

# NCHFA URP 2022 Implementation Webinar June 14, 2022

CD1

# WELCOME!



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## OUR TEAM:

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## Slide 1

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**CD1** Chuck Dopler, 6/11/2020

## Website

- Navigate to our Website: <https://www.nchfa.com>
- Bookmark this page
  - <https://www.nchfa.com/homeownership-partners/community-partners/community-programs/urgent-repair-program/forms-and-resources>
- You will find the Admin manual plus required and optional forms you need to operate your project successfully



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## Housing Financed by NCHFA

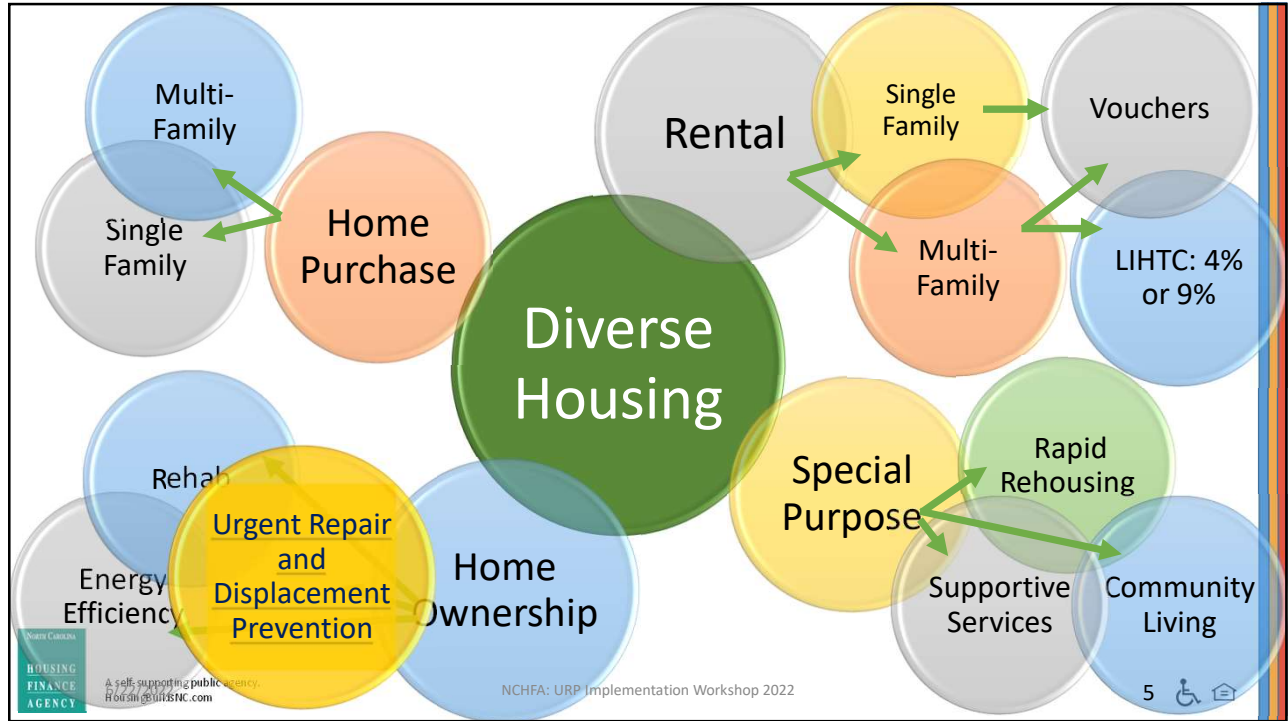
- More than **318,830** households have benefited from our investments.
- More than **130,840** home buyers assisted
- Nearly **116,730** Apartment Homes constructed
- Over **310,000** jobs supported in our state.
- Over **\$30 billion** in Real Estate Value with **\$2.2 billion** in tax revenues generated
- All **100** counties have improved their housing stock and have benefited from the jobs and tax revenues generated by NCHFA financed projects/programs.



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*Good housing for North Carolinians  
Good business for North Carolina*

## Our Mission...

... We provide safe, affordable housing opportunities to enhance the quality of life of North Carolinians.

Vision 4: Be recognized as the affordable housing leader in the state.



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## Our Core Values

### **We Care**

**Respect all people; listen to understand**  
**Passion for what we do**

### **We Act**

**Integrity, Professionalism, Cooperation**  
**Do what we say we will do**  
**Stewardship of resources (whose money is it anyway?)**

### **We Lead**

**Invest to improve lives and communities**  
**Excellence, Innovation**  
**Long-term solutions**  
**Fair, Open, Transparent**



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YOU'RE HERE BECAUSE WE BELIEVE YOU SHARE OUR MISSION AND VALUES



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## NC Housing Trust Fund

- Finances emergency repairs and accessibility modifications
- Helps disabled and elderly homeowners as well as military veterans
- Keeps people in their homes and out of costly institutions



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## Who are we supporting through the Housing Trust Fund?

Roughly 15% of NC's Population:  
aged 65 or older.

The fastest growing population  
segment: 85 and older.

Some 70% of seniors spend the rest of their lives where they celebrated their 65<sup>th</sup> birthday.



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## Latest URP Results

	<u>2020 Cycle</u>	<u>(2019 Cycle)</u>
<b>Homeowners served:</b>	<b>663</b>	<b>(678)</b>
<b>Average Hard Costs per unit:</b>	<b>\$0,000</b>	<b>(\$ 7,220)</b>
<b>Average Program Expense per unit:</b>	<b>\$000</b>	<b>(\$ 686)</b>
	<u>2020 Calendar Year</u>	<u>(2019 Calendar year)</u>
<b>Homeowners served:</b>	<b>670</b>	<b>(614)</b>
<b>Average Hard costs per unit:</b>	<b>\$6,523</b>	<b>(\$7,092)</b>
<b>Average Program Expense per unit:</b>	<b>\$000</b>	<b>(\$677)</b>

**Total URP commitment to date: \$ 63 M**



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# URP Households for 2021

The average income of households assisted under URP in CY 2021 was **\$15,763**

**55%** of households were below 30% of median (vs. 54% last year)

Over **78%** of beneficiaries were elderly

More than **47%** were disabled

This year to date, there have been **668** units completed under 2021

URP has now assisted over **17,000** households in all 100 counties



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## URP Repairs by Work Description 2018 Cycle

Work Description	
Other	291
Roof	271
Floors	131
Accessibility	126
Plumbing	114
HVAC	106
Stoop - Porch	102
Electrical	74
Ceilings - Walls	51
Well - Sewer	20
<b>Total</b>	<b>1,286</b>



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## URP22 Application for Funding

**Applications for URP22 funding were submitted between 1/13/22 and 2/28/22.**

**Ranking criteria were based on applicant capacity (qualifications of key staff, performance under other home repair programs), proposed matching funds, and areas that were determined to be underserved.**

**Several applications were missing important documents and data or information, as is typical.**



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## URP22 Application Results

**There were 57 applicants and a total of \$10 million was requested for a total of 85 counties in a competitive process.**

**Ultimately, 39 URP projects were recommended to the Agency's Board for funding of \$6.6 million to provide repairs to 654 homes in 67 counties.**



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# Congratulations! You are the successful applicants.

