



CITY OF CLOVIS

MOBILE HOME REHABILITATION AND REPLACEMENT LOAN PROGRAM

Thank you for your interest in the City of Clovis' Mobile Home Rehabilitation and Replacement Loan Program. This program is designed to encourage mobile home owners to improve/eliminate substandard and unsafe living conditions. Income-eligible mobile home owners can apply to the City for a zero percent (0%) interest, deferred loan of up to \$60,000.

ELIGIBILITY REQUIREMENTS

1. Total gross annual household income cannot exceed the following amounts (adjusted for household size):

1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
\$33,000	\$37,700	\$42,400	\$47,100	\$50,900	\$54,650	\$58,450	\$62,200

2. Mobile home title must be recorded with either the California Department of Housing and Community Development or the California Department of Motor Vehicles.
3. Home must be owner-occupied (no rentals).

Applications will be accepted and processed on a first-come, first-served basis. Only complete applications will be accepted. Complete applications will include the following:

1. All individuals living in the home must be listed on the application; and
2. All applicable items identified on the application checklist must be submitted at the time of application submission.

Submit completed applications and supporting documentation by mail or in person to the following:

Heidi Crabtree, Housing Program Coordinator
 Clovis Planning and Development Services Department
 1033 Fifth Street
 Clovis, CA 93612



NOTICE OF NON-DISCRIMINATION: It is the policy of the City of Clovis to not discriminate on the basis of race, color, national origin, religion, sex, and sexual preference. If you have a complaint or concern, please contact the City of Clovis 504 Coordinator at 559-324-2060.

Need Assistance Contacting the City of Clovis?
 California Relay Service provides specially-trained Communication Assistants to relay conversations between deaf, hard of hearing, or speech-loss individuals and people who use a standard telephone. You can use this service to contact the City of Clovis by dialing 711.

Owner Occupied Mobile Home Rehabilitation/Replacement Program Application



PROPERTY INFORMATION					
Property to Be Rehabilitated		City		State	Zip Code
Name of Mobile Home Park	Make/Model	Year Built	Year Bought		
# Bedrooms	# Bathrooms	Single Wide / Double Wide	Dimensions & Square Footage		
Monthly Utilities (average) Water \$ _____ Sewer \$ _____ Garbage \$ _____ Gas \$ _____ Electricity \$ _____		Annual Property Taxes (or Fees) \$ _____	Annual Homeowners Insurance \$ _____		
First Mortgage Lender (Name, Street, City, State, Zip)		Second Mortgage Lender (Name, Street, City, State, Zip)			
ACCOUNT # _____		ACCOUNT # _____			
MONTHLY PAYMENT \$ _____ BALANCE \$ _____		MONTHLY PAYMENT \$ _____		BALANCE \$ _____	
Describe Work Desired:					
Estimate Current Value \$ _____					
APPLICANT INFORMATION					
Last	First	Middle	Home Phone () ()	Work Phone () ()	
Present Street Address	City	State	Zip Code	No. of Years _____ Own Rent	
Marital Status Married Unmarried (single, divorced, or widowed) Separated		# Dependents	Ages		
Social Security Number	Race	Ethnicity	Gender	Disabled: (Y/N)	Date of Birth
CO-APPLICANT INFORMATION					
Last	First	Middle	Home Phone () ()	Work Phone () ()	
Present Street Address	City	State	Zip Code	No. of Years _____ Own Rent	
Marital Status Married Unmarried (single, divorced, or separated) Separated		# Dependents	Ages		
Social Security Number	Race	Ethnicity	Gender	Disabled: (Y/N)	Date of Birth

ANNUAL INCOME				
Source	Applicant	Co-Applicant	Member 18 or Older	Total
Salary (OT, Commissions, Tips)	\$	\$	\$	\$
Interest and/or Dividends	\$	\$	\$	\$
Net Income from Business	\$	\$	\$	\$
Net Rental Income	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Pensions	\$	\$	\$	\$
Retirement Funds	\$	\$	\$	\$
Unemployment Benefits	\$	\$	\$	\$
Worker's Compensation	\$	\$	\$	\$
Alimony, Child Support	\$	\$	\$	\$
Welfare Payments	\$	\$	\$	\$
Other:	\$	\$	\$	\$
			TOTAL	\$

ASSETS				
Type	Cash Value	Annual Income from Assets	Bank Name	Account No.
Checking Account(s)	\$	\$		
	\$	\$		
Savings Account(s)	\$	\$		
	\$	\$		
Stocks	\$	\$		
Other	\$	\$		

LIABILITIES (List outstanding obligations including auto loans, credit cards, charge accounts, credit union loans, personal loans, real estate loans, etc.)				
Type	Creditor's Name	Monthly Payment	Unpaid Balance	Due Date
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

Monthly Alimony \$ Monthly Child Support \$ Monthly Child Care \$

If a "Yes" answer is given to any questions below, please explain on an attached sheet:

- Do you have any outstanding unpaid judgments? Yes No Amount (if applicable) \$ _____
- In the past 7 years, have you been declared bankrupt? Yes No
- Are you a party in a law suit? Yes No

HOUSEHOLD COMPOSITION (List the head of your household and all members who live in your home. Give relationship of each family member to head.)			
Full Name	Relationship	Date of Birth	Social Security Number

- Does anyone live with you now who is not listed above? Yes No
- Does anyone plan to live with you in the future who is not listed above? Yes No

The information provided below is true and complete to the best of my/our knowledge and belief. I/We consent to the disclosure of such information for purposes of income and verification related to my/our application for financial assistance. I/We understand that any willful misstatement of material fact will be grounds for disqualification.

Applicant _____ Date _____

Co-Applicant _____ Date _____

APPLICATION CHECKLIST

Please use the checklist below to ensure your application is complete.

Basic Eligibility (REQUIRED FOR ALL APPLICATIONS):

1. Completed and signed application; and
2. Proof of mobile home ownership (e.g., copy of title); and
3. Most recent mortgage statements for all liens against the mobile home (if applicable); and
4. Verification of income for all adults (18 years and older) residing in the home. The following chart will indicate what type of documentation will be accepted for each type of income:

TYPE OF INCOME	REQUIRED DOCUMENTATION
Wages	Two months of most recent pay stubs.
Self-Employment	Two years of self-employment income (Schedule C) or 1040 tax form.
Social Security or Supplemental Security Income	Most recent benefit statement from the Social Security Administration.
Unemployment Compensation or Worker's Compensation	Copy of most recent benefit statement.
Retirement Account (401K, 403B, 457, CD or IRA)	Most recent retirement account statement.
Child Support or Alimony	Court order showing monthly payment, or most recent statement from enforcement agency.

BANK STATEMENTS SHOWING DIRECT DEPOSITS WILL NOT BE ACCEPTED AS VERIFICATION OF INCOME

For application questions, contact:

Heidi Crabtree, Housing Program Coordinator
(559) 324-2094
heidicr@cityof clovis.com