

BALTIMORE HOUSING Application

From the Division of Green, Healthy & Sustainable Homes

443-984-1066

www.baltimorehousing.org



Stephanie Rawlings-Blake, Mayor of Baltimore City







BALTIMORE HOUSING

Division of Green, Healthy & Sustainable Homes 2700 North Charles Street, Suite 201 Baltimore, MD 21218

Guidelines for Completing the Baltimore Housing Division of Green, Healthy & Sustainable Homes Application

• Select the services you wish to apply for on the next page.

- Answer ALL questions on the application.
- Place your signature in the appropriate spaces.
- Turn in all required documents for the services selected.

Include proof of income for everyone in the household 18 or over for the most recent 30day period (include all earnings of family members with a source of income)

Examples of proof of income

- Copy of latest award letter or copy of bank statement if you receive Social Security, SSI, Veterans benefits, and/or pension(s).
- Employment- ALL pay stubs received in the last 30 days.
- Unemployment- Benefit determination letter or check stubs from your Unemployment Office.
- TCA/TEMHA: Copy of the award letter, or a copy of the check.
- Rental income: Copy of rent receipts from tenants.
- Child support or alimony: Copy of the check, check stub, or court order

Mail completed application, along with all required documentation to:

Baltimore City Office of Energy Conservation Services Attn: Light Program 2700 North Charles Street, Suite 201 Baltimore, MD 21218

*A Return Envelope is enclosed in this packet. If you have any questions about the application contact: 443.984.1066



Program Checklist and Required Documentation *CHECK ANY OF THE PROGRAMS LISTED BELOW THAT YOU WISH TO APPLY FOR.

All documentation required to complete application for listed programs are detailed below. Documentation for each program is different. All items are required. *NOTE: Send photocopies only. NO ORIGINALS.

STRUCTURAL (Office of Rehab Services)

Service	Grant or Loan	Eligibility	Documentation
Roof Repair	Loan	Income	• Your Deed of Assignment
European Daula anno 1	*May be deferred or forgiven depending	1 person \$46,03	2 • Most recent Property Tax Bill
Furnace Replacement	on eligibility	2 person \$52,60	8 • Recent Mortgage Statement
Water/Sewage Break Repair		3 person \$59,18	
Electrical Repair		4 person \$65,76	0
A STATE OF A		5 person \$74,89	
Plumbing Repair		6 person \$86,42	0 • Current Checking or Savings Account Statements
Disability Accessibility		7 person \$98,76	
		8 person \$111,8	

· List of all Real Estate owned

ENERGY EFFICIENCY (Office of Energy Conservation)

Service Grant or Loan Eligibility **Documentation** Grant Income • Photo ID of Applicant/you and everyone in your household 18 and over Energy Efficiency/ Conservation 1 person \$22,340 • 3 recent consecutive Pay Stubs or a Current Public Assistance Award Letter 2 person \$30,260 • Social Security Card for you and everyone in your household 3 person \$38,180 4 person \$46,100 • Most recent BGE bill 5 person \$54,020 6 person \$61,940 7 person \$69,860

8 person \$77,780

LEAD HAZARD CONTROL (Lead Hazard Reduction Program)

Service	Grant or Loan	Eligibility	Documentation
Lead Hazard Control	Loan or Grant	Income	• Your Deed of Assignment
	*Depending on eligibility	1 person \$46,032	• 3 recent consecutive Pay Stubs or a Current
		2 person \$52,608	Public Assistance Award Letter
	*Only for children 6 and under or	3 person \$59,184	 Homeowners Insurance (Declaration Page)
	pregnant woman	4 person \$65,760	• Most recent Property Tax Bill
	in the house.	5 person \$74,898	• Last 2 years Tax Returns
		6 person \$86,420	• Birth Certificates for all children less than
		7 person \$98,766	6 years old
		8 person \$111,870	• Bankruptcy Discharge (if applicable)
			• Most recent monthly mortgage statement



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Baltimore Housing Division of Green, Healthy & Sustainable Homes

