



Resilient & Ready Home Repair Program Application

This application shall be used by the applicant to apply for assistance under the NYS Resilient & Ready Home Repair Program (Snow Belt Flood Rehabilitation Program). The Program addresses the damages sustained to homes due to three storm events that occurred between July 10th – August 19th, 2024, in select counties of New York State. Homeowners can apply for reimbursement of costs incurred to their primary home, which were not covered by the homeowner's insurance, or, they can apply to get work done for damages incurred. The document list found at the end of the Handbook (to include Proof of Ownership of the Damaged Property and Proof of Income) will need to be furnished by the homeowner in order to receive assistance.

I. Applicant Information

Applicant Name			
Applicant Telephone Number	Cell		Home
Applicant Email Address			
Applicant Mailing Address			
Street			
City			
Zip Code			
Municipality (Town/City/Village where you pay taxes)			
County			

II. Home & Homeowner Information

List all owners (Names on Deed) Supporting documentation will be required to verify ownership.		
Damaged Property Address (if different from above)		
Street		
City		
Zip Code		
County		
Year Home was built		
When did you purchase home?		
Is there a mortgage on property?		
Are you behind on mortgage payments?		
Do you have homeowners' insurance? (please list the carrier, if applicable)		
Do you have flood insurance?		
Have you filed an insurance claim for flood damage repairs (exclude claims for personal property loss).	No	
	Yes, waiting on response	
	Yes, claim was denied	
	Yes, insurance covered claim.	
	Amount covered?	\$
Is this application for reimbursement of costs? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "YES" how much is being requested for reimbursement? (Refer to the program guide to see which eligible activities are allowed to be reimbursed. Link: Program Guide)		



Household Income

Provide the household income information below. Include all members of the household, even those who do not make an income, such as children. Supporting documentation will be required to verify income eligibility for program assistance.

Enter # of People in Household: _____					
Name of Person in Household	Age	Relation	Source of Income (wages, 1099 etc.)	Amount	Frequency of Payment (annual, bi-weekly)
1.					
2.					
3.					
4.					
5.					
6. (List all others)					
Total Household Income (Annual Gross)					

III. Storm Damage

Describe the specific and critical home repairs needed following storm damage. What will a contractor need to do?

- ☐ Basement flooded
- ☒ Replace sump pump that died when basement flooded.
- ☒ Repair siding that fell off after windstorm.

IV. Estimated Cost of Repairs

Repair needed	Estimated cost	Do you have an estimate from a contractor? Or has work already been completed?



Applicant Certification

Check and initial each item and sign this form, to certify that I (we) have reviewed the Program Guidelines agree to the following statements:

	I (we) hereby apply for home repair assistance for damage from recent severe storms.
	I (we) hereby certify the funds will be used to address direct disaster caused damage to the primary residence, which is not covered by any other federal, state, local recovery program funds and said damage is not covered by any third-party insurers.
	I (we) hereby that I (we) are the legal and lawful owners.
	I (we) hereby certify that the statements and information provided in this application are true, accurate, and complete to the best of my (our) knowledge and belief. False statements made knowingly by applicant will disqualify the applicant from participation in the program and may be subject to prosecution.
	I (we) hereby certify that we intend to remain in the home as a primary resident for at least the next 24 months and I (we) understand that we will be required to complete an attestation confirming this.
	I (we) hereby consent and authorize the Snow Belt Housing Company Inc. to: <ul style="list-style-type: none">• obtain verification of information required for compliance within the regulations of this program, including identity, ownership, income, insurance, property tax/utility payments, property condition, contractor estimates.• upon giving reasonable notice, to enter the applicant's property for the purpose of determining what improvements are needed and to inspect completed work.• I (we) hereby give Snow Belt Housing Company, Inc. permission to discuss share this application and/or project information with NYS Homes & Community Renewal.
	I (we) understand that Snow Belt Housing Company, Inc. is the sole arbiter in interpreting the intent and implementation of the Program and Program Guidelines, determining eligibility for program assistance and determining amount of funding awarded as such Snow Belt Housing Company, Inc. decision is final.