After this Workshop, your next steps are the  
PAD Process and Funding Agreement  
so you can begin to operate your program.



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# SUCCESS WITH THE URGENT REPAIR PROGRAM



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Before you do anything,  
**READ**



## Your URP22 Administrator's Manual

- 1 We are covering only the highlights in this Webinar
- 2 Program guidelines are referenced by number throughout the Webinar presentation
- 3 Use the index in the Administrator's Manual to find a topic
- 4 Use your screenshot function if you want to save a slide
- 5 You can ask us a question by typing then sending it



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## What's New for URP22

- Increasing the maximum amount of Program Assistance per dwelling unit for Hard (Repair) Costs + Soft (Program Support) Costs from \$10,000 to \$12,000.
- Adding funding for organizational Administrative Costs at 10% of the total completed unit HC+SC, up to a max of \$1,000 per completed unit.
- Increasing the homeowner's annual forgiveness to \$3,000 per year beginning with URP22.
- Adding ARPA funds to the list of allowable sources that can be used in conjunction with URP funds
- No longer requiring the funded partner to have an interest-bearing account for URP deposits from the Agency (NCHFA).
- Requiring a member from each funded partner to attend this Workshop.



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# First Things First

## PG 1. Goals, Objectives and Funding Sources



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## URP Goals

**To alleviate housing conditions which pose an imminent threat to the life or safety of very low-income homeowners with special needs;**

**And...**

**To provide accessibility modifications and other repairs necessary to prevent displacement of very low-income homeowners with special needs, such as frail elderly and persons with disabilities**



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## URP Objectives

- Distribute Program Funds equitably across the state
- Serve households with urgent repair needs that can't be met through other state or federal housing assistance programs
- Enable the frail elderly and those with physical disabilities to remain in their homes through repairs and modifications



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## URP Funding Sources

- The North Carolina Housing Trust Fund is the **ONLY** source for Hard and Soft Costs
  - State Legislature appropriated
  - No CDFA number
  - Your Funding Agreement in Part B Section 2 outlines specific sources required by state contract provisions
  - Note: Administrative Funds, new for URP22, are funded through NCHFA and *not* the HTF



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# The URP Process



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## PADs, FAs, and Financial Responsibilities

- **PADs – due September 6, 2022** (PAD = Post Approval Documentation).
  - Follow PAD instructions.
  - Discuss your Assistance and Procurement/Disbursement Policies with your Case Manager
  - Start with the sample policies on our website.
- **3.1 Funding Agreement (FA) will be sent only when your PAD is approved by us.**
  - The FA is due back to us by September 23, 2022
  - 3.1.6 Multi-County service areas adhere to specific fund distribution per PAD
- **3.2 Disbursement and receipt of URP funds –**
  - You will receive **50% of your funds 'up front'** when we receive your executed FA
  - Ask for the remainder when you spend 90% of your 'up front' funds. Use your PMR.
- **3.3 Honesty and Fidelity bonding**
  - Required; must cover 50% of your total URP awarded funds



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## PADs, FAs, and Financial Responsibilities continued

- **3.4 Disbursing payments from your URP account –**
  - Funding Agreement / Workshop attendance completed
  - URP funds deposited in an insured account
  - Executed loan (Promissory Note) & construction contract for the homeowner (unit) required before you use the funds
  - **New for 2022: Admin funds not included see 2.1.10**
- **3.5 Program income –**
  - Interest or other funds you receive are used for your URP projects
  - You will give it back to us if you don't spend it
- **3.6 Accounting – account for URP funds separately**
  - Accurate, current, complete disclosure of financial results
  - Records, full internal controls, actual vs. budgeted amounts
  - Resolution of any Audit findings and recommendations

## PADs, FAs, and Financial Responsibilities continued

### 3.7 Record Keeping

- **Three year retention** of records (including *all* applications, not just selected) from the date of the project closeout letter from the Agency. (*What about a 4 year loan?*)
- **Records** of URP fund disbursements sufficient to determine **compliance with guidelines and objectives of URP**. These must be available for monitoring and audits
- **If you Self-contract**, use an itemized summary account (see PG 4.2.2.2 and 4.2.2.3)
  - **No use of URP funds for overhead, profit or administrative expense, 4.2.2.3**

### 3.8 Procuring materials and labor for your Project

- **Follow your Procurement and Disbursement Policies**
- Promote **fair and open competition** and retain all written contracts
- No spending until you receive your first round of funds
- You must account for URP spending separately from all other sources
- Cities and Counties must also follow **GS 14.234 Conflict of Interest and 44A-25-33 Model payment and Performance Bond** GS-

### 3.9 Financial audit compliance:

- **GS159-34 (local government) or GS143C-6-22 (non-profit)**

Now that you are in order financially, what's next?

