

# City of Stanton CDBG Housing Rehabilitation Grant Application

#### Introduction

The City of Stanton is offering a CDBG Housing Rehabilitation Grant Program to assist senior homeowners with important health, safety, and accessibility improvements. This grant provides up to \$9,000 per household for eligible modifications. To qualify, applicants must:

- Own and occupy their home in the City of Stanton
- Be 65 years of age or older
- Have a household income at or below 80% of Area Median Income (AMI)

This is a grant program — no repayment, lien, or loan documents will be recorded on your property. Approved applicants will enter into an agreement with an approved contractor. In applying, applicants acknowledge that the City is acting only as a grantor of funds and is not a party to any project agreement. Applicant agrees to indemnify the City for any work undertaken pursuant to this grant.

## **Housing Rehabilitation Grant Process**

#### 1. Apply

Complete and submit this application along with all required documentation listed in Section 6

#### 2. Eligibility Review

CivicStone, Inc. will review your application for completeness, verify income eligibility (80% AMI or below), and confirm ownership and age requirements (65+), as well as U.S. citizenship or eligible residency status.

#### 3. Doctor's Assessment Form

All applicants must submit a Doctor's Assessment Form. This form allows your physician to confirm your health condition and the medical necessity of the requested improvements. Please remind your doctor about your health situation so the form can be completed accurately and thoroughly. Because program funds are limited, the City of Stanton will use this form, along with household income, to prioritize applicants with the greatest need.

#### 4. Site Visit & Scope of Work

Once your application is preliminarily approved, you may select contractors of your choice to review the requested improvements and prepare cost estimates. The City of Stanton requires at least three (3) competitive bids for the proposed work to ensure fair pricing, quality workmanship, and the best value for the program.

#### 5. Approval & Contractor Selection

After receiving the required three bids, the City will review the proposed scope of work and

assist you in selecting a contractor. To participate in the program, the selected contractor must meet the following requirements:

- Licensing & Insurance Must hold a valid California contractor's license and maintain current liability insurance.
- City Business License Must hold an active City of Stanton business license.
- Professional Standing Must have no significant complaints with professional organizations or the Better Business Bureau.
- Required Documentation Must submit a completed City of Stanton Contractor
  Application and provide copies of all required certifications, licenses, and insurance
  documents.

Once approved, the City will prepare a formal contract between the City and the contractor. Grant payments will be made directly to the contractor upon satisfactory completion of work and City inspection. No payments will be issued directly to the resident.

#### 6. Construction

The contractor completes the approved improvements. A City inspector will visit the property to verify that the work meets program standards before the City authorizes final payment to the contractor.

#### 7. No Cost to You

This is a grant program funded by the City of Stanton. You will not be charged for eligible improvements approved under this program.

Section 1 - Household Information		
Applicant's Name:	Age:	Sex:
Co-Applicant's Name:	Age:	Sex:
Address:		
Email Address:		
Phone (home): (cell)		

## **Section 2 - Household Composition**

Total number of people in household:	_
How many are disabled?	
Is anyone living here other than the Applicant/	Co-Applicant? □ Yes □ No
DEMOGRAPHICS	
Do you consider your household Hispanic/Lat	ino? 🗌 Yes 🔲 No
How do you identify? Please check all that ap	ply
☐ White	☐ Black or African American
☐ Asian	☐ American Indian or Alaska Native
☐ Native Hawaiian or Other Pacific Islander	☐ American Indian or Alaska Native & White
Asian & White	☐ Black or African American & White
☐ American Indian/Alaska Native & Black/Afr	ican American
Other	
Head of Household is:	☐ Female
(Continued on next page)	

## **Section 3 - Income Information**

List all sources of gross monthly income for all household members in the chart below. Attach supporting documents.

Examples of Income	Name of Income Source	Gross Monthly Amount
Employment / Wages		
Self-Employment / Rental		
Social Security / SSI / SSDI		
Pension / Retirement / Annuity		
Disability / Unemployment		
Public Assistance (CalFresh, etc.)		
Other (gifts, alimony, etc)		
	Total Monthly Income	
	Total Annual Income (x12)	

## **Section 4 - Assets**

List all household assets and attach supporting documents:

Assets	Cash Value	Bank Name	Account # (Last 4 Digits)
Checking Account	\$		
	\$		
Savings	\$		
	\$		
Credit Union	\$		
Stocks/Bonds	\$		
401K/Retirement	\$		
Life Insurance	\$		
Other Property Ownership Equity	\$		
	\$		
		Total Asset Value	
		2% of Total Asset Value (multiply Total Asset Value by .02)	