Homeowner(s)			
Printed Name		Date	
Signature			
Printed Name		Date	
Signature			
Printed Name		Date	
Signature			



SNOW BELT HOUSING COMPANY, INC.

7500 SOUTH STATE STREET | LOWVILLE | NY 13367

PH: 315-376-2639 | NYS RELAY SERVICE NO. TTD: (800) 662-1220

AUTHORIZATION FOR RELEASE OF INFORMATION

INFORMED CONSENT

I authorize and direct any Federal, State, or Local Agency, Organization, Business, or Individual to release to Snow Belt Housing Company, Inc. any information or materials needed to complete and verify my application for participation, and/or to maintain my continued assistance under one of the following programs:

* Section 221 BHIR	* Rent Assistance Payments (RAP)	*USDA	*DHCR
* Rent Supplement	* Section B Housing Assistance Payments Programs	* Section 236	*AHC
* HCR	* Emergency Solutions Grant	*CDBG	

I give my consent for the release also for the minor children in my care who live with me. I understand and agree that this authorization or the information obtained with its use may be given to and used by the Department of Housing and Urban Development (HUD) and Rural Development in administering and enforcing program rules and policies.

INFORMATION COVERED

I understand that, depending on program policies and requirements, previous or current information regarding myself or my household may be needed. Verifications and inquiries that may be requested, include but are not limited to:

* Identity	* Social Security Number(s)	* Marital Status
* Rental Activity	* Medical Expenses	* Child Care Allowances
* Credit History		

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for and continued participation in the housing assistance program.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information on (depending on program requirements) include but are not limited to:

* Previous Landlords and Public Housing Agencies (PHA)	* Past and Present Employers
* Credit Providers/Credit Bureaus	* Social Security Administration
* Support and Alimony Providers	* Medical and Child Care Providers
* Welfare Agencies	* Banks and other Financial Institutions
* Veterans Administration	* State Unemployment Agencies
* Schools and Colleges	* Post Offices
* Retirement Systems	
* Utility Companies	

COMPUTER MATCHING NOTICE AND CONSENT

I understand and agree that HUD or a PHA may conduct computer matching programs to verify the information supplied for my certification or recertification. If a computer match is done, I understand that I have a right to notification of any adverse information found and a chance to disprove incorrect information. HUD or the PHA may in the course of its duties exchange such automated information with other Federal, State, or Local Agencies, including but not limited to: State Employment Security Agencies, Department of Defense, Office of Personnel Management, the U. S. Postal Service, the Social Security Agency, and State Welfare and Food Stamp Agencies.

AUTHORIZATION FOR RELEASE OF INFORMATION (CONT.)

CONDITIONS

I agree that a photocopy of this authorization may be for the purposes stated above. The original of this authorization is on file with the management office and will stay in effect for a year and one month from the date signed. I understand I have a right to review my file and correct any information that I can prove is correct.

NOTE: *This general consent may not be used to request a copy of a tax return. If a copy of a tax return is needed, IRS Form 4506 "Request for copy of Tax Form" must be prepared and signed separately.*

PARTICIPANT ACKNOWLEDGEMENT

Signature	(Print Name)	Date
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Signature	(Print Name)	Date
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STAFF WITNESS SIGNATURE

Signature	(Print Name)	Date
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This institution is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.



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E: information@snowbelt.org | FAX: 315-376-2518

PROGRAM HANDBOOK: Flood Rehabilitation

NYS Resilient & Ready Home Repair Program

HANDBOOK FOR SNOW BELT FLOOD REHABILITATION

TABLE OF CONTENTS

A. The Handbook's Purpose	1
B. Qualifying for the Program	1-3
C. Who Will Determine the Work that is Needed	3
D. Repairs That Can Be Done	3-4
E. Financing	4
F. How the Program Works	4-5
G. Hiring a Contractor	5
H. REQUIRED DOCUMENTATION	6

IF YOU NEED ANY ASSISTANCE FILLING OUT THIS APPLICATION FOR ANY REASON, PLEASE ADVISE OUR STAFF OF YOUR NEEDS AND WE WILL BE HAPPY TO HELP

This institution is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.