File set-up  
Advertising  
Intake  
Homeowner Selection



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## The Project File

1. Assistance Policy (AP)
2. Procurement/Disbursement Policy (P/DP)
3. Client Relations
4. Matching Funds info
5. Individual Homeowner Files  
-files within files 😊



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## The Project File is also likely to contain:

6. Copy of your Application for Funding
7. Funding Agreement
8. Copy of your (completed) PAD
9. Applicant Ranking Process and Notes
10. Applications denied, disposition letters
11. Advertisements, other program outreach
12. Written Contracts with Consultants, if any
13. Contractor Registry information (or show that you have it)
14. Project Amendments
15. Certification of Completion of the Project (CCFC)
16. Homeowner (Human Interest) Story - min 1
17. **Lead Base Paint (LBP) log if you are acting as the Certifying Firm OR Certificates/Letters for RRP contractor if it's centralized**

## The Homeowner Case File

- See 4.3 'Program Documents'
- Refer to these lists:
  - URP Case File Monitoring Checklist
  - URP Case File Review
  - URP Desktop Review
- Set up Files accordingly



## Case File Documents

- **Required documents (PG 4.3) (page 29 online)**
  - **Application and Eligibility Certification**
  - **Verification of ownership**
  - **Verification of income**
  - **Work write-up**
  - **Cost estimate**
  - **Construction proposals or itemized summary account**

### URP Forms

Application and Eligibility Form - Effective August 10, 2020  
 Certification of Completion and Final Cost  
 Certification of Final Inspection  
 Contractors Release of Liens  
 Construction Contract - Bid  
 Construction Contract - Self  
 Estoppel  
 Itemized Summary Account - Self Contracting  
 Modification Agreement  
 Owner Certificate of Satisfaction \*New 2019\* Use for all URP programs  
 Pre-Construction Conference Record  
 Promissory Note 2019  
 Request for Project Amendment  
 Zero Income Affidavit \*New 2018\*

<https://www.nchfa.com/homeownership-partners/community-partners/community-programs/urgent-repair-program/forms-and-resources>

## Case File Documents

- **Required documents (continued)**
  - **Pre-construction Conference Record**
  - **Construction contract (any change orders)**
  - **Contractor's release of liens**
  - **Promissory Note & Modification or Estoppel**
  - **Certification of Final Inspection**
  - **Owner Certificate of Satisfaction**

## Case File Documents

- **Very strongly Recommended documents**
  - **Before/after photos**
  - **Record of contacts/correspondence**
  - **Construction drawings/plans (if any)**
  - **Project financial log**
  - **Bid invitation**
  - **Record of interim inspections**
  - **Certification of compliance – Building Inspector**
  - **Document Log or check sheet**



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## Follow your Assistance Policy (AP) for:

- > How to advertise
- > How to do intake
- > How to select homeowners

See AP model policy on-line soon



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## How to advertise - PG 4.1.2

- Use as many sources as you reasonably can to reach your target audience: homeowners at less than 50% AMI (and half of those below 30%.
- Be sure your publicized outreach includes 'This program is sponsored by (your organization) with funds provided by the NC Housing Trust Fund.'

## Intake

- **Use our form.** If you have a pre-intake form for all of your programs, you still **must use our form** for the homeowners you select for URP.
- Be sure you follow what you told us in your URP application and AP under **Client Relations** for referrals to and networking with other local agencies.

## 2.4 Eligible Households

100% of households assisted must have special needs (2.4.4):

- Elderly
- Handicapped
- large family (5 or more persons)
- single parent (at least one dependent child)
- Veteran
- child <6 yrs old living in house with lead paint

## Eligible Households

Definition of 'Veteran' for our purposes:

***Veteran:*** A person who served in the active military, naval, or air service, and who was discharged or released there from under conditions other than dishonorable = **DD214**

# Eligible Households

- **Minimum of 50% of assisted households must have incomes  $\leq$  30% AMI (2.4.1)**
- Households with gross annual incomes  $\leq$  50% AMI (2.4.2)
- Income limits: either 2022 Statewide non-metro **\*OR\*** 2022 Income Limits by County
  - Must choose and use the same set of limit type for the duration of the funding agreement
  - You should use the 2022 limits effective June 15, 2022, they are on our website

## 2022 HOME Income Limits by County, by Household Size

Effective June 15, 2022

County	Median Income	Percent Median Income	Household Size (Number of Household Members)							
			One Person	Two Person	Three Person	Four Person	Five Person	Six Person	Seven Person	Eight Person
Alamance	\$78,200	30%	\$15,850	\$18,100	\$20,350	\$22,600	\$24,450	\$26,250	\$28,050	\$29,850
		50%	\$26,400	\$30,200	\$33,950	\$37,700	\$40,750	\$43,750	\$46,750	\$49,800
Alexander	\$69,600	30%	\$14,150	\$16,200	\$18,200	\$20,200	\$21,850	\$23,450	\$25,050	\$26,700
		50%	\$23,600	\$27,000	\$30,350	\$33,700	\$36,400	\$39,100	\$41,800	\$44,500
Alleghany	\$48,800	30%	\$13,750	\$15,700	\$17,650	\$19,600	\$21,200	\$22,750	\$24,350	\$25,900
		50%	\$22,900	\$26,200	\$29,450	\$32,700	\$35,350	\$37,950	\$40,550	\$43,200



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## 4.1 Selection of Applicants

Once you have your applicants for participation in URP:

### Follow your AP

- End the application period or continue with **first-come, first to qualify, first served**
- Verify income and ownership
- Score each, following your scoring table



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## 4.1 Selection of Applicants Continued

- **Assistance Policy – public document (4.1.3)**
  - Adopted, signed and **readily available to public**
- **Certification of receipt of Assistance Policy by the homeowner by signature and date = Best Practice**
- **Loan recipients are required to:**
  - **Possess an Ownership interest of at least 1% in the property or a life estate (4.1.4)**
  - **Be income-eligible (4.1.5)**
  - **Have special needs (4.1.6)**

## 4.1 Selection of Applicants Continued

- **Property characteristic requirements (4.1.7):**
  - located in NC
  - owner-occupied – 20% MHU on rental lots
  - not >50% of space for office/business
- **Application & eligibility certification (USE THE FORM ONLINE)**
  - sign and date
- **Third party verification of income**
- **Verification of ownership**
- **Verification of requested repairs/modification**

# Fair Housing



- Fair Housing activities by the funded Community Partner
- **Your Assistance Plan is an integral part of Fair Housing**
- Affirmative marketing must consist of actions that provide information and otherwise attract persons to available rehab programs without regard to race, color, national origin, sex, religion, familial status, or disability
- Marketing of Agency programs like URP must include a broad audience over a period of time, not just a repetition of one faith-based group, one business, one neighborhood, etc.....

