Norwell Community Housing Trust Small Housing Grant Program

Home repairs, winterization needs and safety concerns? Norwell would like senior residents to connect with the town's Community Housing Trust. The Norwell Community Housing Trust has a Small Housing Grant Program to assist seniors who meet certain funding criteria with funding for home repairs and alterations needed for **health and safety** reasons. If you are age 60 and older, a resident of Norwell, and plan to stay in the Town for the next twelve months, you may be eligible for a grant to assist with certain home repairs..

The application process is simple. Start by asking these questions:

- 1. Are you a Norwell senior resident?
- 2. Do you plan to stay in Norwell for the next twelve months?
- 3. Is your house assessed at \$650,268 or less?

A sample of repairs that might be eligible for funding are: minor plumbing or electrical work, broken or clogged gutters/downspouts, steps or porch repairs, smoke/CO2 detectors, bathroom grab bars, and many more. The Trust can also assist with providing a list of suggested contractors. The program is designed as a small grant program, but any health and safety repair needs will be considered. There is no obligation to repay the funds awarded to you.

The best way to find out if you are eligible is to contact Susan Curtin or Dee Dee Rogers at the Council on Aging at 781-659-7878, or visit the Community Housing Trust webpage at www.TOWNOFNORWELL.net. The link to the grant application (which has more information) is available on the CHT webpage. All personal information that is required on the application will be kept confidential.

The Community Housing Trust is excited to offer this program in Norwell. Let us help!



Norwell Community Housing Trust

http://www.townofnorwell.net/Public Documents/NorwellMA BComm/CHT

SMALL HOUSING GRANT PROGRAM GUIDELINES

Eligible Projects

The Small Housing Grant Program provides financial assistance to eligible Norwell seniors to correct conditions dangerous to health and safety; to correct substandard conditions; and to improve weatherization and energy efficiency.

Examples of eligible projects are listed below.

<u>Small Jobs and/or Contractor Work</u>: Minor plumbing, carpentry, window repairs, gutters or downspouts, door repairs or replacements, step or porch repairs, lock repair or replacement, cement work or masonry repair, tiling, plaster patching and wallpapering, sheet-rock repair, smoke/CO2 detectors, weather stripping, Electrical, heating, interior painting or wallpapering or plaster/sheet-rock work, floors, installation, masonry, siding, roofing.

<u>Adaptations:</u> Bathroom grab bars, raised toilets or toilet seats, hand-held shower heads, tub transfer bench, tub seats/ rails, bed transfer bars, railings throughout the house, change door knobs to levers, hook-up bells to light switches, hook-up flashing light to phone, install various phone volume control devices, intercom entryway buzzer system, light switch height.

Financial Assistance

The grants are offered with no repayment requirement. There is no grant limit but the Norwell Community Housing Trust ("the Trust") expects grants to average under \$2,500 per senior residence. Grants to eligible Norwell homeowners who have not received a previous grant will receive priority over a prior grant recipient. In addition, a one-year wait period is required before an applicant can re-apply to the Small Housing Grant Program. This wait period may be waived in an emergency situation upon approval by the Trust in a situation that poses a danger to the health/safety of the occupant(s). The grant will be made payable directly to the contractor upon completion of the work.

Applicant Guidelines

- 1. *Income* The combined income of all parties living in the home must be less than the so called "Circuit Breaker" income limit determined by the Mass DOR. All sources of regular income such as; earnings, Social Security, Pension, Interest Income, are counted. Income limits as of January 2020 are: Single filing status \$60,000, Head of Household: \$75,000 and Married: \$90,000.
- 2. **Home Value** The current assessment of the home should not greater than the single family average home assessment in Norwell, which for FY2020 is \$650,268. This requirement may be waived in unusual circumstances.
- 3. **Homeowner Norwell resident.** The Applicant(s) must be the owner(s) of the property, use the property as their primary residence for the entire year (12 month period) following the completion of the repair, and the property must be in Norwell. The resident also agrees to notify the Trust at least 60 days prior to selling the house at any time in the future.

The Trust will review applications that do not meet the above guidelines in unusual and/or exigent circumstances.

Grant Applications

A complete application shall include three estimates, including one photo, if applicable, of the area requiring work. The number of estimates may be reduced in appropriate circumstance such as small project size. Town employees,

You may also leave the application with the	e Council on Aging w	ho will forward the ap	plication to the Trust.