Division of Green, Healthy & Sustainable Homes Application

Name [last, first]:	
Total Annual Household Income:	
Social Security Number:	Date:
Phone:	
Alternative Phone Number:	
Mailing Address:	
, Maryland Zip Cod	le:
*(Check one) 🗖 Apartment 🛛 Multi-Family, Doub	le, Row or Townhome
□ Single Family Home □ Mobile	Home
Applicant's Marital Status: 🔲 single 🔲 married 🔲 wido	wed/widower
Applicant's Employer:	18
Number of Years Employed:	
Email Address:	
CO-APPLICANTS (all information is from Co-applicant)	
CO-APPLICANTS (all information is from Co-applicant) Co-Applicant's Name: Phone Number: Alternative Phone Num Email Address:	ber:
Co-Applicant's Name: Alternative Phone Num	ber:
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:	ber:
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address:	ber:
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:, Maryland Zip Con Employer:	ber:
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:, Maryland Zip Co	ber:
Co-Applicant's Name: Alternative Phone Number: Alternative Phone Num Email Address:	ber:
Co-Applicant's Name: Alternative Phone Number: Alternative Phone Num Email Address:	ber:
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:, Maryland Zip Co Employer:, Maryland Zip Co Employer:, Maryland Zip Co Marital Status: Social Security Number: Marital Status: single married widowed/wido	ber: de: ower Do you receiv Do Yes D No
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:, Maryland Zip Co Employer:, Mary	ber: de: ower Do you receiv
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:, Maryland Zip Co Employer:, Marylan	ber:
Co-Applicant's Name: Alternative Phone Num Phone Number: Alternative Phone Num Email Address: Mailing Address:, Maryland Zip Co Employer:, Maryland Zip Co Employer:	ber:

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Division of Green, Healthy & Sustainable Homes Application

Apply correct number in ethnic group column to each person listed.

1. African-American 2. Caucasian 3. Hispanic 4. Asian/Pacific Islander 5. Native American/Alaskan Native 6. Multi-Ethnic 7. Other

Apply correct number in income type column to each person listed. 1. Job 2. Unemployment Wages 3. Disability Wages 4. Social Security Wages 5. Settlement 6. None 7. Other

HOUSEHOLD CHART

Fill in spaces below on household chart [start list with applicant]

30-day gross income		31		1.34	12							
type of income					•							
disabled yes/ no									bi			
U.S. citizen yes/												
ethnic group										-		
sex M/F												1 - 6 Tay (() - 1 - Tay () - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
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cial security birth relation to age sex e M/F e M/F												
birth date												
social security number												
Name (first, Jast)		5										
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THIS PAGE IS REQUIRED FOR ALL APPLICANTS

I understand that when this application is signed, I am granting permission for:
 Baltimore City Division of Green, Healthy & Sustainable Homes to check all household income, bank accounts, housing expenses, insurance and any other benefits.
 The Unemployment Insurance Administration or any other agency to give and/or receive information from the Baltimore City Division of Green, Healthy & Sustainable Homes Program needed to complete this application.

An appeal can be filled to change the decision on this application if notice is not given in reasonable time. The appeal must be filled within 15 days of decision. The local agency will inform me on how to file. Free legal advice is available through the Legal Aid Bureau by calling toll free: 1-800-999-8904. Maryland has fraud law. Punishment can occur for not telling the truth when applying for assistance to pay home energy costs. I declare that the information provided to the Baltimore City Division of Green, Healthy & Sustainable Homes Program is true, correct and complete.

Applicant

Date

Lead-Based Paint Notification For Existing Homeowners [All Applicants]

Acknowledge receipt of the pamphlet 'Protect Your Family From Lead in Your Home' by signing below. This brochure explains the hazards of lead-based paint and offers suggestions for reducing and preventing lead poisoning.

Applicant

Signature and Date

Co-Applicant

Signature and Date

For Office Use Only

Date	County	Center	# in HH	Intake Worker Signature	Certifier Signature



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*What is the Bid List?

The Bid List is for clients seeking assistance finding a contractor when applying for structural improvements through Baltimore Housing's Office of Rehab Services. Client's scope of work will be posted on a Bid List available for licensed contractors to contact the client to provide competing proposals. The client has the choice to select which contractor they would like to use. If the client does not want to be on the Bid List, they must find a contractor on their own to complete the work.



Baltimore Housing Division of Green, Healthy & Sustainable Hon

Must be signed if applying for Structural or Lead Hazard Control **Credit Report Authorization**

In accordance with Executive Officer Order 01.01.1983.18, the Department of Housing & Community Development advises you as follows regarding the collection of personal informa tion. The information requested by the Department of Housing & Community Developmen (the "Department") is necessary in determining your eligibility for a Special Loan Program. Loan grant. Your failure to disclose this information may result in the denial of your application. Availability of this information for public inspection is governed by the provisions of the Maryland Public Information Act, State Government Article, Sections 10-611 et. seq. of the Annotated Code of Maryland. This information will be disclosed to appropriate staff of the Department, the staff of the local administrator of the grant, and participating mortgage lender, if any purposes directly connected with administration of the program.

Any person who knowingly makes, or causes to be made, a false statement or representation relative to this application shall be subject to criminal prosecution, a fine up to \$50,000 and/ or imprisonment up to five years and if a loan grant is made, immediate call of the loan/grant requiring payment in full of all amounts disbursed, pursuant to Article, Section 2-207 _ An-

I/We authorize the Program or is agent to obtain credit information for the purpose of evaluatting this application and disclose this same information to local agencies participating in the program and/or a private lending institution agreeing to participate in the funding.

