

**DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT**

**RESIDENTIAL LENDING AND REHABILITATION SERVICES**

250 FRANK H. OGAWA PLAZA, SUITE 5313

OAKLAND, CALIFORNIA 94612-2034

[residentiallending@oaklandnet.com](mailto:residentiallending@oaklandnet.com)



CITY OF OAKLAND

Dear Applicant:

Enclosed is the applicant packet you requested for the **ESHP Up-front Cost Loan Program (EUFC)**. Please complete the loan application and EUFC Addendum and return by mail to the address above with all applicable documentation in the list below. *Please check the box if an item applies and is included with your application.* Once your package is complete, a Mortgage Advisor will contact you to discuss your application.

**PLEASE NOTE: THE PROPERTY MUST HAVE SUFFICIENT EQUITY FOR THE LOAN.**

- Proof of Ownership: copy of Grant Deed, Quitclaim Deed, etc.
- Complete Federal Tax Returns for most recent two years, W-2s, 1099s and all schedules
- If self-employed, current Profit and Loss Statement and Balance Sheet
- If employed, 2 current check stubs;  if retired, documentation of pension or retirement income
- Documentation of other income: e.g. child support, alimony, relative's contribution, rental income, stocks, bonds, mutual funds, annuities, etc.
- Bankruptcy papers, including petition, list of creditors and discharge, if applicable
- If co-signer for a loan, documentation that co-signer is making payments
- Current mortgage statements or payment histories for all mortgage loans
- Copies of bank or credit union statements for the past two months
- Copy of property tax bill
- Copy of current fire insurance policy
- Copy of Living Trust;  Power of Attorney; if applicable
- Rental Agreements, if applicable
- Copy of HUD 1 (closing statement) if property was purchased or if a new loan against the property was obtained in the past 12 months
- Documentation of income for all applicants and all household members who are 18 years old or older
- Copies of Promissory Notes, required if there is balloon payment due
- Copies of any inspection reports completed in the past 12 months, including termite and roof reports, if applicable.
- Contractor's bid and detailed work description for the proposed emergency repair work, if available

If you believe any of the above items apply to you but you are unable to provide them at this time, please explain and indicate when you can provide them and/or what you can provide as an alternative:

Household Income at or below 80% of area median is required to qualify for a loan for assistance with up-front costs.

**2020 Income Limits**

**City of Oakland Housing and Community Development Department**  
**Effective Date: HOME Income & Rent Limits - 7/1/2020;**  
**Sec 8 FMRs - 10/1/2019; TCAC - 4/1/2020; CA HCD - 5/6/2019; NSP - 6/28/2019**

INCOME LEVEL	INCOME LIMITS, ADJUSTED FOR HOUSEHOLD SIZE							
	One Person	Two Person	Three Person	Four Person	Five Person	Six Person	Seven Person	Eight Person
20% AMI	\$18,280	\$20,880	\$23,500	\$26,100	\$28,200	\$30,280	\$32,380	\$34,460
25% AMI	\$22,850	\$26,100	\$29,375	\$32,625	\$35,250	\$37,850	\$40,475	\$43,075
<b>30% of Area Median Income (Extremely Low Income)</b>	\$27,420	\$31,320	\$35,250	\$39,150	\$42,300	\$45,420	\$48,570	\$51,690
35% AMI	\$31,990	\$36,540	\$41,125	\$45,675	\$49,350	\$52,990	\$56,665	\$60,305
40% AMI	\$36,560	\$41,760	\$47,000	\$52,200	\$56,400	\$60,560	\$64,760	\$68,920
45% AMI	\$41,130	\$46,980	\$52,875	\$58,725	\$63,450	\$68,130	\$72,855	\$77,535
<b>50% of Area Median Income (CDBG Low Income) (Very Low Income)</b>	\$45,700	\$52,200	\$58,750	\$65,250	\$70,500	\$75,700	\$80,950	\$86,150
<b>60% of Area Median Income</b>	\$54,840	\$62,640	\$70,500	\$78,300	\$84,600	\$90,840	\$97,140	\$103,380
65% AMI	\$59,405	\$67,870	\$76,375	\$84,825	\$91,650	\$98,420	\$105,230	\$112,000
70% AMI	\$63,970	\$73,095	\$82,250	\$91,350	\$98,700	\$105,995	\$113,320	\$120,615
75% AMI	\$68,535	\$78,325	\$88,125	\$97,875	\$105,750	\$113,575	\$121,410	\$129,235
<b>80% of Area Median Income (CDBG Moderate) (Low Income)</b>	\$73,100	\$83,550	\$94,000	\$104,400	\$112,800	\$121,150	\$129,500	\$137,850
<b>100% of Area Median Income (Median Income)</b>	\$83,450	\$95,350	\$107,300	\$119,200	\$128,750	\$138,250	\$147,800	\$157,350
<b>120% of Area Median Income</b>	\$109,600	\$125,300	\$140,950	\$156,600	\$169,150	\$181,650	\$194,200	\$206,700
<b>150% of Area Median Income</b>	\$125,180	\$143,030	\$160,950	\$178,800	\$193,130	\$207,380	\$221,700	\$236,030

