person's own business or from an owned or rented farm less deductions for business or farm expenses).
- Regular payments from social security including SSDI, railroad retirement, unemployment compensation, strike benefits from union funds, worker's compensation, veteran's payments, training stipends, alimony, and military family allotments.
- Private persons, government employee pensions (including military retirement pay), and regular insurance or annuity payments
- Dividends and/or interest
- Net rental income and net royalties
- Periodic receipts from estates or trusts
- Net gambling or lottery winnings

Please include applicant(s) in the following table:

Household Member #	Full Name	Relationship to Head of Household	Employed?	Annual Gross Income
1		Head of Household		
2				
3				
4				
5				

6				
7				
8				
Annual Gross Income from all sources (total of all household members):				

Written attestation of lack of income documentation (if applicable):

APPLICANT CERTIFICATION

I certify under penalty of perjury that the above information is complete and accurate to the best of my knowledge. I understand that Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony and assistance can be terminated for knowingly and willingly making a false or fraudulent statement to a department of the United States Government. I agree to provide any additional documentation required by the program administer to document my/our household income.

Head of Household		
Signature	Printed Name	Date

Other Adult Household Members

Signature	Printed Name	Date
Signature	Printed Name	Date
Signature	Printed Name	Date
Signature	Printed Name	Date
Signature	Printed Name	Date

I, the landlord, _____, hereby agree to the following:

- This tenant has been offered a three-year extension on their current lease and has:
 - accepted;
 - declined;
 - negotiated a shorter term extension.
- Annual increases in monthly rent will not exceed 3% of the current base rent **or** the unit will be occupied by tenant(s) participating in the Housing Choice Voucher Program.
- The tenant is aware of the improvements being made to the unit and that contractor(s) may enter the unit to complete the Whole Home Repairs-funded repairs.

Landlord Signature

Date