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PROGRAM APPLICATION: Flood Rehabilitation 2024 NYS Resilient & Ready Home Repair Program

A. The Handbook's Purpose

The Flood Rehabilitation Program is intended to provide assistance to homeowners that were impacted by the extreme weather during the month of July 2024. Rehabilitation activities are meant to offer emergency home repair assistance and/or reimbursement to impacted homeowners for whom home and/or flood insurance coverage is not sufficient to return the home to safe and habitable condition.

Projects can be owner occupied or rental properties occupied by households who are at or below 150% of the Area Median Income. See Section B1.

This handbook will explain Snow Belt's Flood Rehabilitation Program and how it works. It is meant to be a guide to the program, not a definitive presentation of the program's policies.

Program funds shall be used for direct disaster caused damage to the primary residence, not covered by any other federal, state, or local recovery program funds, or any third-party insurers.

Any specific questions or concerns related to the program should be directed to:

**Snow Belt Housing Company, Inc.
7500 South State Street Lowville,
New York, 13367
(315) 376-2639 Ext. 4**

**Grievances can be submitted in writing at any time using the above address (C/O Administration) or by emailing information@snowbelt.org.*

B. Qualifying for the Program

Homeowner's who are interested in participating in Snow Belt Housing Company, Inc.'s Housing Flood Rehabilitation Program will be required to demonstrate eligibility for assistance.

Eligibility will be based on the following six qualifiers: income eligibility, documentation of ownership, unit eligibility, property tax payments, homeowner's insurance, and maximum rehabilitation assistance.

1. **Income Eligibility:** Household income will determine the amount and type of grant funding you are eligible for. The income guidelines below are based on the NYS Homes and Community Renewal annual income limits based on household size.

Multi-family projects that receive Flood assistance must be owner occupied and have at least 51% of the units in each building occupied by tenants who are at or below the HCR set Household Income Limits (see below). To be eligible for the program your tenant's gross income must not exceed the funding source's specified income limits for the size of each household.



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PROGRAM APPLICATION: Flood Rehabilitation 2024

NYS Resilient & Ready Home Repair Program

**See Verification of Household Income section below for more details on how to calculate household income.*

**NYS HCR Flood Resiliency Program Income Limits for Lewis County NY*

COUNTY	MEDIAN	(1) PERSON	(2)	(3)	(4)	(5)	(6)	(7)	(8)
LEWIS	\$78,700	\$87,750	\$100,200	\$112,800	\$125,250	\$135,300	\$145,350	\$155,400	\$165,450

- 2. Ownership:** To qualify for the program your home must be owned by the person applying for assistance.
 - All homes must be used as a permanent residence and must be located in Lewis County.
 - Proof of ownership must be on file at the County Clerk's office.
- 3. Unit Eligibility:** Repairs are limited to emergency repairs required to make the home safe, sanitary and habitable. Damage must be related to the extreme weather that occurred in July of 2024 in Lewis County; pictures or video of damage should be provided when available. In reference to applications for reimbursement, homeowners will need to provide proof of the completed repair; including receipts of all supplies and labor. Snow Belt staff will confirm completed work, and also make a determination that the repair meets the cost reasonability standard.

The following units are **NOT ELIGIBLE**: Mobile homes, rent-to-owns, properties with land contracts, any without a recorded deed. Seasonal residences or former seasonal residences converted to full time use are also not eligible. Any home located on land not owned by the homeowner.
- 4. Property Tax:** All property taxes must be current and you must provide a copy of each tax bill and receipt showing paid.
- 5. Homeowner's Insurance:** You must have fire insurance coverage on your property and flood insurance coverage where applicable, and you must provide a copy of the insurance certificate showing current coverage and proof of payment.