**Fair. Transparent. Consistent. Applied uniformly.**



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# Fair Housing



## **IF you already use HUD recommendations for your other programs...**

- Translation of marketing materials to serve LEP (limited English proficiency) population
- Work with the identified language(s) of minority-owned print media, broadcast media, social media, etc....
- Place marketing materials at locations that provide free public service announcements (theaters, libraries, etc.)
- Partner with faith-based and community organizations that serve recently established immigrants
- Conduct marketing activities at adult-education training centers and at organizations providing ESL classes



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## 4.1 Selection of Applicants Continued

Once you have your applicants selected for participation in URP:

- **Meet with homeowners**
  - **what do they *need* ?**
  - **can you move them forward ?**
  - **can you provide match funding ?**



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## Repair Eligibility

**Alleviate conditions that pose an imminent threat to the life or safety of very low- income homeowners with special needs;**

**Provide accessibility modifications and repairs necessary to prevent displacement of very low-income homeowners with special needs, such as frail elderly and persons with disabilities**

**The heart of the matter:  
is it URGENT?**



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## 2.1 Uses of Funds

### 2.1.1 URP funds may be used with:

- Volunteer labor
- Donated materials
- Local funds
- WAP
- HARRP
- Independent Living Center funds (DPP)
- USDA RD 504 Loans
- Home and Community Care Block Grants provided by the North Carolina Division of Aging and Adult Services
- **American Rescue Plan Act (ARPA) funds**

## 2.1 Uses of Funds continued

### URP funds may be used with DPP (PG 2.1.9)

#### DPP = Displacement Prevention Program

Managed by DHHS through the Independent Living Rehabilitation Program

DPP is used mostly for modifications to the home to provide greater accessibility for a homeowner with disabilities

DPP funds = \$10000 max. & and are part of HTF (same as URP)

As a reminder, URP and DPP can be used on the same house and each program has its own lifetime funding cap

## 2.1 Uses of Funds continued

### Eligible repairs (2.1.3)

(same as URP07 through URP19) - no energy-related tracking

### Maximum URP Assistance (2.1.6)

**\$12,000 per unit including Hard & Soft Cost (Program Support)**

### Per Unit Hard costs (2.1.6)

max = **\$12,000/unit**

no minimum

### Per Unit Program Support costs (2.1.8)

varies with hard costs (refer to table A)

on a unit-by-unit basis only

max = **\$1,000/unit**

no min, but every project could at least get **\$200**



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## 2.1 Uses of Funds 2.1.3

- combustion appliance and chimney hazards;
- electrical system hazards;
- plumbing system hazards;
- imminent structural system failures (e.g. porches, steps and roofs);
- mitigation of environmental hazards such as lead-based paint, asbestos or soil gasses;
- repairs necessary to prevent the imminent displacement of eligible households;
- repairs designed to increase the accessibility of the unit including ramps, hand rails and grab bars, kitchen and bathroom adaptations, and door alterations, etc. for frail or disabled residents;
- imminent threats to life or safety, including those caused by lead, which can be addressed by inexpensive lead hazard reduction activities such as replacing mini-blinds, improving soil conditions around drip lines, replacing windows, etc.; or,
- other repairs approved by the Agency on a case-by-case basis.



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## 2.1 Uses of Funds 2.1.8 Table A

URP Hard Costs	Maximum Program Support
From \$501 to \$12,000	\$200 + 10% of the Hard Cost (not to exceed \$1,000)
Up to \$500	\$200

Mike Handley will demonstrate the Program Support formula in the afternoon session today.

## 2.1 Uses of Funds continued

### 2.1.9 Funds cannot be used...

- In conjunction with state - or federal-housing assistance (CDBG, HOME, HPG, 504 grants, etc.)
- On units for which other sources of state or federal assistance are available at time of repair
- On units for which other sources of state or federal assistance are likely to become available within 6 months following completion.

## 2.1 Uses of Funds



Funds CAN be used with  
**Weatherization Assistance Program (WAP),  
 Heating Appliance Repair and Replacement Program  
 (HAARP), American Rescue Plan Act of 2021 (ARPA),  
 Home and Community Service Block Grants from NC  
 Division of Aging and Adult Services, and  
 Independent Living Rehabilitation Program  
 (Displacement Prevention Program through DHHS**

Now that Homeowners are  
 selected per your AP,  
 you are ready to start the  
 repair process

## 4.2 Repair Procedures

- **Work write-up**
- **Cost estimate**
- **Procuring construction services**
  - **Competitive bid process**
  - **Recipient-performed work (self-contracting)**
- **Pre-construction conference with homeowner certification**
- **Written disbursement procedures**

## 2.5 Repair Standards

**All URP-funded repairs must meet NC Residential Building Code as applicable**

**Must comply with all state and local permitting, inspections, licensing and insurance requirements including the Renovation, Repair and Painting (RRP) rule.**

**No local, state, or federal housing standards apply  
i.e. Housing Quality Standards (HQS) or Uniform Physical Condition Standards (UPCS)**

## 4.2 Repair Procedures continued

### RRP IS THE LAW

- **Housing**, and child-occupied facilities like pre-school and day-care facilities, **built before 1978**
- Follow **when disturbing paint** in a pre-1978 house
- **Certified Renovation Firm**
- The Lead-Safe Certified Guide to Renovate Right
- <http://epi.publichealth.nc.gov/lead/lhmp.html>

**Mike Handley will discuss this topic in more detail at this time.**

## Work Write-up Guidelines

- Take good notes and pictures when visiting the unit
- Understand what the homeowner needs
- Be clear and concise in describing the work
- Use command language in your write-up
- Indicate in the write-up that all work done must confirm to the current NC Building Code
- Leave no doubt in the bidder's mind
- Make your cost estimate using the latest known \$\$

## Competitive Bidding 4.3.3

### Follow your Procurement Policy

#### Including:

- Use and update your contractor registry
- Be sure contractor arranges visits with homeowner
- Advertise for competitive bids whether individual unit or annual contract;
- Send out bid requests to three contractors, minimum
- Use a signed and dated form for Bid Opening with at least two people from your organization present
- Open, Honest, Transparent=Integrity

## Self-contracting

- You still need to get competitive material costs
- You still need a work write-up and cost estimate
- You still need to record costs; use our form: Itemized Summary Account - Self-Contracting
- You still need a contract with the homeowner
- You still need a Lien Waiver
- You still need to have a Pre-construction Conference and use our form
- Honest, open and transparent



## Forms of Assistance 2.3

**Loans:** Program assistance provided to owner-occupants must be in the form of a loan covering the hard and soft costs of the URP funds associated with the repair/modification of the unit.

