



Dear Homeowner:

Thank you for choosing Home HeadQuarters, Inc. for your home improvement and repair financing needs.

Please note that there are several required supporting documents, which must be submitted along with your Home Improvement Loan Application, listed below. Incomplete applications cannot be processed and will be returned to you.

- Proof of income for all members who reside in the household** (e.g. 3 recent pay stubs; benefit letter for SSI, Social Security, pension, unemployment, workers compensation, disability, etc.). If a household member does not have any income, including unemployment, workers compensation, etc., please submit a signed and dated written statement from that person attesting that they do not have any income. If a household member is a full time student over the age of 18, please provide a current semester course schedule showing name and number of credits being taken.
- Copy of Federal Tax Returns from the last 2 years.** If you do not file Federal Tax returns, please sign at the bottom of page 3 of the application or provide a written statement indicating that you do not file.
- Bank Statements from the last 3 months for all accounts for all household members.**
- Copy of current Mortgage Statement, showing monthly payment and interest rate.**
- Copy of the recorded deed to your home with legal description attached (Schedule A).**
- Copy of the declarations page of your homeowner's insurance policy stating current policy period, amount of coverage & listing all mortgages against the property.**
- Copy of picture I.D.** (e.g. driver's license, passport, benefits card)

Additionally, we may request additional documents in order to qualify you for special programs, if applicable.

If you have any questions, please feel free to contact us at 315-474-1939 or by email at info@homehq.org. We look forward to working with you!

Sincerely,

Home HeadQuarters Home Improvement Lending Team

1% HOME IMPROVEMENT LOAN COVID-19



Loans of up to \$20,000, including a grant component, are available to income-eligible homeowners in specified areas throughout Onondaga County for exterior or emergency home repairs. Homeowners must have experienced a COVID-19 related hardship at some point during the pandemic: January 1, 2020 – current. Please complete the COVID-19 impact checklist on page 3 of this application.

IS YOUR REPAIR AN EMERGENCY?

Leaking Roof No Heat No Hot Water Sewage Back-up Other: _____

COVID IMPACT

Have you had a COVID-19 related impact (i.e. job loss, loss of income) at any time during the pandemic? Yes No

CUSTOMER INFORMATION

Borrower Name:		Co-Borrower Name:	
Social Security Number:		Social Security Number:	
Date of Birth:		Date of Birth:	
Address (Street):		Address (Street):	
(City, Zip):		(City, Zip):	
<i>Please circle preferred method of communication below</i>		<i>Please circle preferred method of communication below</i>	
Home Phone:	Cell:	Home Phone:	Cell:
Email:		Email:	

EMPLOYMENT INFORMATION

Name of Employer:		Name of Employer:	
No. of Years	Self Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of Years	Self Employed? <input type="checkbox"/> YES <input type="checkbox"/> NO
Annual Income:		Annual Income:	

HOUSEHOLD INFORMATION

Please list ALL persons currently living in your household (attach separate sheet of paper if needed)

Estimate annual income if necessary. Please indicate if any household members are full-time students

Name	Date of Birth	Annual Income	Source of Income

1% HOME IMPROVEMENT LOAN COVID-19



RENTAL PROPERTY INFORMATION

Do you receive rental income? Yes No If yes, monthly amount:

PROPERTY INFORMATION

Is the property you are renovating your Primary Residence? Yes No # of Units

Property Deed/ Title in the name of: Are your property taxes escrowed? Yes No

Please list institutions or persons and mailing addresses of those who hold a mortgage on the property.

Name	Address	Balance

Please describe needed **repair items with estimated costs** (attach another sheet of paper if needed):

****We strongly encourage you to get an estimate from a contractor as soon as possible.****

Repair Item

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

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, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish this information, please check the box 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.)