## RESIDENTIAL REHABILITATION LOAN APPLICATION

### Property Information

Subject Property Address (street, city, state, zip)			No. of units	Loan Amount Requested: \$
Date Acquired:	Original Cost: \$	Amount of Existing Liens: \$	Describe proposed repairs/maintenance:	

Borrower	Borrower Information	Co-Borrower
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Borrower's Name			Co-Borrower's Name		
Social Security No.	Date of Birth	Age	Social Security No.	Date of Birth	Age
Home Phone No.	Cell/Other No.		Home Phone No.	Cell/Other No.	
<input type="checkbox"/> Married <input type="checkbox"/> Domestic partnership <input type="checkbox"/> Unmarried (include single, divorced, widowed) <input type="checkbox"/> Separated	No. of Household Members (not listed by Co-Borrower, include dependents and housemates): _____		<input type="checkbox"/> Married <input type="checkbox"/> Domestic partnership <input type="checkbox"/> Unmarried (include single, divorced, widowed) <input type="checkbox"/> Separated	No. of Household Members (not listed by Co-Borrower, include dependents and housemates): _____	
Present Address (street, city, state, zip) _____ No. Yrs. _____			Present Address (street, city, state, zip) _____ No. Yrs. _____		

If residing at present address for less than two years, complete the following:

Former Address (street, city, state, zip) _____ No. Yrs. _____	Former Address (street, city, state, zip) _____ No. Yrs. _____
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### Household Composition

Name	Age	Sex	Relationship	Monthly Income Amount	Income Source	How Verified
1.						
2.						
3.						
4.						
5.						
<b>Attach Additional Page if needed</b> (Provide Income Documentation for anyone over the age of 18yrs)					<b>Total</b>	

### Monthly Income and Housing Expense Information

Gross Mo. Income	Borrower	Co-Borrower	Mo. Housing Exp.	Present
Base Gross Salary	\$ \$		Rent	\$
Overtime			First Mortgage (P & I)	
Social Security			Second Mortgage (P & I)	
Retirement/Pension			Hazard Insurance	
Disability			Real Estate Taxes	
Alimony/Child Support			Mortgage Ins.	
Other Gov't Assistance			Homeowner Assn. Dues	
Bonuses			Maintenance	
Interest/Dividends			Other:	
Rental Income				
<b>TOTAL</b>	<b>\$ \$</b>		<b>TOTAL</b>	<b>\$</b>

Initials: Borrower \_\_\_\_\_ Co-Borrower \_\_\_\_\_

Borrower		Employment Information		Co-Borrower	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job	Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job
		Yrs. employed in this line of work/profession			Yrs. Employed in this line of work/profession
Position/Title/Type of Business		Work Phone	Position/Title/Type of Business		Work Phone
If employed in current position for less than two years, or if currently employed in more than one position, complete the following:					
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from – to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from – to)
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from – to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from – to)

Schedule of Other Real Estate Owned							
Address of Property	Type of Property	Present Market Value	Mortgage Loan Balance	Gross Rental Income	Mortgage Payment	Taxes, Ins. Vacancy & Maint	Net Rental Income
		\$	\$	\$	\$	\$	\$

Liabilities				
Creditor's Name	Address	Type of loan	Monthly Payment/ Mos. Left to Pay	Unpaid Balance
			\$ /	\$
Alimony/Child Support/Separate Maintenance Payments Owed to:				
Job Related Expense (childcare, union dues, etc.)				