Owners must provide proof of the amount of assistance being paid for by insurance or coverage denial.
- 6. Maximum Rehabilitation Assistance:** This program is dependent on the amount of grant funding available and must adhere to award guidelines. Non-urgent repairs or repairs to ancillary structures will not be funded under this program. Homes that exceed the amount of funds available will be deemed ineligible; but may be referred to other eligible programs for assistance. *See section D for a more comprehensive list of eligible and ineligible costs.*

All items must be able to be completed within the eligible time frame.

**Verification of Household Income (See Required Documentation List)*

- Your gross annual income for determining eligibility includes income from **all** sources; from **all**



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PROGRAM APPLICATION: Flood Rehabilitation 2024

NYS Resilient & Ready Home Repair Program

adult members of your household (proof of identity is required), including:

- a. All wages and salaries, commissions, overtime pay, fees, tips and bonuses, and other compensation for personal services (before any payroll deductions).
 - b. Net business or farm income. (Net business or farm losses and depreciation, will not be deducted from other sources of income when calculating total household income.)
 - c. Interest, dividends, and other net income of any kind from real or personal property.
 - d. All gross periodic payments received from social security, worker's compensation, pensions, disability, child support, alimony or unemployment benefits, and welfare assistance and other similar types of periodic receipts for all family members.
 - e. All regular pay, special pay, and allowances of a member of the Armed Forces (whether or not living in the dwelling) who is head of the family, spouse, or other person whose dependents are residing in the unit.
- Gross income calculations shall not include:
 - a. Income from the employment of children (including foster children) under the age of 18 years.
 - b. Cash value of food stamps, real estate tax exemptions, earned income tax credit, or similar types of assistance.
 - c. Payments received for foster care and certain public volunteer, service and training programs.
 - d. Lump sum additions to family assets (e.g. inheritances, insurance policy death benefit payments, settlement for personal/property losses, and medical expense reimbursements).
 - e. Income of a live-in aide.
 - f. The special pay to a household member serving in the Armed Forces who is exposed to hostile fire.
 - g. Temporary, nonrecurring, or sporadic income.
 - h. Lump sum payments of SSI and Social Security benefits.
 - i. Amount of educational scholarships paid directly to a student, educational institution, or a veteran.
 - j. Periodic and/or regular contributions and/or gifts received from persons not living in the dwelling.

Note related to income: Those with more than \$15,000 in liquid assets may be ineligible for the program unless there is a hardship. Liquid assets would include, but not be limited to, checking and savings accounts, stocks, bonds, certificates of deposit, and the value of any real estate less outstanding debt (not including homeowner's principal residence).

C. Who Will Determine the Work that is Needed?

Snow Belt Housing's Rehabilitation Specialist or the Construction Manager will review your application and develop an approved scope of work item list by either:

- conducting a physical inspection to confirm damage was caused by the extreme weather and health/safety features are included; or
- conducting a physical inspection to confirm damage was caused by the extreme weather, the work has been completed and review the invoices for equipment and labor.



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PROGRAM APPLICATION: **Flood Rehabilitation 2024** **NYS Resilient & Ready Home Repair Program**

Approved scope of work items will be based on the inspections and discussions with the owners of the properties. Please note, where applicable, certain work items or testing may be required in order to comply with federal, state or local code regulations, and/or ordinances.

D. Repairs That Can Be Done

The program seeks to offer emergency home repair assistance and/or reimbursement to Lewis County impacted homeowners for whom home and/or flood insurance coverage is not sufficient to return the home to safe and habitable condition. **The purpose of this program is to address the health and safety of your home related to storm/flood damage that occurred in July 2024.**

Grant/loan money is not intended to be used for improvements that only make your house look nicer or repair damage not related to the extreme weather conditions referenced above.

Applicant awards under this program will be based on scope of work approved by Snow Belt Housing, but in no event will the total grant award to any single applicant exceed \$50,000, per NYS statute. Homes must meet all Code

The following includes a priority list of repairs eligible for assistance.

