



City of Leesburg, Florida

Home Improvement Grant Program

Information & Application

This program provides a grant of up to \$25,000 for the following:

ELIGIBLE IMPROVEMENTS:

- **Total Electrical Rewiring Upgrade**
- **Central Heating and Air Conversion**
- **Roof Replacement**
- **Replacement Windows**
- **Storm Shutters**
- **Sanitary Sewer Connections**
- **Required Building Code Repairs and Upgrades**
- **Mold Remediation**
- **Exterior Paint and/or Stucco**
- **Landscaping**
- **Security Lights Installation**

CITY OF LEESBURG HOME IMPROVEMENT GRANT PROGRAM

Dear Applicant:

The City of Leesburg will accept completed applications for its Home Improvement Grant Program from October 1st to November 15th of each fiscal year and award grants as funding is available.

PURPOSE

The City of Leesburg's Home Improvement Grant Program offers grants to the single-family residential homes including façade, safety, and code violations. Participation in the grant program is based on a first come first serve basis and is limited to program funding determined by the City Commission. Preference will be given to household income and location of the house within the City of Leesburg and its Carver Heights and Downtown Community Redevelopment Districts.

TO BE CONSIDERED FOR THE PROGRAM, EACH OF THE FOLLOWING REQUIREMENTS MUST BE MET:

1. The applicant must: a) be the simple fee owner of the single-family dwelling to be improved, b) reside in the house, c) be current on real estate taxes, d) return a complete application package during the aforementioned period.
2. The house to be improved must: a) be located within the city of Leesburg and not in a floodplain, b) have no outstanding city tax liens
3. The household income consideration should applicant's income be at or below certain limits* which are established by HUD. [*See enclosed document entitled "Home Improvement Program Overview" for qualifying income limits.*]
4. Single family house location – should the applicant's house be located in either the Downtown or Carver Heights Redevelopment Districts, their application will be given funding priority. Further, if a number of applicants are located in the same geographic area or neighborhood, additional consideration will be given to centralize improvement investments [*See enclosed map of the Redevelopment District.*]

**CITY OF LEESBURG HOME
IMPROVEMENT GRANT
PROGRAM OVERVIEW**

The City of Leesburg Home Improvement Grant Program is available to residents to make repairs to owner-occupied property. This grant program is competitive, with the City Commission deciding on award amounts to a maximum of twenty-five thousand dollars (\$25,000.00). Grant monies are distributed upon completion of approved work.

A. Eligibility – General

In order to be considered for the Home Improvement Grant Program, the following criteria must be met:

The applicant must:

1. Be the fee simple owner of the single-family dwelling to be improved, and live in the home.
2. Be a first-time participant in the program, or be a previous participant who has met the five-year forgiveness time-frame.
3. Be current on real estate taxes.
4. Be located within the City of Leesburg and not in a floodplain.
5. Have no outstanding city tax liens.
6. The household income: To qualify as low income or moderate income, the total gross income of all members of the household over the age of 18 must not exceed these limits, which are established by HUD: Household Size

One-Person	\$43,050
Two Persons	\$49,200
Three Persons	\$55,350
Four Persons	\$61,450
Five Persons	\$66,400
Six Persons	\$71,300
Seven Persons	\$76,200
Eight Persons	\$81,150

**Priority will first be given to applications from low-income households on a “first come, first served” basis. After applications from low-income households are considered, applications from other households will be prioritized on a “first come, first served” basis. Priority will also be given to the single-family residents in one of Leesburg’s redevelopment districts and further priority to neighborhood clusters*

B. Eligible Repairs

- Repair or replacement of exterior electrical systems & components, including installation of new service.
- Repair or replacement of structurally defective concrete and wood porches, porch overhangs, steps and rails.
- Repair or replacement to roofs that are aged, damaged or leaking, including gutters, downspouts and splash basins.