Borrower <input type="checkbox"/> I do not wish to furnish this information	Co-Borrower <input type="checkbox"/> I do not wish to furnish this information
Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Asian American <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Other	Race <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Asian American <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Other
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other: _____	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other: _____



1% HOME IMPROVEMENT LOAN COVID-19



COVID-19 IMPACT CHECKLIST

Please check all applicable COVID-19 impacts that you or someone in your household has experienced **at any time between January 1, 2020 to present.** Home HeadQuarters reserves the right to ask for evidence of any of the COVID-19 impacts selected below:

- Loss of employment because of COVID-19;
- Furloughed because of COVID-19;
- Reduction in work hours due to COVID-19, resulting in loss of income;
- Reduction in savings/financial safety net due to COVID-19;
- Mortgage in forbearance due to COVID-19
- Inability to find employment or earn income because of COVID-19;
- Bankruptcy resulting from financial impact of COVID-19;
- Emergency travel costs attributable to COVID-19;
- Medical expenses attributable to COVID-19;
- Needing to take extended time off work due to COVID-19, either to:
 - Care for my child(ren) whose school is/was closed; or
 - Care for a family member who is/was sick with COVID-19; or
 - Care for a family member who is disabled or dependent and no longer accepts outside care due to the risks of COVID-19;
- Needing to take extended time off work because I have tested positive for COVID-19;
- Needing to take extended time off work because I was waiting for COVID-19 test results;
- Significant increase in out-of-pocket expenses as a direct result of caring for myself or a family member who is/was elderly, disabled, or sick due to COVID-19;
- Increased expenses related to performing essential work;
- Increased expenses due to caring for my child(ren) whose school is/was closed, including increase technology costs, food costs, childcare/babysitters, or other directly related expenses.
- Reduction of income because one (or more) of my tenants has defaulted on a significant amount of their rent payments;
- Other (please explain): _____

1% HOME IMPROVEMENT LOAN COVID-19



SIGNATURES

I authorize Home HeadQuarters, Inc. (HHQ) to obtain credit reports in connection with this application and any loan or account established, as well as any update, renewal, extension, review or collection thereof. HHQ will use the credit report to confirm my residency address, review existing credit obligations, payment history, and determine whether my income is eligible to support a loan payment. Upon my request, HHQ will provide me with the name and address of the Consumer Reporting Agency contacted to supply the report. I understand that credit inquiries have the potential to impact my credit score.

I also authorize HHQ to verify any information contained in this application with other parties and to report its transactions with me. I authorize HHQ, the lender, to share information I have provided on this application and any other information relevant to my home improvement service with any of the Program partners.

I certify that all statements made in this application are true and are made for the purpose of requesting home improvement services.

Home HeadQuarters, Inc., its agents and/or assignees, reserves the right to inspect any and all work associated with a home improvement loan or grant or any other HHQ financial product or service.

This application in no way guarantees or implies funding and/or service through Home HeadQuarters, Inc., its agents and/or assignees.

Signature of Borrower	Date
Signature of Co-Borrower	Date

REQUIRED SUPPORTING DOCUMENTS

- Proof of income for all members who reside in the household** (e.g., 3 recent pay stubs; benefit letter for SSI, Social Security, pension, unemployment, disability, etc.). If a household member does not have any income, including workers compensation, unemployment, etc., please submit a signed and dated written statement from that person attesting that they do not have any income. If a household member is a full-time student over the age of 18, please provide a current semester course schedule showing name and number of credits being taken.
- Copy of Federal Tax Returns from the last 2 years.** If you do not file Federal Tax Returns, please sign here:

I _____ **do not file taxes.**

- Bank Statements from the last 3 months** for all accounts for all household members
- Copy of current mortgage statement**, showing monthly payment and interest rate
- Copy of the recorded deed to your home with legal description attached** (Schedule A)
- Copy of declarations page of your homeowner's insurance policy stating current policy period, amount of coverage & listing of all mortgages against the property**
- Copy of picture I.D.** (e.g., driver's license, passport, benefits card)
- Please Note:** We may ask for additional documents in order to qualify you for special programs, if applicable.

