



City of Nashua
Community Development Division
City Hall, 229 Main Street, PO Box 2019
Nashua, New Hampshire 03061-2019

Community Development 589-3095
Planning and Zoning 589-3090
Building Safety 589-3080
Code Enforcement 589-3100
Urban Programs 589-3085
Economic Development 589-3070
Conservation Commission 589-3105
FAX 589-3398
www.gonashua.com

LEAD PAINT PROGRAM and HOME IMPROVEMENT PROGRAM Application

OWNER-OCCUPIED PROPERTIES

Property Address: _____

Contact person for this application: _____

Telephone: _____ E-Mail: _____

Cell Phone: _____

Please check the box for the best method to contact you

Which programs are you interested in applying for?

- Lead Paint Program**
- Home Improvement Program (1-4 Family Homes Only)**

Briefly list, in order of priority, which home improvements are needed:

****Please DO NOT contact any lead paint inspectors/risk assessors or contractors, we will assist you with this****

If you have any questions, please contact Intake Specialist/Program assistant Amy Moutenot at moutenota@nashuanh.gov or (603) 589-3071

Instructions for Filling Out Application

1. Please fill in each section completely
2. Submit the following documents with your application. We cannot process your application until we receive all of the required information. The following is a checklist for your convenience:

_____ Copy of Deed (may be available online – please check with program staff)

_____ Copy of current Insurance Policy (Declaration Page) and proof it is current

_____ Signed copy of the previous year tax returns (owner(s) only)

_____ Four (4) recent, consecutive pay stubs from each employment source
(All working adults)

_____ Recent statement of income amount from any other sources (Examples: retirement
Social Security, disability, AFDC, rent receipts, etc.)

_____ Copy of current mortgage statement or bill

3. Tenant packets must be completed for each occupied unit and submitted with application

Depending on the type of assistance you qualify for, additional documents may be required.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government in order to monitor compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that an agency may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this agency is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.

I do not wish to furnish this information

Race/National Origin:

American Indian, Alaskan Native Asian, Pacific Islander
 Black Hispanic White Other (specify) _____

Ethnicity:

Hispanic or Latino Non-Hispanic or Latino

Sex: Female Male

Female Head of Household: Yes No

PART ONE Property Information

How did you hear of this program? _____

List each person on the deed below

Owner(s) Name	Social Security #	Home Address	Contact #

Type of property (check one): Single-family Two-Family Three-Family Four-Family Other _____

Unit # (or address)	Rent Charged	# of Rooms

*Please list additional units on back of page

Year the Property was built: _____ Date of Purchase: _____ Purchase Price \$ _____

Please list below any mortgage(s) on the property. If none indicate NONE. Are your mortgage payments up to date? _____

_____ \$ _____
Mortgage Company name Monthly Payment

_____ \$ _____
2nd Mortgage Company name Monthly Payment

Are your real estate taxes up to date? Yes No Are your water and sewerage bills up to date? Yes No

Are there any liens against the property? Yes No

If yes, explain: _____

Heat: Gas Electric Oil Propane **Water Heating:** Gas Electric Oil

Cooking Fuel: Gas Electric Oil

Do you receive any Energy Assistance/Fuel Assistance money? Yes No If yes, how much? _____ per _____

Have you been ordered to correct lead hazards by the State? Yes No (if yes, please include a copy of the notice)

Please list below, any additional property you may own: (Owner Occupants Only)

PART TWO
Household & Income Information

Please list every person living in your unit. Proof of income for each working adult is required. Examples of proof include tax returns, pay stubs, wage records, employer verification (directly from employer, not the employee). Income of full-time students 24 years old or younger is not counted. Enrollment must be shown.

First	Last	Age	Date of Birth	Sex	Race (optional)	Monthly Income	Type of Income
Example: Jane	Smith	43	11-15-1962	F	White	\$425.00	Soc. Security, Pension, Wages, Alimony, Child Support etc.

