

**LEADSAFE HOMES PROGRAM
DEVELOPMENT LOAN APPLICATION**

Owner of property (as it appears on deed): _____

Property/Project Address: _____

APPLICANT INFORMATION:

Organization Name:	
Address:	
City/Town/Zip:	
Contact Person:	
Phone & Fax:	
E-mail:	
Tax ID Number:	

Name of project (if any): _____

Date of original construction: _____

of buildings requiring lead abatement: _____ # of units: _____

of units occupied: _____ # of units vacant: _____ # of children under 6: _____

Estimated total project cost: \$ _____ Lead Funds Requested: \$ _____

Property will be:

Rented to income-eligible tenants Yes No

Sold to income-eligible buyer Yes No (must be within 18 months of loan closing)

OTHER FUNDING SOURCES:

PROGRAM	Funding Amount Requested	Funding Amount Approved
1)	\$	\$
2)	\$	\$
3)	\$	\$
4)	\$	\$
5)	\$	\$
6)	\$	\$

of tenant households at 50% of HUD's Median Family Income: _____ # at 80%: _____

Has licensed lead contractor been selected? _____ If yes, name: _____

Projected start work date: _____ Projected completion date: _____

If project is underway, please describe current status: _____

Rhode Island Housing LeadSafe Homes Program, 44 Washington St., Providence, RI 02903; phone: 450-1350

REQUIRED DOCUMENTS *

Please submit the following documents with this application:

- ___ Copy of Deed to the property with legal description
- ___ Copy of current property insurance policy
- ___ Copy of current flood insurance policy (if applicable)
- ___ Copy of current property tax bill with assessed value
- ___ List of all funding sources, amounts and commitment dates
- ___ Copy of rehabilitation budget
- ___ Copy of Comprehensive Lead Inspection (if completed)
- ___ Copy of work specifications (if completed)
- ___ Completed Tenant Agreement Forms (if rental property)
- ___ Schedule of values on the scope of work

* If property owner is a Limited Liability Company, the following additional documentation is needed:

- ___ Certified Copies of the Articles of Organization
- ___ Good Standing Certificate
- ___ Members Certificate

AGREEMENT & CERTIFICATION

The undersigned specifically agrees that the loan requested by this application will be secured by a first mortgage or deed of trust on the property described herein and that Rhode Island Housing, its agents, successors and assigns make no representations or warranties, express or implied, to the Applicant regarding the property, the condition of the property or the value of the property.

The undersigned certifies that the information provided in this application is true and correct as of the date set forth in this application.

Organization Name: _____

By: _____ Title: _____
(Print or type your name)

_____ Date: _____

Signature

Please mail completed application and required documents to:

**Lianne Nikitas
Program Coordinator
LeadSafe Homes Program
Rhode Island Housing
44 Washington Street
Providence, RI 02903**

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