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Eligible Repairs - Continued

- Replacement of windows.
- Masonry and concrete flatwork including tuck-pointing, chimney repair, retaining walls, sidewalks, driveways, and foundation repair, etc.
- Repair of exterior walls in order that the structure may be kept watertight, free from chronic dampness, weather-tight, includes siding, aluminum trip wrap, and mold remediation, etc.
- Exterior painting of all surfaces where needed as pertaining to repairs and code violations.
- Exterior doors, storm doors, patio doors, garage doors and openers, etc.
- Repairs of existing fences and the installation of new fences and gates.
- Modifications, which improve the accessibility of the structure for homeowners or their children with disabilities, such as exterior handicap ramps.
- Landscaping and tree trimming
- Security Lighting
- Sanitary Sewer Service repair and/or connection
- Carbon Monoxide and Fire Detectors

C. Ineligible Repairs

- New construction, such as the building of a room addition, basement/bedroom construction or related conversion, storage sheds, converting carports into garages, etc.
- Repair, replacement, or the installation of appliances.
- Certain municipal violations such as grass cutting, trash removal, cleaning, derelict vehicle towing, etc.
- Security alarm systems, security bars on windows, doors, etc.
- Interior upgrades

D. Application Process

- Applications are available at:
 - The Leesburg Resource Center, 1041 CR 468

Please note: Priority will first be given to applications from low-income households [24 CFR 570.208(a)] on a “first come, first served” basis. After applications from low-income households are considered, applications from other households will be prioritized.

E. Notification of Application Status

All applicants who submit a complete application package by the deadline date will receive a letter notifying them of either their acceptance or denial into the program. These letters will be mailed within 4-6 weeks after receipt of the complete application package. ***Please note: Funds cannot be committed to any project until the Environmental Review is satisfied (see Sec. F and G).***

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F. Initial Meeting and Inspection – Minimum Housing Code

After acceptance into the program, the Homeowner will review and sign the “Homeowner’s Agreement”, “Promissory Note” and “Subordination Policy”, if necessary.

Housing code violations *are* eligible repairs under this program, and must be corrected before work that is not required for code compliance.

G. Licensed Contractors

The homeowner may endeavor to make improvements as the homeowner. However, if a contractor is required, licensed contractors must be retained.

The construction management service will ensure that work is completed within 6 months of the initial inspection date, or may be subject to a penalty if the deadline is not met without good cause.

H. Final Inspection – Minimum Housing Code

When the work is completed, the construction management service shall contact the City of Leesburg to schedule a final inspection. A City Building Inspector must approve all work before final payment will be made.

I. Grant Reimbursement

A check will be issued to the construction management service when all approved repairs are completed, and the home passes final inspection.

J. Covenant for Repayment Requirement

Applicant(s) must agree to enter into a covenant for repayment agreement with the City of Leesburg to receive a “no-match” grant of up to \$25,000. Should the applicant provide no-match, a covenant for repayment will be placed on the property for five years, where the covenant for repayment amount will be reduced by 20% each year until the covenant sunsets. The covenant for repayment will be recorded in the public records to provide that:

1. Improvements are not altered, modified, removed, or demolished.
2. The home continues to be owner occupied.

Special consideration may be given to forgive the covenant for repayment requirement upon written consent from the City of Leesburg.

In order to waive the covenant for repayment agreement requirement, the applicant must provide a cash match of 10% of the grant amount. For example, if a grant award is given in the amount of \$25,000, the applicant must invest \$2,500 of additional improvements in the grant project.

End of Section

CITY OF LEESBURG HOME IMPROVEMENT GRANT PROGRAM



Home Improvement Grant Application

DATE _____

Applicant Name _____ SS# _____

Co-Applicant Name _____ SS# _____

Address _____

Home Phone# _____ Work Phone # _____

Cell Phone # _____

E-Mail Address _____

Please check one of the race categories that best describes your household (optional)

- | | |
|---|--|
| <input type="checkbox"/> American | American |
| <input type="checkbox"/> Indian/Alaska Native | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White/Caucasian |
| <input type="checkbox"/> Black/African | <input type="checkbox"/> Other |

Additional Household Information (optional, check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Single Parent | <input type="checkbox"/> Single / Non-Elderly |
| <input type="checkbox"/> Two-Parent | <input type="checkbox"/> Elderly (62+ years) |
| <input type="checkbox"/> Female Head of Household | <input type="checkbox"/> Person(s) with a Disability |

CITY OF LEESBURG HOME IMPROVEMENT GRANT PROGRAM

Household Size - Complete the following information for **all** persons living in the home. Use separate sheet if necessary.