- Partners must complete the Agency Form called a Promissory Note to provide a loan that meets these requirements:
  - unsecured
  - deferred
  - interest-free
  - forgiven at a rate of **\$3,000** per year, until the principal balance is reduced to zero.



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## Forms of Assistance continued

### Recipient Organizations:

- Must use the URP Promissory Note document provided by NCHFA (2.3.2/3.4.2)  
-(and Modification Agreement or Estoppel, if needed)
- Must service the Note including Record Keeping (3.7)

*Whose Loan is this?      Can you use any form you want?*



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## General Loan Procedures 4.4

### Prior to executing an URP Promissory Note

- ✓ Application & Eligibility Certification
- ✓ Work write-up
- ✓ Cost estimate
- ✓ Assurance through documentation that grantee has ownership interest

### Note:

Construction contract may be signed at the same time or after the URP Promissory Note

## Pre-construction Homeowner Visit

### Set up time with homeowner and contractor

- Use our Pre-con form. It's only one page.
- Sign Promissory Note with homeowner
- Sign Contract - homeowner and contractor
- Go over work writeup
- Be SURE you, the homeowner, and the contractor all know what to expect! NO SURPRISES!
- Manage expectations!

## During Construction

- ❖ **Communication**
- ❖ **Do what you promise**
- ❖ **Be sure the contractor and homeowner also do what they promise**
- ❖ **Follow a Schedule**
- ❖ **Do **only** the work in the contract**
- ❖ **Follow up**

## During Construction

- Follow up with the work:**
- ✓ **Change order – use your form**
  - ✓ **Promissory Note Modification**
  - ✓ **Follow disbursement procedures**
  - ✓ **Document your progress & problems**

## Disbursement Procedures 4.5

### Written procedures

- Inspection of work
  - paying only for work completed
  - ensuring adequate funds are available
  - ensuring changes in the WWU are agreed to by all parties to the original contract
  - signed lien waivers prior to final payment
- 
- How often should you inspect work?

## 3.11 Reporting Requirements

**Project Management Report (PMR) – quarterly -  
due by the last day of the following month after the  
end of the federal calendar quarter**

**Certificate of Completion and Final Cost (CCFC) –  
within 45 days of completion date of December 31**

# Reporting Requirements - PMR

## Reporting Period

**July 1, 2022-December 31, 2022**

**January 1, 2023-March 31, 2023**

**April 1, 2023-June 30, 2023**

**July 1, 2023-September 30, 2023**

**October 1, 2023-December 31, 2023\***

## Report Due Date

**January 31, 2023**

**April 30, 2023**

**July 31, 2023**

**October 31, 2023**

**February 14, 2024**

**\*This is the Final Report and must include the Certification of Completion and Final Cost (CCFC) and a human interest story.**



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# Finally: Completing the Units and the Project



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## Visit Homeowner at Completion:

- **Certification of final inspection by funded organization (You) – Use our form**
- **Owner Certificate of Satisfaction – use our form**
- **Any final issues with homeowner – ensure satisfaction, leave no doubts or expectations.**
- **Follow Unit Close-out Procedures**



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## Unit Close-out Procedures 4.6

- Final inspection including consultation with homeowner
- Certifying all items on WWU completed (use our form)
- Completed lien waivers from contractors before final payment (use our form)
- Ensuring that funds committed to a unit are spent or the loan balance reduced (loan modification or estoppel – use our forms)
- Show that unit is completed on the PMR, and include cost reporting



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## Monitoring by NCHFA 3.12

### Site visits (See handout)

- Partner performance
- Technical assistance

### Desktop Monitoring (see handouts)

- Conformance with approved application
- Compliance with Program Guidelines
  - assistance, procurement, disbursement policies
  - case file review – construction procedures and documents
  - financial records
  - inspection of URP assisted units
  - Dates
  - Partner monitoring?

## Program Close-out 3.13

### By the Completion date of December 31:

- No new grant agreements or contracts
- No change orders > 15% of original contract amount

### 45 days maximum after completion date

- CCFC (Certification of Completion and Final Cost)
- One (1) human interest story with pictures (PG 3.13.5 & 3.13.6)
- Return of funds

**No extensions - absolutely none!**

# SPREAD THE WORD!

TO:

- COMMUNITY LEADERS
- COUNTY OFFICIALS
- STATE ELECTED REPRESENTATIVES

**KEEP THE HOUSING TRUST FUND FULLY FUNDED**

**NO HTF = No URP**



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Break

Until 12:45 PM



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# *Good housing for North Carolinians Good business for North Carolina*



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## Our classic mission

*To create affordable housing opportunities for North Carolinians whose needs are not met by the market*



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# URP INCOME ELIGIBILITY DETERMINATION



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**NORTH CAROLINA HOUSING FINANCE AGENCY**  
**URGENT REPAIR PROGRAM**  
*Application & Eligibility Certification* (page 1 of 2)

**Applicant Data**  
Name of Homeowner(s) (First, MI, Last): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
If the Applicant was referred by someone other than self, complete the following:  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship to Owner: \_\_\_\_\_  
Notes: \_\_\_\_\_

**Household Membership**

Name (First, MI, Last)	Sex	Birth Date	SSN* (last 4 digits)	Race Code*	Hispanic**	Relation to Homeowner
a.						
b.						
c.						

3) This information is provided to qualify me for the Urgent Repair Program (Program). The Program is intended to assist low- and very low-income homeowners with special needs in correcting substantial housing conditions which pose an imminent threat to their life or safety or in performing accessibility modifications or other repairs necessary to prevent imminent displacement.  
4) I give permission for \_\_\_\_\_ to access information to verify the contents of this application and to facilitate the repair of my home.  
5) I understand that this Program grant may not rectify all deficiencies in my home nor make the home conform to any local, state or federal housing quality standards.  
6) I have been advised that my gender, race and ethnicity will be determined based upon observation and/or surname. If I do not self disclose the information.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**NORTH CAROLINA HOUSING FINANCE AGENCY**  
**URGENT REPAIR PROGRAM**  
*Application & Eligibility Certification* (page 2 of 2)

**Applicant Data**  
Name of Homeowner(s) (First, MI, Last): \_\_\_\_\_  
Street Address: \_\_\_\_\_

**Qualifying Income Table (for reference) Maximum Gross Household Income**

Household Size	1	2	3	4	5	6	7	8
a) Statewide non-metro - 50%								
b) Statewide non-metro - 50%								
c) County - 50%								
d) County - 50%								