- a. Environmental health hazard mitigation activities related to the repair of disaster caused damage to a Primary Residence. This may include, lead based paint abatement, asbestos removal, mold remediation, or remediation of other health hazards, including testing and clearance costs
- b. Electrical and plumbing systems repair or replacement
- c. Sump pump repair or replacement, (if ancillary to a larger repair or replacement project)
- d. Furnaces, water heaters, water filtration systems, heating systems and sump pumps repair or replacement
- e. Refrigerators, cooking stoves and built-in appliances, such as dishwashers, repair or replacement
- f. Laundry washers and dryers repair or replacement
- g. Permanently installed paneling, wallboard, bookcases and cabinets repair or replacement
- h. Drywall or finishing
- i. Insulation
- j. Window and door repair or replacement
- k. Siding repair or replacement
- l. Flooring repair or replacement
- m. Bathroom repair
- n. Well or septic replacement, or connection to a municipal system
- o. Fuel tanks (oil or propane, but not actual fuel replacement)
- p. Dehumidifiers (eligible for replacement if ancillary to a larger repair or replacement project)



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Ineligible activities include:

- a. Deferred maintenance not related to storm damage;
- b. Repairs that are cosmetic in nature and not listed above;
- c. Docks; boathouses; guest homes, pool houses, sheds, detached garages;
- d. Personal property, such as vehicles, furniture, household goods, electronic equipment, window coverings and clothing;
- e. General home improvements not related to direct disaster related damage;
- f. Heating or cooking fuel replacement;
- g. Portable and window air conditioners (exceptions for health-based hardships will be considered);
- h. Portable heaters, microwaves, and dishwashers;
- i. Small countertop appliances, such as coffee pots, toaster, or blenders;
- j. Garage door openers;
- k. Swimming pools, hot tubs, saunas, or associated equipment;

- l. Luxury countertops, such as stone, granite, composite, or high-end luxury fixtures and appliances;
- m. Fireplaces including wood, gas, or electric (exceptions for disaster caused damage to chimneys will be considered);
- n. Walks, decks, patios, fences, lawns and landscaping (exceptions will be considered if access to Primary Residence is impeded, or poses a documented safety hazard);
- o. Covered porches, patios, decks, stairs or driveways (exceptions will be considered if access to Primary Residence is impeded, or poses a documented safety hazard).
- p. Common areas of residential condominium and cooperative buildings, or associations.
- q. Food freezers;
- r. Loss of use or access to the waterfront, beachfront for personal enjoyment;
- s. Pre-existing damage or repairs resulting from deferred maintenance, and not directly disaster caused;
- t. Moving and storage fees;
- u. Supplemental work after a project has been deemed complete and the initial application is closed;

All rehabilitation projects shall include installation of appropriate smoke and carbon monoxide detectors if such equipment is not currently installed.

The grant will not pay for any work that isn't under contract through this program.

E. Financing

A grant for up to 100% of eligible rehabilitation work may be available for homeowners whose income is at or below 150% of the Lewis County median income (HCR determined income level referenced above). Homeowner's must sign the Homeowner Attestation Form indicating they will remain in the home as a primary resident for at least the next 24 months.



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PROGRAM APPLICATION: Flood Rehabilitation 2024 NYS Resilient & Ready Home Repair Program

Assistance is ultimately based on the availability of funds and guidelines set forth by the funding source.