Does your household have net assets with a value over \$5,000? Examples include savings & checking accounts, stocks, etc. (Vehicles are excluded)

- NO
 YES (list and provide statements) _____

Are you or any members of your household handicapped and or disabled? YES NO
 Optional: If you answered yes, please list any special equipment/home improvements they might need (ramps, safety bars, height adjusted light switches etc)

INCOME GUIDELINES FOR OWNERS & TENANTS

Family Size	Annual Income
1	\$45,100
2	\$51,550
3	\$58,000
4	\$64,400
5	\$69,600
6	\$74,750
7	\$79,900
8	\$85,050

Effective date 12/11/2012. Income limits are published by HUD on an annual basis and subject to change.

<i>FOR OFFICE USE ONLY</i>	
Yearly income \$ _____	Income limit \$ _____
Income limit category <input type="checkbox"/> Extremely low – 30% <input type="checkbox"/> Very low – 50% <input type="checkbox"/> Low – 80%	
Signature of UPD representative _____	Date _____

PART THREE Lead Test Form

Please list each child less than six (6) years of age below. **Proof of age for children under six (6) years of age, who live on the property, is required.** Examples include tax return, birth certificate, medical or school records.

Any children under 6 years of age, who visits the property often, should be listed at the end of this page. Please include their name, age, relation to head of household and time spent visiting the property.

Have the children living in your home been tested for lead in the past three (3) months? If not, the Lead Program STRONGLY recommends having them tested before lead work begins. Your child's doctor may have this information.

Name _____ Date tested _____ Results _____

_____ The above listed children **have not** had their blood lead levels tested in the past three (3) months; however I agree to have them tested at this time and will supply the results to the Nashua Lead Paint Program.

_____ For religious and/or personal reasons, I choose **not to have** my child (children) tested for lead.

I/We voluntarily disclose this information. I/We understand that disclosure of this information is not required for participation in the Nashua Lead Paint Program.

(Parent/Legal Guardian)

(Date)

Do any of the above children receive Medicaid Insurance? How Many? _____

Visiting child

Name:

Date of birth:

Relation (friend, cousin, etc):

of hours per week spent at house:

If you wish to get your child tested for lead you may do so at the Nashua Public Health Department located at 18 Mulberry St.

Clinic hours are Tuesdays 4:00-7:00 PM and Fridays 8:30 AM-10:30 AM

PART FOUR

PROGRAM INFORMATION/AGREEMENT

All personal information you provide will be used solely to determine eligibility for this program and/or reporting purposes and will be kept strictly confidential.

Please read the following terms carefully:

ONCE THE LEAD INSPECTION/RISK ASSESSMENT HAS BEEN PERFORMED DO NOT PERFORM ANY WORK ON THE HAZARDS IDENTIFIED. It is illegal for unauthorized individuals to perform lead abatement.

Program Requirements:

If your application is approved, a Licensed Lead Inspector/Risk Assessor will perform an inspection at your property to identify all lead-paint hazards. The level of work required will depend on the hazards identified.

Program staff will identify any other rehabilitation and/or code work that is needed.

The lead-paint program offers grant funds toward the cost of correcting lead hazards. If you qualify for a GRANT, you will be required to sign an agreement that you will occupy the property for at least three (3) years.

A deferred payment, 0% interest LOAN may be offered to cover the cost of the other rehab/code work, or the gap cost of lead hazard work. If a loan is offered, we will record a mortgage on your property. You will be required to repay the loan when you sell, refinance or transfer your property.

All payments to the contractor will be processed through our office. A check in both your name and the contractor's will be issued; you must be available to sign the check within 24 hours.

Please refer to the complete Program Guidelines (given to you with your application) for details of work priorities, funding limits, etc.

You hereby grant permission to the City of Nashua's Urban Programs Department to obtain any further information necessary to determine your eligibility. This information may be obtained from any source named in this application.

Properties that have a child with an elevated blood level or a child under the age of six (6) may be assisted before a property with none.