Existing Debt(s) on Property (Mortgages, Liens, etc.)				
	1 <sup>st</sup> Deed of Trust	2 <sup>nd</sup> Deed of Trust	3 <sup>rd</sup> Deed of Trust	Other
Original Mortgage Amount	\$	\$	\$	\$
Unpaid Balance	\$	\$	\$	\$
Original Loan Term/ Interest Rate	//		/	/
Name and Address of Lender				
Loan Number				
Tel. No.				
F. H. A. Insured	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Balloon payment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Initials: Borrower \_\_\_\_\_ Co-Borrower \_\_\_\_\_

Checking/Savings Accounts, Stocks & Bonds: (provide copies of statements)	Checking Account		Savings Account		
	Name & Address of Bank or Credit Union	Number	Balance	Number	Balance
			\$		\$

Stocks/Bonds/IRA  
(describe):

\$

Year & Make of Automobiles:

\$

Value of Furniture and Personal Effects:

Fire Insurance:	Policy No.	Amount of Coverage	Annual Premium Amt.
Name and Address of Ins. Co.		\$	\$
Name and Address of Agent:	Tel. No.		

Borrower	Nearest Relative <u>Not</u> Living With You	Co-Borrower
Name and Address:	Name and Address:	
Relationship:	Tel. No.	Relationship:
		Tel. No.

**Declarations**

**If your answer is "Yes" to any question, please provide an explanation below:**

- Are there any outstanding judgments against you?
- Have you been declared bankrupt within the past seven years?
- Have you had property foreclosed or given title/deed in lieu thereof in the last seven years?
- Are you a party to a lawsuit?
- Are you obligated to pay alimony, child support, or separate maintenance?
- Are you a co-maker or endorser on a note?
- Are you or any member of your immediate family a member of a City of Oakland Board or Commission?
- Are you or any member of your immediate family a director or officer of a Community Development District?
- Have you previously received any financial assistance from the City of Oakland?
- Have you previously received any federal financial assistance to repair/maintain your Property?
- Have you received a List of Violations on your property from the City of Oakland's Code Compliance Division?

	Borrower		Co-Borrower	
	Yes	No	Yes	No

Explanation: (Please use separate sheet.)

**Information for Government Monitoring Purposes**

Borrower Co-B		Borrower	
Race	<input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> American Indian/Alaskan Native and White <input type="checkbox"/> Asian and White <input type="checkbox"/> Black/African American and White <input type="checkbox"/> American Indian/Alaskan Native and Black/African American Balance/Other <input type="checkbox"/> Balance/Other (specify): _____	Race	<input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> American Indian/Alaskan Native and White <input type="checkbox"/> Asian and White <input type="checkbox"/> Black/African American and White <input type="checkbox"/> American Indian/Alaskan Native and Black/African American Balance/Other <input type="checkbox"/> Balance/Other (specify): _____
Ethnicity	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	Ethnicity	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female

**Certification:** I/We certify that the information provided in this application is true and correct as of the date opposite my/our signature(s) and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in a civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Section 1001.

**Authorization:** I/We authorize City of Oakland to order a credit report and to verify the information on this application.

Borrower's Signature	Date	Co-Borrower's Signature	Date
X		X	

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**To be Completed by Interviewer**

This application was taken by: <input type="checkbox"/> face-to-face interview <input type="checkbox"/> by mail	Interviewer's Signature	Date
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For Office Use Only:	Date Received	Application No.	District	Census Tract	Flood: <input type="checkbox"/> Yes <input type="checkbox"/> No
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## ESHP UP-FRONT COST LOAN PROGRAM (EUFCLP) (Addendum to Rehabilitation Loan Application)

<input type="checkbox"/> By marking this box and signing below, you acknowledge you are applying for the <b>ESHP Up-Front Cost Loan Program. Please complete and sign the attached Homeowner's Statement</b>					
Borrower's Name (Print)			Co-Borrower's Name (Print)		
Borrower's Signature		Date	Co-Borrower's Signature		Date
<b>Program Description</b>					
For Office Use Only	Date Received	Application No.	District	Census Tract	Flood <input type="checkbox"/> Yes <input type="checkbox"/> No