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SMALL HOUSING GRANT PROGRAM

Dear Norwell Resident,

Thank you for your interest in the Norwell Small Housing Grants Program. The purpose of this program is to provide financial assistance to rehabilitate existing housing units occupied by income-eligible senior households to make them safe and sanitary. It is sponsored by the Norwell Community Housing Trust ("the Trust") for the benefit of Norwell senior residents. A senior residence is a property containing a single or two-family home owned by at least one person aged 60 years or older who principally resides in the home or one unit of a two-family home.

The attached confidential application and grant process is designed to be simple and quick. There is minimal documentation required. A completed application, an estimate for work requested, and copies of recent tax returns are all that is needed. The Council on Aging can assist you in submitting a complete application package.

Grants will be considered on a rolling basis. The Trust has initially allocated \$25,000 to this program. In addition, the Trust reserves the right to amend the program from time to time as more experience is gained with the program. Before you start this application, please check the Town of Norwell website to make sure you have the most current application (see link above).

There is no repayment required of the funds awarded to you.

The following requirements apply to the program:

- 1 Property is in Norwell and is the primary residence of the applicant, and applicant intends to remain a resident of Norwell for the next 12 months. All owners of the property must complete an application.
- 2 Household Income must be within affordable housing limits. (See application for current amounts)
- 3 Property assessment must be below the town average,
- 4 Agreement to notify the Norwell Community Housing Trust at least 60 days prior to listing your home for sale.
- The Trust may add additional requirements on a case-by-case basis. This may occur if a larger than average grant is considered. The Trust also may, in its sole discretion, waive a requirement under exigent circumstances.

While it is expected that the average grant under this program will be \$2,500 or less, larger grants may be considered. Applications will be evaluated and prioritized based on health and safety considerations, and financial need of the applicant.

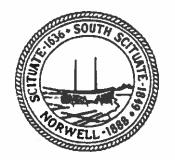
The Trust, in line with its mission, continually searches for properties which can be added to the pool of affordable properties in Norwell.. In accepting grants from this program, you are required to notify the Trust at least 60 days prior to listing your home for sale.

If you have questions regarding this program or if you require assistance in filling out the application, please contact the staff at the Norwell Council on Aging at (781) 659-7878. They are familiar with the program and can assist you in preparing an application. All applications will be confidential.

Submit application and attachments to:

Norwell Community Housing Trust, PO Box 345, Norwell, MA 02061

including special municipal employees, are not eligible contractors in accordance with MGL Chapter 268A, section 20. If awarded, the repair must be completed within 12 months from the award date. The Trust will pay the amount approved to the repair provider upon receipt of the invoice with Tax ID#/SS# of the provider, photo of the finished repair, and approval from the applicant. The Trust will not reimburse homeowners unless specifically approved in advance.



Norwell Community Housing Trust http://www.townofnorwell.net/Public Documents/NorwellMA BComm/CHT

SMALL HOUSING GRANT PROGRAM APPLICATION

1. Household Information

Applicant Name;	ame;Phone Number	
E-mail	Address	Norwell, MA 02061
Co- Applicant Name (if a	ny)P	hone Number
Names of all people curre	ently living in household, and their ages:	
ALL OWNERS OF THE	E PROPERTY MUST JOIN IN THE AP	PLICATION
Any person in the housel	hold* (optional): Veteran?: □ No □ Yes	Disabled?: □ No □ Yes
2. Property Information	n (optional)	
Is there a mortgage or	n the property? □ No □ Yes, Balance:	····-
Is the property your pr	rimary residence? □ No □ Yes	
Do you own additional	real estate? No Yes, Address: Please attached tax bill showing a	assessed value
3. House Repair Neede	ed	
Amount of grant request contractors directly upor	ted: \$(Pleas n completion of the work.)	e note that all grants will be paid to the
Please describe the pro	posed work needed:	
	rk item related to preserving the structure its occupants? (Please explain)	al integrity of the dwelling or

Please attach three written estimates of the work that you have obtained and a photo of the area requiring work. If you have obtained less than three estimates, please state reason. Trust may waive this requirement under certain circumstances.



Norwell Community Housing Trust http://www.townofnorwell.net/Public_Documents/NorwellMA_BComm/CHT

SMALL HOUSING GRANT PROGRAM APPLICATION

AFFIDAVIT

Whereas I, the undersigned, have made application to the Norwell Housing Small Grants Program for monies from the Norwell Community Housing Trust to cover the cost of repairs or adaptations to my home as proposed, and the Program Administrator or their designated representative may verify the information in this application by personal inspection of appropriate documents, by hearing corroborating testimony or by other available means; and.