**Qualifying Questions**  
Does the applicant own this home? YES  NO   
Does the applicant's household qualify based on the income criteria? YES  NO   
Mark all Special Need(s) by which the Applicant qualifies:  Single-Parent Household

Action taken for referrals? YES  NO  If yes, specify: \_\_\_\_\_  
Other: \_\_\_\_\_

\*Race Code: White (11), Black/African American (12), Asian (13), American Indian/Alaska Native (14), Native Hawaiian/Other Pacific Islander (15), American Indian/Alaska Native & White (16), Asian & White (17), Black/African American & White (18), American Indian/Alaska Native & Black/African American (19), Other Multi-Racial (20), and, Asian/Pacific Islander (21).  
\*\*Hispanic: Yes or No.  
\*\*\*Veteran: A person who served in the active military, and who was discharged or released therefrom under conditions other than dishonorable.

- Use the official URP Application and Eligibility Certification Form (shown)
- If you use your own pre-intake form you still in the end must use the required URP Application and Eligibility Form
- Properly fill in ALL required spaces on BOTH sides. The application must be properly completed to obtain NCHFA funding
- When filling in the income table, add both across and down
- Be sure the homeowner certifies that you are given permission to obtain utility and other billing info
- Properly complete the Qualifying Income Table
- 'Certification' requires a signature and date. Ensure they are all there, both the applicant's and yours



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**NORTH CAROLINA HOUSING FINANCE AGENCY**  
URGENT REPAIR PROGRAM  
Application & Eligibility Certification (page 1 of 2)

**Applicant Data**  
Name of Homeowner(s) (First, MI, Last): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
If the Applicant was referred by someone other than self, complete the following:  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship to Owner: \_\_\_\_\_  
Notes: \_\_\_\_\_

Household Membership							
Name (First, MI, Last)	Sex	Birth Date	SSN (last 4 digits)	Race Code*	Hispanic**	Relation to Homeowner	

Gross Income Work Table		Dollars / Household Member / MONTH								
Source		1	2	3	4	5	6	7	8	Total
1) Wages										
2) Retirement/Pension										
3) Social Security										
4) Supplemental Security Income										
5) Public Assistance										
6) Child Support										
7) Interest										
8) Div.										
9) Other										
10) Total										
Monthly Sub-Total (sum rows 1-10)										
Annual Sub-Total (12 x row above)										
Annual Gross Household Income (sum Annual Sub-Totals for columns 1-9)										

**Applicant Certifications**  
I hereby certify that:  
1) I own and occupy the home described above as my primary residence;  
2) The household and income information listed above is complete and true to the best of my knowledge;  
3) This information is provided to qualify me for the Urgent Repair Program (Program). The Program is intended to assist low- and very low-income homeowners with special needs in correcting substantial housing conditions which pose an imminent threat to their life or safety or in performing accessibility modifications or other repairs necessary to prevent imminent displacement.  
4) I give permission for \_\_\_\_\_ to access information to verify the contents of this application and to facilitate the repair of my home.  
5) I understand that this Program grant may not rectify all deficiencies in my home nor make the home conform to any local, state or federal housing quality standards.  
6) I have been advised that my gender, race and ethnicity will be determined based upon observation and/or surname if I do not self-disclose the information.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**NORTH CAROLINA HOUSING FINANCE AGENCY**  
URGENT REPAIR PROGRAM  
Application & Eligibility Certification (page 2 of 2)

**Applicant Data**  
Name of Homeowner(s) (First, MI, Last): \_\_\_\_\_  
Street Address: \_\_\_\_\_

Household Size	1	2	3	4	5	6	7	8
a) Statewide non-metro - 30%								
b) Statewide non-metro - 50%								
c) County - 30%								
d) County - 50%								

**Qualifying Questions**  
Does the applicant own this home? YES  NO   
Does the applicant's household qualify based on the income criteria? YES  NO   
Mark all Special Need(s) by which the Applicant qualifies:  Single-Parent Household  
Owner 62+:  Member Disabled  EBLI Child  Veteran\*\*\*  Household Size 5+

**Eligibility Certifications**  
I hereby certify that:  
1) All of the above information has been reviewed or documented in accordance with the Program Guidelines.  
2) The Applicant is eligible for assistance under the Program;  
3) There is no other state or federal source of funds available now, or likely to be available within the next six months, which could pay for the proposed repairs.

Authorized Officer \_\_\_\_\_ Organization \_\_\_\_\_ Date \_\_\_\_\_  
Eligible Urgent Repair Needs:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Case Notes (for office use only)** Name of interviewer: \_\_\_\_\_  
Non-housing problems:  
\_\_\_\_\_  
\_\_\_\_\_  
Action taken for referrals? YES  NO  If yes, specify: \_\_\_\_\_  
Other:  
\_\_\_\_\_

\*Race Code: White (1); Black/African American (12); Asian (13); American Indian/Alaska Native (14); Native Hawaiian/Other Pacific Islander (15); American Indian/Alaskan Native & White (16); Asian & White (17); Black/African American & White (18); American Indian/Alaska Native & Black/African American (19); Other Multi-Racial (20); and, Asian/Pacific Islander (21).  
\*\*Hispanic: Yes or No.  
\*\*\*Veteran: A person who served in the active military, and who was discharged or released therefrom under conditions other than dishonorable.

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<https://www.nchfa.com/homeownership-partners/community-partners/community-programs/urgent-repair-program/forms-and-resources>

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# What is Compliance Income?

- Income of the homeowner
- Any person(s) expected to occupy the property

## Income documentation:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>W2 forms</li> <li>verification of employment (VOE's)</li> <li>pay stubs, (as of time of application)</li> <li>child support decrees</li> <li>divorce decrees</li> <li>separation agreements</li> </ul> | <ul style="list-style-type: none"> <li>documentation from child support enforcement authorities or ledger history</li> <li>award letters for Social Security / Disability</li> <li>award letters for Supplemental Security Income</li> <li>Federal tax returns (Schedule C's)</li> <li>documentation of full-time student status (transcripts, acceptance letters, etc.)</li> </ul> |
|---|---|

# Calculating Compliance Income

Types of Income	How to calculate income
Annual gross income	Multiply the applicant's hourly, weekly or monthly rate by the appropriate number of pay periods to project annual gross base income.
Bonus and Overtime income	Average past year and year-to-date to project overtime income.
Self-Employed income	Average the reported net income for previous two years and current year-to-date from Profit & Loss statement.
Part-Time income	Multiply the applicant's hourly, weekly or monthly rate by the appropriate number of pay periods OR average YTD earnings and recent W-2 and project income.
Child Support and Alimony	Project the amount verified in the Child Support ledger history, divorce decree or recorded separation agreement.
Retirement/Pension pay	Annualize gross benefits based on the appropriate documentation provided by the source.
Social Security/or Disability	Annual gross benefits based on the benefit letter from Social Security Administration.
Military pay & special allowances	Multiply monthly gross benefits based on the military personnel's pay and leave status.