Name	M / F	Age	Relationship	Social Security #

Household Income Information - List income and source of income for all persons age 18 or older residing in your home, or proof of full-time student status.

Name	Age	Gross Monthly Income	Income Source

Size of Home: My house has _____ bedrooms and _____ bathrooms

Proposed Improvements - Check the item boxes that need improvement. The CHCRA reserves final right to approve or disapprove qualifying repairs and replacements.

- Total Electrical Rewiring Upgrade
- Central Heating and Air Conversion
- Roof Replacement
- Replacement Windows
- Storm Shutters
- Sanitary Sewer Connections
- Required Building Code Repairs and Upgrades

CITY OF LEESBURG HOME IMPROVEMENT GRANT PROGRAM

- Mold Remediation
- Exterior Paint and/or Stucco
- Landscaping
- Security Lighting
- Or other approved repairs per the grant agreement;

Have you ever participated in the City of Leesburg Home Improvement Grant Program? Yes No

Have you ever participated in LAKE County's Housing Rehabilitation Program? Yes No

Photograph Release Statement- The CHCRA has my permission to use photographs of me and/or my home in presentations and publications in conjunction with the CHCRA Home Repair Program. **Initials:** _____

Applicant's Declaration: I/We declare under penalty of perjury, that the above statements are true and correct. I/We consent to the physical inspection(s) of the premises to process this application. I/We understand that the enrollment and qualification process may impose additional conditions and limitations on my property. The CHCRA reserves the right to change programmatic priorities without notification. I/We agree to provide additional descriptive, financial, and/or other information upon request by the City. I/We understand that the grants are available in limited quantities and selection is based on the criteria listed on the CHCRA Home Repair Program guidelines. I/We have received, reviewed and understand the program rules, limitations, and the homeowner obligations listed in the program guidelines.

Applicant's Signature

Date

Co-Applicant's Signature

Date

CITY OF LEESBURG HOME IMPROVEMENT GRANT PROGRAM

FOR OFFICE USE ONLY: Date Application Received _____ Application Reviewed By _____ Income Level: VL ___ L ___

Number of persons in HH _____ HH Monthly Income \$ _____ HH Annual Income \$ _____ Is income within HRP guidelines? Yes ___ No ___

Eligible _____ Date Notified: _____ Volunteer hours completed? Yes ___ No ___ Wait Listed _____ date: _____

Ineligible _____ (reason: _____)

CITY OF LEESBURG HOME IMPROVEMENT GRANT PROGRAM

Home Repair Program Application Checklist

Before submitting the application, please ensure that you have completed and provided the following:

- Copy of photo identification for both the applicant and co-applicant (*drivers' license, state ID, or passport*)
- Copy of the last two (2) year's tax returns for every working member of the household over the age of 18. (*Last three (3) years' returns required if self-employed*)
- Provide the last three (3) paystubs for each working member of the household over the age of 18.
- Copy of verification of any other sources of earned and/or unearned income for all members of the household (*social security award letter, unemployment form, pensions, etc.*)
- Copy of the last three (3) complete bank statements for all members of the household (*checking, savings, 401K, CDs, money market accounts, etc.*)
- Copy of current mortgage statement
- Proof of home ownership (*warranty deed, quit-claim deed, etc.*)
- Proof of homeowner's insurance (*declaration page*)
- Signed employment verification form or unemployment affidavit (*if applicable*)
- Signed current income statement form
- Signed and notarized Home Repair Affidavit

PLEASE SUBMIT COMPLETED APPLICATIONS TO THE ADDRESS BELOW:

City of Leesburg
c/o Sandra Wilson, Housing Director
1041 CR 468
Leesburg, Florida 34748

**SUBMISSION OF APPLICATION DOES NOT
GUARANTEE APPROVAL/FUNDING**



EMPLOYMENT VERIFICATION

Homeowner: _____

Address: _____ Leesburg, FL 34748

Dear Sir/Madam,

The above-mentioned homeowner has applied for funds for the purpose of rehabilitating their property. In order to be eligible for the program, the Carver Heights Community Redevelopment Agency needs to confirm the applicant's income. Please complete the following information:

A. Company's name: _

B. Position held: _

C. Dates of employment: _

D. Rate of pay: Annual \$ _____ Hourly \$ _

E. Hours worked per week: _

F. Additional compensation, overtime: _____

G. Probability of continued employment: _____

H. Other remarks: _____

**Please complete and
return to Carver Heights
CRA**

**Leesburg Resource Center
1041 CR 468
Leesburg, Florida 34748**

Signature of Employer

Date

I, _____, hereby authorize release of the above requested information:

Signature of Applicant

Date



AFFIDAVIT

Applicant & Co-Applicant Name: _____

Address: _____ Leesburg, FL 34748

I/We do hereby request the Community Redevelopment Agency Home Repair Program to process the application for Home Repair improvements to above property.

I/We further authorize the Community Redevelopment Agency Home Repair Program to make inquiries and verification of all assets, income, employment, mortgage, credit reports, title search and any other information necessary to determine the eligibility of the applicant.

I/We will hold harmless the Community Redevelopment Agency Home Repair Program with respect to all claims and damages caused by inquiries necessary to determine the eligibility of the applicant(s).

It is further understood that the applicant(s) shall not incur or be obligated for any cost of this introductory application.

I/We certify that I am/we are the owner(s) of the above property and have disclosed all assets and income as a requisite to determine ability to finance repairs and improvements.

I/We further certify that I/we are unable to secure necessary funds from other sources upon comparable terms and conditions.

I/We understand that I/we need to make all reasonable efforts to allow access to the property so work can be completed in a timely manner. In the event we cannot provide access, the Community Redevelopment Agency has the ability to cancel the application and revoke allocated funds.

I/We understand that it is my/our responsibility to move/rearrange furniture in order to provide complete access and it is my/our responsibility to clean up after the rehabilitation has been completed.

It is further understood that submittal of my application does not guarantee acceptance into the program.

Signature of Applicant

Signature of Co-Applicant

Date

Witness

Date



UNEMPLOYMENT AFFIDAVIT

Before me this _____ day of _____, 20_____, personally appeared _____ who, being duly sworn, deposes and says:

1. I have made application for Home Repair Program from the Community Redevelopment Agency of the City of Leesburg.
2. Check (a) or (b) as applicable:

_____ (a) I am not presently employed but anticipate becoming employed within the next twelve (12) months.

_____ (b) I am not presently employed and do not anticipate becoming employed within the next twelve (12) months.
3. Based on my past work experience, skills, and income history as reflected in my income tax return for the most recent tax year (copy attached) and with adjustments to reflect circumstances anticipated within the next twelve (12) months, I expect to earn \$_ per year when I become employed.

Signature

Print Name

STATE OF FLORIDA COUNTY
OF LAKE

Before me personally appeared _____ who
acknowledged to me that he/she/they executed the foregoing instrument this _____ day of _____, 20_____.

(NOTARIAL SEAL)

Notary Signature
State of Florida at Large Print
Name:
My Commission Expires:



CURRENT HOUSEHOLD INCOME STATEMENT

Name: _____

Address: _____ Leesburg, FL 34748

Social Security Number: _____

Following is my statement of income for the current calendar year, 20 :

	Actual YTD	Additional
Wages, salaries, tips, etc.	_____	_____
Interest Income	_____	_____
Dividends	_____	_____
Alimony Received	_____	_____
Business Income	_____	_____
Capital Gain	_____	_____
Pensions and Annuities	_____	_____
Rental real estate, royalties, partnerships, trusts, etc.	_____	_____
Unemployment Compensation	_____	_____
Social Security benefits	_____	_____
Child Support	_____	_____
Other Income	_____	_____
TOTAL ESTIMATED INCOME:	-	

I declare that to the best of my knowledge and belief, the information is true, correct, and complete. Incomplete or misinformation may lead to exclusion from the Repair program and repayment to the CRA of any and all money expended. I agree to submit a copy of this year's completed tax return as a verification of the above information.