Whereas I certify that all the information in this application and any additional information provided by me in support of this application is, and will be, entirely accurate to the best of my knowledge; and that no information relevant to that application has been, or will be, deliberately withheld; now,

Therefore, I understand that any Norwell Housing Small Grants Program monies committed, or used to pay, for my requested home repairs or adaptations will be subject to repayment at any time during the contracted work or during the first year following the contracted work or at any time after the first year should any information supplied by me prove to be false or deliberately misleading, including all application material, or if I rent or sell my home in the first year after Norwell Housing Small Grants Program work is completed.

Therefore, I agree to notify the Norwell Community Housing Trust at least 60 days prior to listing my home for sale. This affidavit may be recorded.

By signing below, Applicant(s) requests the Trust to review this application for the purpose of receiving funding assistance through the Norwell Community Housing Trust. Applicant(s) declares that the information and statements provided herein are true and correct to the best of their knowledge.

Signed, sealed and delivered on this	day of, 20
ALL OWNERS MUST SIGN	Applicant
COMMONWEALTH OF MASSACHUSETTS	Co-Applicant
COUNTY,	, 20

On this date the above named personally appeared before me and proved to me through satisfactory evidence of identification, which was [] a current driver's license, [] a current U.S. passport, [] my personal knowledge, to be the person/s whose name is signed on the preceding instrument, and acknowledged the same to be

his/her free act and deed.		
	Notary Public	My Commission Expires:

Form 4506T-EZ

Short Form Request for Individual Tax Return Transcript

OMB No. 1545-2154

(Rev. January 2012)
Department of the Treasury Internal Revenue Service

▶ Request may not be processed if the form is incomplete or illegible.

Tip. Use Form 4506T-EZ to order a 1040 series tax return transcript free of charge, or you can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

1a	Name shown on tax return. If a joint return, enter the name shown first.		rst social security number or individualtaxpayer lentification number on tax return
2a	If a joint return, enter spouse's name shown on tax return.		cond social security number or individual expayer identification number if joint tax return
3	Current name, address (including apt., room, or suite no.), city, state, and ZIP co	ode (see instr	uctions)
4	Previous address shown on the last return filed if different from line 3 (see instru	ictions)	
5	If the transcript is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. T IRS has no control over what the third party does with the tax information.		
	Third party name	T	elephone number
	Norwell Community Housing Trust Address (including apt., room, or suite no.), city, state, and ZIP code		
	PO Box 345 Norwell, MA 02061		
	mation, you can specify this limitation in your written agreement with the third part Year(s) requested. Enter the year(s) of the return transcript you are requesting (10 business days.	-	"2008"). Most requests will be processed within
	Check this box if you have notified the IRS or the IRS has notified you that of involved identity theft on your federal tax return.	one of the yea	rs for which you are requesting a transcript
	 If the IRS is unable to locate a return that matches the taxpayer identity informat seen filed, the IRS may notify you or the third party that it was unable to locate a re 		
aul	tion. Do not sign this form unless all applicable lines have been completed.		
	nature of taxpayer(s). I declare that I am the taxpayer whose name is shown on and or wife must sign. Note. For transcripts being sent to a third party, this form		
		1	Phone number of taxpayer on line 1a or 2a
\:	Signature (see instructions)	Date	l .
ig ler		I	
	Spouse's signature	Date	

For Privacy Act and Paperwork Reduction Act Notice, see page 2. DXA

Form **4506T-EZ** (Rev. 1-2012)

APPLICATION CHECKLIST

THIS APPLICATION IS NOT COMPLETE IF NOT SUBMITTED WITH:

	Completed application with signed and notarized affidavit (signed by all owners)
	Copies of your most recent Federal and state tax returns with all pages.
	Signed IRS Form 4506-T.
	Picture of area to be worked on.*
	Copies of three estimates for work by professional contractor.**
	Copies of RE Tax Bills for all real estate owned (can be obtained at Town Hall)
	Copy of Driver's License or similar (passport, etc.) showing name, DOB and address.

^{*} A photo of the area requiring work is preferred. A photo from a cell phone can be emailed to the Trust. In lieu of a photo, a Town of Norwell employee can inspect the home and report to the Trust.

^{**}The Trust can accept less than three written estimates when the size of the project doesn't warrant it or if the homeowner is using a known vendor. Please contact the Council on Aging for assistance in obtaining estimates. At least one written estimate is always required in every circumstance.