Total Household Income	
Total Annual Income from Section 3	
2% of Total Assets Value from Section 4	
GRAND TOTAL HOUSEHOLD INCOME	

Maximum Income Allowed (80% Area Median Income - 2025 HUD Limits)	
1 Person Household	\$94,750
2 Person Household	\$108,300

Section 5 - Requested Improve	ements
☐ Air Conditioning Unit(s)	☐ Ramps
☐ Walk In Shower/Tub	☐ Grab Bars
☐ High-Boy Toilets	☐ Exterior Paint
☐ Home Fascia replacement	☐ Debris Removal
☐ Tree Removal/Maintenance	Other (please describe below:
	ts for the Income and Asset declarations above. (Please feel Imbers and all BUT the last 4 digits of your account numbers.)
Copy of your most recent Federal Ta	ax Returns, signed, including all schedules but not
worksheets (or 3 years if self-emplo	
	, , ,
☐ Copy of your last 2 paycheck stubs	showing year-to-date income totals or current Profit and
Loss Statement if self employed. If y and anticipated duration	you are not working, provide a statement indicating the nature
☐ Copy of your Annual Social Security	Award Letter or other benefit statements.
☐ All pages of financial statements (2	months, checking & savings)
☐ Investment/retirement statements (if	applicable)
☐ Proof of property ownership (Grant	Deed, Title, or Mortgage Statement)
☐ Copy of birth certificate or passport	to verify citizenship for all household members.
☐ Doctor's Assessment form (to be us	ed for prioritizing received applications)

#### Section 7 - Certification

The information you provide in this application will be used only to determine eligibility for the City of Stanton's CDBG Housing Rehabilitation Grant Program. Your information will remain confidential and will not be shared without your consent, except as required for verification by financial institutions, employers, or as otherwise required by law. All application materials become the property of the City of Stanton and cannot be returned.

By signing below, I/We acknowledge that:

- We are the owner-occupants of this home.
- The information provided is true and complete to the best of our knowledge.
- Providing false or misleading information, or omitting information, may result in denial of assistance and could carry legal consequences.

Signature of Applicant:	Date:
Signature of Co-Applicant:	Date:

## **Program Contact Information**

#### DROP OFF AT CITY HALL OR MAIL TO:

City of Stanton – Housing Division c/o CivicStone, Inc. 4195 Chino Hills Parkway #267 Chino Hills, CA 91709

Phone: (909) 364-9000 | Email: monique@civicstone.com

## **Appendix A: Clarifying Income & Asset Information**

What Counts as Income? Include all income sources for both the applicant and co-applicant. These should reflect the gross monthly amounts received by each household member. Examples include:

- Wages from employment Include gross earnings before taxes. Also include any regular pay, special pay, or allowances received by a member of the Armed Forces.
- Self-employment or rental income If you or your co-applicant operate a business, work independently, or earn income from rental of property (real or personal), report the net monthly income after expenses.
- Social Security benefits Include the gross amount (before deductions for Medicare) received monthly through Social Security Retirement, SSI, or SSDI.
- Pensions, annuities, or retirement distributions Include any regular monthly payments received from pensions, annuities, IRAs, or retirement accounts, as well as insurance payments or death benefits.
- Unemployment, disability, or worker's compensation Report the gross monthly amount received from any of these sources.
- Public assistance Include monthly benefits such as CalFresh (food stamps), cash aid, or other public assistance programs.
- Other income Include <u>regular</u> contributions from others outside your household, such as gifts, alimony, or child support.

What Counts as Assets? Include the current value of all assets held by any household member. This includes but is not limited to:

- Checking and savings accounts
- Money Market Accounts
- Certificates of deposit (CDs)
- Investment accounts (stocks, bonds, mutual funds, etc.)
- Cryptocurrency wallets or digital assets
- Trust funds (if accessible)
- Cash value of life insurance policies
- Equity in any property you own, other than your current Stanton residence
- Retirement accounts (IRA, 401(k), etc.)

**How HUD Treats Assets:** HUD does *not* count the total value of your assets as income. Instead, it assumes your assets earn about 2% annually. For example:

- \$50,000 in total assets = \$1,000 in additional calculated income
- \$100,000 in total assets = \$2,000 in calculated income

Only the **interest or imputed income** from these assets is included in your income total.

• **Note:** If you are unsure whether something counts, include it and we will help you determine eligibility.