### Program Description

<b>PURPOSE:</b>	The <b>ESHP Up-Front Cost Loan Program (EUFCLP)</b> is a City of Oakland program that offers deferred loans to owner-occupied low-to-moderate income households for design and construction costs required to retrofit properties selected for the Earthquake Safe Homes Program (ESHP). Loans are not made for payment or reimbursement of completed or in-process repair costs.			
<b>REQUIREMENTS:</b>				
<b>LOCATION:</b>	<ul style="list-style-type: none"> <li>Property must be in one of the seven Community Development Districts.</li> </ul>			
<b>OCCUPANCY:</b>	<ul style="list-style-type: none"> <li>Owner's household must be low-to-moderate income and have occupied a single-family residence or at least one unit of a multi-unit structure for at least two years.</li> <li>All vested recorded owners of the property must complete the application including members of a trust that do not occupy.</li> </ul>			
<b>Types of Loans:</b>	<b>DEFERRED LOAN 0% INTEREST</b>		<b>DEFERRED LOAN 3% INTEREST</b>	
<b>INTEREST RATE:</b>	<ul style="list-style-type: none"> <li>0% Interest</li> </ul>		<ul style="list-style-type: none"> <li>3% Interest</li> </ul>	
<b>PAYMENTS/TERMS:</b>	<ul style="list-style-type: none"> <li>No Periodic Payments</li> <li>ESHP Reimbursement upon project completion will be applied to the principal loan balance.</li> <li>Loan will be paid upon the sale or transfer of title of property or when the property is no longer owner-occupied.</li> </ul>		<ul style="list-style-type: none"> <li>No Periodic Payments</li> <li>ESHP Reimbursement upon project completion will be applied to the principal loan balance.</li> <li>Loan will be paid upon the sale or transfer of title of property or when the property is no longer owner-occupied.</li> </ul>	
<b>SECURITY:</b>	<ul style="list-style-type: none"> <li>Deed of Trust</li> </ul>		<ul style="list-style-type: none"> <li>Deed of Trust</li> </ul>	
<b>PREPAYMENT:</b>	<ul style="list-style-type: none"> <li>None</li> </ul>		<ul style="list-style-type: none"> <li>None</li> </ul>	
<b>CLOSING COSTS:</b>	<ul style="list-style-type: none"> <li>\$500</li> </ul>		<ul style="list-style-type: none"> <li>\$500</li> </ul>	
<b>MAXIMUM LOAN AMOUNTS:</b>	<ul style="list-style-type: none"> <li>\$75,000 for single family (or the cost of rehabilitation, whichever is less) and \$5,000 for each additional unit, up to four units.</li> </ul>		<ul style="list-style-type: none"> <li>\$75,000 for single family (or the cost of rehabilitation, whichever is less) and \$5,000 for each additional unit, up to four units.</li> </ul>	
<b>INCOME:</b>	<ul style="list-style-type: none"> <li>Owner's Annual Household Income cannot exceed <b>50%</b> of the established HUD median income limits for Alameda County</li> </ul>		<ul style="list-style-type: none"> <li>Annual Household Income cannot exceed <b>80%</b> of the established HUD median income limits for Alameda County</li> </ul>	
<i>Income of all household members who are 18 years or older must be considered to determine income eligibility.</i>				
<b>Income Limits</b>	<b>Household Size</b>	<b>Maximum Income*</b>	<b>Household Size</b>	<b>Maximum Income</b>
	1	\$43,400	1	\$69,000
	2	\$49,600	2	\$78,850
	3	\$55,800	3	\$88,700
	4	\$61,950	4	\$98,550
	5	\$66,950	5	\$106,450
	6	\$71,900	6	\$114,350
	7	\$76,850	7	\$122,250
	8	\$81,800	8	\$130,100





**ESHP STATEMENT OF NON-CONFLICT OF INTEREST**

**I certify that I am not in conflict of interest by receiving financial assistance through the City of Oakland's Earthquake Safe Homes Program (ESHP). Specifically, I am not a member, officer or employee of the following categories:**

- Officer of the City of Oakland, i.e., the Mayor, members of the City Council, City Manager, City Attorney, City Auditor and all City department heads, members of boards or commissions and executive officers of such boards and commissions;
- Employee of the City of Oakland who participate in the policy-making, decision-making and/or administration of the Community and Economic Development Agency's Earthquake Safe Homes Program;
- Officer of any Community Development District Council, and
- All members of the immediate families who reside in the same household of all those individuals listed in the preceding paragraphs.

Initials: \_\_\_\_\_

**STATEMENT OF FEDERAL/STATE FINANCIAL ASSISTANCE**

I certify that I **have / have not** received Federal/State Financial assistance for the rehabilitation of my property outside of the possibility of reimbursement through the Earthquake Safe Homes Program,

The type of assistance was \_\_\_\_\_

Initials: \_\_\_\_\_

**STATEMENT OF FINANCIAL ASSISTANCE FROM THE CITY OF OAKLAND**

I certify that I **have / have not** received financial assistance from the City of Oakland. If assistance was received, the type

The type of assistance was \_\_\_\_\_

Initials: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Co-Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_