F. How the Program Works

1. Return a completed application, and send all of the required verification documents to Snow Belt. *Verification documents include items listed in Section H.*
2. Once the homeowner's initial eligibility is verified, a Snow Belt representative will schedule an inspection appointment and, when required, initial environmental testing appointments.
3. The preliminary inspection will be completed to verify the scope of work items are health and safety items related to the extreme weather referenced above. Additional considerations concerning the scope of work:
 - Please note, renovations made to properties located within Special Flood Hazard Area ("SFHA") must meet requirements as defined by federal and State law, and regulations.
 - State funded activities require review by the State Historic Preservation Office unless all project activities qualify as exempt.
4. Once the scope of work is approved and agreed upon, the homeowners should perform reasonable efforts to obtain at least 2 estimates for items requested and Snow Belt representatives will review the estimates for cost reasonableness.
 - Reasonable efforts to obtain estimates shall include documenting the efforts to obtain bids and should detail a homeowner's effort to request an estimate from at least 7 different contractors when you are not able to obtain 2 estimates.
 - Homeowner's can select the higher bidder, but the homeowner must agree (in writing) and contribute the difference in the estimates. Exceptions may be considered on a case-by-case basis.
 - Reimbursement requests may require Snow Belt to compare actual invoices to cost estimates for similar products or services available to ensure cost reasonability standard has been met and prevent price gouging.
5. Once the costs of your rehabilitation project are fixed and financing is available, Snow Belt Housing Company, Inc. will develop a construction agreement that will be signed by the homeowner and contractor.
 - No changes can be made to the construction agreements once the documents are signed unless there is an approved change order in writing and funds are available.
 - Eligible homeowners (or their approved contractors) may not begin work on an approved property until all required building, or other permits have been issued unless it is a reimbursement project.



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PROGRAM APPLICATION: **Flood Rehabilitation 2024** **NYS Resilient & Ready Home Repair Program**

You should understand that it will be your responsibility to carry out your housing rehabilitation plan. This will include communicating and working with the contractors or suppliers involved.

6. The final payment for contracted work will occur only after a determination that the work has been completed in accordance with the construction agreement. This determination will include your approval and indicate that you are satisfied with the work. It is important that you communicate any concerns during the final inspection before you sign.

G. Hiring a Contractor

Any contractor may work on your home if he/she provides proof of lead certification (Environmental Protection Agency Renovation Repair and Paint (“EPA RRP”) Regulations), a certificate of liability insurance, and proof of workmen’s compensation insurance.

Contractors must carry a minimum of \$300,000/600,000 in the event of bodily injury or death of any one person in any one accident and \$50,000 in the event of property damage arising out of the work performed by the contractor.



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Complete applications with documents must be received by October 7th, 2024.

Applications will not be accepted after this date.

H. Required Documentation

The following documents are required with your Flood Rehabilitation Program application:
WE CAN MAKE COPIES OF YOUR ORIGINAL DOCUMENTS.

1. Complete Application:

- Handbook and Application (complete and signed)
- Release of Information
- Homeowner Attestation/Tenant Rental Attestation
- Rental Properties may be required to provide a copy of the lease and/or other required documents as directed by the awarding agency.

2. Income Eligibility:

- Federal Income Tax return, signed with any applicable schedules, W-2s, 1099s. (Current filing) Two (2) years for persons who are self-employed.
- Most recent payroll stubs (covering last 3 months) – showing year-to-date earnings*.
- Benefit Statement/Award Letter (complete, if applicable) including but not limited to: Social security, SSI, pensions, unemployment benefits, welfare, child support, alimony, trusts etc.
- Two (2) Complete Bank statements for all checking, savings and trust accounts. Mini-Statements not acceptable.
- Asset Income: Performance Report including but not limited to: Stocks, bonds, IRA's, 401K's, CD's, extra checking accounts, extra savings accounts, trusts etc.)
- Award Letter for public assistance: Social Services (TANIF, HEAP, SNAP) if applicable.
- A photo ID and SS card must be presented for all adults who reside in the household at the time of the application.
- Copies of birth certificates and social security cards for all children who reside in the home
- Current credit report (one can be obtained for you if you do not have a current one).
- *Rental properties: information above is based on the renter's household income.*

3. Documentation of Ownership:

- Recorded deed to your property (complete).

4. Unit Eligibility:

- Proof of damage (if available)
- Estimates for repairs (2 or reasonable efforts to obtain 2 required)
- Receipts for reimbursements

5. Property Tax Payments:

- Property Tax Bills (complete)
- Paid receipts from collector (County/Town, School, and Village).

6. Homeowner's Insurance:

- Declaration page from Homeowner's Insurance and Statement of payment.
- Claim Submission and Claim Response

**If your application is rejected and you do not agree with the decision,
you may send a written complaint to:**

Snow Belt Housing Company, Inc. 7500 S State Street, Lowville, NY 13367 Attn: Executive Director