All properties that receive assistance through this Program will be added to the City's website as part of a lead-safe housing registry. The property address and owner's name(s) will be listed. Please check here if you would like to include a contact number for interested renters: Contact #: _____

Relocation during deleading work:

Temporary relocation may be required by State and Federal regulations so that no member of your family or tenants will be exposed to dangerous lead dust. **The average relocation time is 14 working days. Only one unit at a time will have to move.** The exact time depends on the size of the unit and/or how much lead hazard work must be done. No one can go in and out of the unit during this time. You cannot move back in until you have been notified that the work is done and it is safe. To make sure your unit is safe; samples for lead dust will be taken throughout

your home. A laboratory will test these wipe samples. It is advised that households temporarily relocate with family or friends.

Preparing your unit for lead-hazard work:

You are responsible for packing and storing your belongings to protect them from lead dust. You are also responsible to make sure your tenants prepare their units. Detailed instructions will be provided to you at a later date.

Non-Liability of personal injury/damage:

I will indemnify and hold the City of Nashua, Division of Community Development’s Urban Programs Department and its employees harmless against any claims for injury or damage of any kind to persons or property occurring or arising during this program.

By signing this application you: Attest that the information contained herein is true and complete to the best of your knowledge and belief; agree to the terms of the program; acknowledge that you have been given the lead safe pamphlet, “Protect Your Family from Lead in your Home”; and that submission of this application does not guarantee you will receive assistance.

Signature of Owner

Signature of Owner

Date: _____

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Attached is an extra copy of these terms, please tear off and keep the next two pages.

**OWNER'S COPY – PLEASE KEEP
PROGRAM INFORMATION/AGREEMENT**

All personal information you provide will be used solely to determine eligibility for this program and/or reporting purposes and will be kept strictly confidential.

Please read the following terms carefully:

ONCE THE LEAD INSPECTION/RISK ASSESSMENT HAS BEEN PERFORMED DO NOT PERFORM ANY WORK ON THE HAZARDS IDENTIFIED. It is illegal for unauthorized individuals to perform lead abatement.

Program Requirements:

If the property qualifies, a Licensed Lead Inspector/Risk Assessor will perform an inspection at your property. The level of work required will depend on the hazards identified.

If you qualify for a GRANT, you will be required to sign an agreement that the property will be rented to low-income households for at least three (3) years and that you will give preference to families with children under six (6) years of age.

A credit report for each owner may be obtained from a credit-reporting agency.

Funds will be reserved in both your name and the Contractor's name for the purpose of paying the contractor. You must be available to sign the check within 24 hours. All payments will be made through this office.

You hereby grant permission to the City of Nashua's Lead Paint Program to obtain any further information necessary to determine your eligibility. This information may be obtained from any source named in this application.

Properties that have a child with an elevated blood level or a child under the age of six (6) may be assisted before a property with none.

All properties that receive assistance through this Program will be added to the City's website as part of a lead-safe housing registry. The property address and owner's name(s) will be listed. Please check here if you would like to include a contact number for interested renters: Contact #: _____

Relocation during lead work:

During the time that the contractors are working inside your home, your family and the tenants may have to temporarily move out. **The average time is 14 working days. Only one unit at a time will have to move.** The exact time depends on the size of the unit and/or how much work must be done. No one can go in and out of the unit during this time. You cannot move back in until you have been notified that the work is done and it is safe. To make sure your unit is safe; samples for lead dust will be taken throughout your home. A laboratory will test these wipe samples. Relocation may be required by State and Federal regulations so that no member of your family or tenants will be exposed to lead dust during construction. It is advised that households temporarily relocate with family or friends.

Preparing your unit for lead work:

You are responsible for packing and storing your belongings to protect them from lead dust. You are also responsible to make sure your tenants prepare their units. Detailed instructions will be provided to you at a later date.

Non-Liability of personal injury/damage:

I will indemnify and hold the City of Nashua, Division of Community Development's Lead Paint Program and its officials harmless against any claims for injury or damage of any kind to persons or property occurring or arising during this program.

By signing this application you: Attest that the information contained herein is true and complete to the best of your knowledge and belief; Agree to the terms of the program; acknowledge that you have been given the lead safe pamphlet, "Protect Your Family from Lead in your Home"; and that submission of this application does not guarantee you will receive assistance.

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