Applicant Signature

Date

Applicant Name Printed

*Each adult resident of the household must submit a separate income statement. An adult resident is defined as any individual 18 years or older living at the applicant's address.



Mortgage Verification

Homeowner: _____

Address: _____ Leesburg, FL 34748

Dear Sir/Madam,

The above-mentioned homeowner has applied for public funds for the purpose of rehabilitating their property. In order to be eligible for the program, the Community Redevelopment Agency needs to confirm the applicant's mortgage. Please complete the following information:

It is important that this form be returned to us as soon as possible in order to provide services to this homeowner.

A. Name of Mortgage Company: _

C. Type of mortgage: Conv. FHA. VA.

D. Dates of mortgage: _ Present balance: \$ _____

E. Are payments current: Yes
No

F. Satisfactory account: Yes
No

G. Monthly payments: \$ _____ Principal
payments: \$ _____ Real estate
taxes: \$ _____ Fire insurance: \$ _____

**Please complete and return to our
office at**

**Carver Heights CRA
Leesburg Resource Center
1041 CR 468
Leesburg, Florida 34748**

Thank you for completing and returning this letter. This information will be treated confidentially.

Signature of Representative

Date

I, _____, hereby authorize release of the above
requested information.

Signature of Applicant

Date



Code Enforcement Violation/Lien Affidavit

Applicant & Co-Applicant Name: _____

Address: _____ Leesburg, FL 34748

I/We do hereby acknowledge that our property has been cited for code violations, which have not been resolved.

I/We further acknowledge that our property has a lien/liens on the property due to the existing code violations.

I/We are requesting this grant to allow us to make the needed repairs to cure the code violations since, we cannot afford the total cost of the repairs on our own.

I/We are requesting that the City forgive the code violation liens once the repairs are completed or when the obligations of this grant agreement are met in full.

To be completed by staff:

1. Number of current liens on the property: _____
2. Total value of all code liens on the property: _____
3. Type of code violations: _____
4. Date of oldest outstanding code lien: _____

I declare that to the best of my knowledge and belief, the information is true, correct, and complete. Incomplete or misinformation may lead to exclusion from the Repair program and repayment to the CRA of any and all money expended. I agree to submit a copy of this year's completed tax return as a verification of the above information.

Applicant Signature

Date

Applicant Name Printed

Applicant Signature

Date

Applicant Name Printed



COMMUNITY RESOURCE LIST

1. City of Leesburg Housing Department
Contact: (352) 728-9765
2. Lake County Housing Department
Contact: (352) 742-6540
3. Habitat For Humanity
Contact: (352) 483-0434
4. Homes in Partnership
Contact: (407) 886-2451
5. Lake Community Action Agency
Contact: (352) 357-5550

For further information about any of the resources, please contact Sandra Wilson, Leesburg Housing Director, at 352-728-9765.