Printed Name of Primary Borrower

Printed Name of Primary Co-Borrower

Signature of Primary Borrower

Signature of Primary Co-Borrower

Date

Date

Must be completed if applying for Structural Services Contractor Bid List Request Form Date: ____

Subject Property Address:

I Do _____ _ / I Do Not _____ give the Department of Housing & Community Development (DHCD), Office of Rehabilitation permission to post my name, address,

and phone number as being interested in receiving bids for rehab work on my property.

I am aware that the selection of a licensed contractor will be my responsibility for any repairs funded by the Department. The City of Baltimore, through the Department of Housing & Community Development, does not maintain a list of approved or sanctioned home improvement contractors and therefore make no recommendation on selection for work to be completed on your residence.

Printed Name

Phone Number

Must be signed if applying for Energy Efficiency

Customer Consent to Obtain Household Energy Information The Maryland Department of Housing and Community Development (DHCD) works with partners to finance housing opportunities and revitalize great places for Maryland citizens to live, work and prosper. As part of this mission, DHCD has a number of programs that are geared towards making Maryland homes and businesses more comfortable, efficient, and affordable through energy savings measures. Baltimore City Department of Housing & Community Development (BCDHCD) works with DHCD to provide energy conservation services in Baltimore.

For our energy efficiency programs to be successful, DHCD and BCDHCD will need to compare energy usage before and after the efficiency improvements. To understand how effective these measures are in reducing your energy bills, we will need access to actual energy usage data for your home, as well as data on energy saving measures installed in your home. This data will allow us to more accurately personalize energy savings estimates for home energy improvements provided by participating contractors, ensure that installed measures are delivering the expected energy savings, and allow us to provide feedback to you on energy reductions. This data will also be used by the U.S. Department of Energy's (DOE) and our own program research staff for program evaluation purposes. We take the security and privacy of your information very seriously. We will never sell, rent, or otherwise release personal data to outside parties.

the formation	Name on Account:
Utility and Energy Supplier Information	Account #:
Gas Utility:	Account #:
Electric Utility:	Oil DPropane Account #:
Other Fuel Supplier:	

Utility and Energy Supplier and Program Information Release

As the account holder, I hereby authorize and give permission to the utilities and fuel or energy suppliers named above to ENERGY USAGE INFORMATION RELEASE release account and energy usage information (including my name, address, account number, and usage or consumption information) to DHCD and BCDHCD, for confidential use in connection with calculating energy savings estimates and evaluating the effectiveness of the program. This permission is given for the monthly and total amount of energy used by my household.

As a participant in a DHCD and BCDHCD program, I hereby authorize DHCD and BCDHCD to access my program data and release it to DOE for confidential use in connection with calculating energy savings estimates and evaluating the effectiveness of its program.

This authorization covers the period starting 24 months before the date below and ending 24 months after the date below. Office of Energy Conservation Services, 2700 N. Charles St, Suite 201 Baltimore MD 21218 I may revoke this authorization by written notice to:

-I understand and agree that my account information (including my name, address, account number, and usage or consumption information) will be provided to DHCD and BCDHCD by the above-named utilities and fuel or energy suppliers for the sole and limited purpose of evaluating energy conservation measures. DHCD and BCDHCD and DOE will protect the confidentiality of this information the same as it does for their own customer or other confidential information. By signing this release, I authorize the above-named utilities and fuel or energy suppliers to release my customer account information to DHCD and BCDHCD and for DHCD and BCDHCD to release this information to DOE.

e accepted with the same authority as the original.

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An electronic copy of this authorization may	De accepte -	Signature:
An electronic copy of an		

Printed	Name:
Date:	

Mailing Address: ____

Health and Safety Screen

. . .

 Child Safety Lead Paint Was your house built before 1978? Is there any chipping or peeling paint in your house? How many children under 6 live in your household? How many children under 6 do not live in your household, but spend more than 10 hours per week in your home?	CIRCLE YES or NO YES/NO YES/NO/unknown YES/NO
Heating System 1. What type of heating system do you have? Gas Oil Electric Other 2. Do you have? Furnace [Ducts] Boiler [Radiators] Space Heater Other 3. Is your heating system working? 4. If no, describe the problem:	YES/NO
 5. How long has it not been operating? Months Weeks Days 6. Do you have a service contract? 	YES/NO
Community Volunteer 1. After you receive the service(s) that you are applying for from Baltimore Housing, would you be interested in volunteer opportunities to engage in community service in Baltimore?	YES/NO