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## Social Security Administration Supplemental Security Income Important Information

SOCIAL SECURITY  
1249 S VINNRELL WAY  
SUITE 301  
BOISE ID 83700  
Date: November 11, 2010  
Claim Number: 2010040357 DI

CHRISTOPHER ALAN WALKERS  
C/O 285 AMERICANA BLVD  
BOISE ID 83702

Type of Payment:  
Individual-Disabled

We are writing to tell you about changes in your Supplemental Security Income (SSI) record. The rest of this letter will tell you more about this change.

### Your Payments Will Be As Follows:

From	Through	Amount Due Each Month
December 1, 2010	Continuing	\$674.00

### Information About Your SSI Payments

This action does not change your current payment amount.

### Your Payment Is Based On These Facts

- The amount of SSI we pay depends on your living arrangements. Your living arrangements are where you live, with whom you live, and how your food and shelter expenses are paid. Based on the information we have, your Federal living arrangement is:
  - Category A for November 2010 on.
- Please see the enclosed "Fact Sheet on SSI Federal Living Arrangement Categories" for a description of this Federal living arrangement category and others.
- You are living in the State of Idaho for November 2010 on.

See Next Page



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SSI document

Company Name	Sample Company Name, Sample Company Address, 55220	PERIOD END	PERIOD START	PERIOD	PERIOD	PERIOD
Sample Name	1001-1012	1013-1014	1015-1016	1017-1018	1019-1020	1021-1022
INCOME	RATE	HOURS	CURRENT TOTAL	DEDUCTIONS	CURRENT TOTAL	YTD TO DATE
GROSS WAGES	30	36	2,307.00	FICA MED TAX	31.25	1,875.75
				FICA SS TAX	105.00	4,676.00
				FED TAX	324.16	28,183.00
				CA ST TAX	184.76	8,208.26
				SD	29.00	1,125.00
<b>TOTAL GROSS</b>				<b>TOTAL DEDUCTIONS</b>		<b>NET PAY</b>
112,500.00				62,165.07		49,334.93

Wage document

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**ZERO INCOME AFFIDAVIT**

(To be completed by all homeowners in appropriate household)

Homeowner: \_\_\_\_\_

Homeowner address: \_\_\_\_\_

1. I hereby certify that I do not individually receive income from any of the following sources:

- a. Wages from employment (including commissions, tips, bonuses, fees, etc.);
- b. Income from operation of a business;
- c. Rental income from real or personal property;
- d. Interest or dividends from assets;
- e. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
- f. Unemployment or disability payments;
- g. Public assistance payments;
- h. Periodic allowances such as alimony, child support, or gifts received from persons living in my household;
- i. Sales from self-employed resources (Avon, Mary Kay, etc.);
- j. Any other source not named above.

2. I currently have no income of any kind and there is no imminent change expected in my financial status or employment status during the next 12 months.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I further understand that providing false representations here-in constitutes an act of fraud, which may result in the repayment of the loan or promissory note.

PRINTED NAME OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

**ZERO INCOME AFFIDAVIT**



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You may want to use the HUD Income Calculator for URP, especially if you use it for your other housing programs

<https://www.hudexchange.info/incomecalculator/>



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Resources and assistance to support HUD's community partners

NEED HOUSING ASSISTANCE? [Email Updates](#)

**HUD EXCHANGE** My HUD Exchange Programs Resources Trainings Program Support Grantees

Makes determining the income eligibility and assistance amounts for beneficiaries of CPD programs as easy as 1-2-3. Simply enter the requested data and this calculator will work behind the scenes to generate a summary of results for each beneficiary. You should then print out the summary and include it as part of the beneficiary's file.

The calculator currently performs income eligibility and assistance amount calculations for the following HUD CPD programs:

- Brownfield Economic Development Initiative (BEDI)
- Community Development Block Grant Program (CDBG)
- CDBG Disaster Recovery Assistance
- Emergency Solutions Grants (ESG)
- HOME Investment Partnerships Program (HOME)
- Housing Opportunities for Persons With AIDS (HOPWA)
- Housing Trust Fund (HTF)
- Neighborhood Stabilization Program (NSP)
- Section 108 Loan Guarantee Program
- Self-Help Homeownership Opportunity (SHOP)

**Start Calculating Income** [Go To My Dashboard](#)

Start a new calculation or complete a previous calculation

**Related Materials**

- [COVID-19 HOME Sample Self-Certification Form](#)
- [Income Eligibility Calculator User Manual \(PDF\)](#)
- [CDBG Income Limits](#)
- [ESG Income Limits](#)
- [HOME Income Limits](#)
- [HTF Income Limits](#)
- [HOPWA Income Limits](#)
- [NSP Income Limits](#)
- [Using the Income Calculator to Determine Annual Income Webinar Materials](#)
- [Using the Income Calculator for Rental and TBRA Programs Webinar Materials](#)

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HUD EXCHANGE CPD Income Eligibility Calculator Dashboard

User Manual Help

Important Note: The calculator is a tool designed to help a user calculate income in accordance with an allowable definition, but it does not verify income. The calculator does **not** replace the documentation that must be collected and retained by the user. The user must maintain all necessary documentation, which, when using the calculator, will include saving and retaining the summary documents generated by the calculator. **The Dashboard feature is designed to allow you to more easily update a beneficiary's income in the future - however it is not a repository for all previous years' income calculations completed in the past. Users must be sure to save and retain summary documents at the time of creation.** Record retention requirements depend upon the CPD program; users should be aware of the length of time records must be kept as well as their own state or local laws related to record retention and privacy.