SHEET
1
OF
1

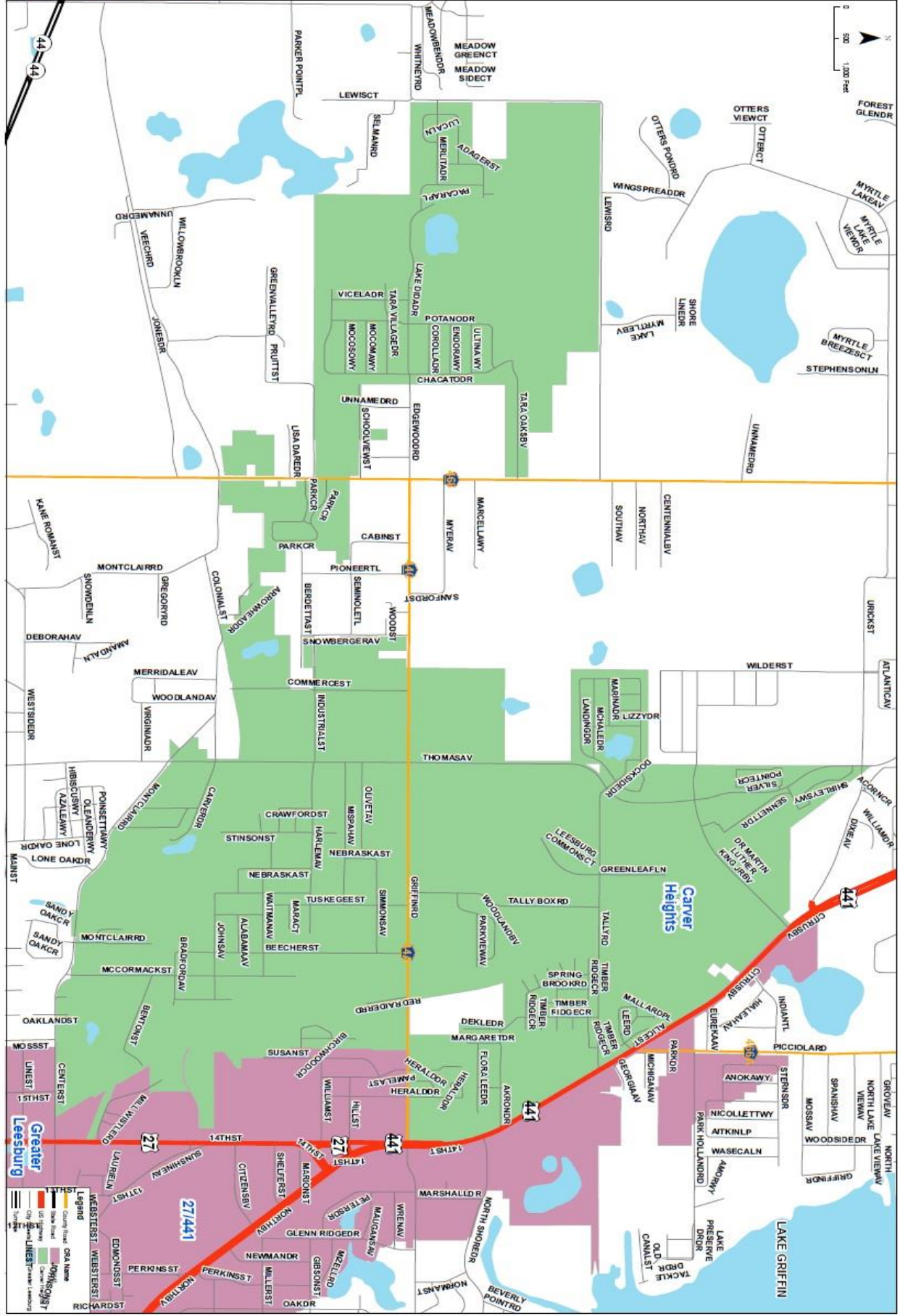
Date: 5/22/2023
Compiled by: Adam Helms
Approved by: Adam Helms
File: K:\Housing\Projects\CRS\Map\april\Carver Heights.mxd

CRS: 2023-05-22 10:00 AM
The information on this map was prepared by the City of Leesburg Planning Department. It is provided for informational purposes only. The City of Leesburg Planning Department is not responsible for any errors or omissions on this map.

City of Leesburg
Housing Department
Carver Heights CRA



Map Scale: 1" = 100 Feet
Map Date: 5/22/2023



Legend

- County Road
- State Road
- City Street
- CRS Name
- CRS Zone
- CRS Boundary
- CRS Label
- CRS Number
- CRS Name
- CRS Number