The FY 2021 income limits are in effect for all programs within the CPD Income Calculator (note that the effective date for ESG is 4/1/2021). The 30 percent income limits for the CDBG, HOME, ESG, and HOPWA programs have been calculated based on the definition of Extremely Low-Income Family (ELI) as described in Consolidated Submission for CPD Programs section of 24 CFR part 91.5. Therefore, the ELI Limit is calculated as 30 percent of median family income for the area and may not be the same as the Section 8 ELI Limit for your jurisdiction. The Section 8 Limit is calculated based on the definition of ELI as described in The 2014 Consolidated Appropriations Act, (Section 238 on page 128 Stat 635) which defines ELI as very low-income families whose incomes do not exceed the higher of the Federal poverty level or 30% of area median income.

Select a program and start a new calculation

- Select One
- Brownfield Economic Development Initiative (BEDI)
- CDBG Disaster Recovery Assistance
- Community Development Block Grant Program (CDBG)
- Emergency Solutions Grants (ESG)
- HOME Investment Partnerships Program (HOME)**
- Housing Opportunities for Persons with AIDS (HOPWA)
- Housing Trust Fund (HTF)
- Neighborhood Stabilization Program (NSP)
- Section 108 Loan Guarantee Program
- Self-Help Homeownership Opportunity (SHOP)

Start

6/22/2022 65992E726.DOCX

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**HUD EXCHANGE** My HUD Exchange Programs Resources Trainings Program Support Grantees NEED HOUSING ASSISTANCE? Email Updates

**CPD Income Eligibility Calculator**  
HOME Annual Income Calculation User Manual Help

- Dashboard
- ANNUAL INCOME
- Type of Assistance**
- Beneficiary ID
- Beneficiary Location
- Income Determination Method
- Beneficiary Income
- Summary
- ADJUSTED INCOME
- Dependents

Skip to side navigation

**What type of HOME assistance is being provided to this household?**

- Homeowner Rehabilitation
- Homebuyer
- Rental\*
- Tenant-based Rental Assistance\*

**\* IMPORTANT REMINDER: During an annual income RECERTIFICATION of a family residing in HOME-assisted rental housing, or receiving HOME tenant-based rental assistance, it is necessary to manually exclude from annual income certain increases in the income of a disabled family member. These exclusions apply to annual income increases resulting from the following:**

- Employment of a family member who is a person with disabilities and who was previously unemployed for one or more years prior to employment;
- Increased earnings by a family member who is a person with disabilities during participation in any economic self-sufficiency or other job training program; or
- New employment or increased earnings of a family member who is a person with disabilities, during or within six months after receiving assistance, benefits or services under any state program for families funded under Part A of Title V of the Social Security Act and determined to be responsible for the expenditures with the least possible

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Resources and assistance to support HUD's community partners

**HUD EXCHANGE** My HUD Exchange Programs Resources Trainings Program Support Grantees NEED HOUSING ASSISTANCE? Email Updates

**CPD Income Eligibility Calculator**  
HOME Annual Income Calculation User Manual Help

- Dashboard
- ANNUAL INCOME
- Type of Assistance
- Beneficiary ID**
- Beneficiary Location
- Income Determination Method
- Beneficiary Income
- Summary
- ADJUSTED INCOME
- Dependents
- Childcare Expenses

Skip to side navigation

The CPD Income Eligibility Calculator asks for a "Beneficiary ID" instead of a "Last Name" to help protect the privacy of applicants to CPD programs. The Beneficiary ID you enter should be unique, will be included on the Calculator screens and printouts, and will be the key data element necessary to later find, complete, and/or edit the income determination performed for that beneficiary within the Calculator. **DO NOT use any personal information to create a Beneficiary ID, including but not limited to names, social security numbers, or addresses.**

Each user is responsible for designing their own method for creating Beneficiary IDs, as well maintaining and adequately protecting their own auditable records which associate each Beneficiary ID with the individual, family, or household whose income was determined (as appropriate and/or required under the rules of each CPD program.) Printouts from the Calculator for all programs except HOPWA will include both the Beneficiary ID and a blank space in which the Last Name of the associated individual, family, or household can be written or otherwise inserted.

\* Required

**Enter a Beneficiary ID for this household. \***

**How many members are in this household?** Select One...

Previous Continue

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List each person in the household individually.



#1

Beneficiary Member ID

This member is the head of household

This member is the co-head of household

This member is a child UNDER age 18

This member is a fulltime student age 18 years and OVER

This member is 62 years of age or older

This member is a person (of any age) with disabilities

Previous Continue

Fill in the State (NC), County designated in your assistance policy and 30 or 50% for your limit.



Please select the location and income limit information applicable to this household.  
If you are unsure of which income limit to use, the following website provides information on geographic areas:  
<https://www.hudexchange.info/programs/home/home-income-limits/>.

State  
North Carolina

Area  
Raleigh, NC MSA

Applicable 2021 Income Limit for household size in area  
80%

**Income Limit Result**  
The 2021 80% Income Limit for a 1-member household in Raleigh, NC MSA (CBSA: METRO39580M39580) is \$53,600.  
(Completed on June 9, 2022.)



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Indicate if person has been previously determined or not.

Has this household previously been determined income eligible?  
 Yes  No

Select Part 5 Annual Income (Section 2.4.3)

You may choose one of the following definitions of income to use when calculating "annual income" for the TESTcase1 household:

24 CFR Part 5 Annual Income

IRS Form 1040 Adjusted Gross Income

Passbook rate is currently 0.06%.

Applicable Passbook Rate  
 %

Choose one of the following methods to calculate "annual income" for the TESTcase1 household using the 24 CFR Part 5 definition of income:

Short Form Method  Guided (Step-by-Step) Method

Choose between Short Form Method (right) and Guided Method (see next slide)

Asset Type	Asset Description	Current Cash Value	Actual Income from Assets
+ Add			

Anticipated Annual Income

Type	Description	Annual Amount
+ Add		

Anticipated Annual Income for for Beneficiary Member ID: Testcase

Type	Description	Annual Amount
Wages/Salaries	<input type="text"/>	\$ <input type="text"/>
Select One		
Wages/Salaries		
Benefit/Pensions		
Public Assistance		
Other Income		

Save



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**Guided Method  
(Step by Step)**

- **Overtime/bonus pay is calculated for the pay period covered on the pay stub (May = Month 5)**

Calculate wages, overtime, bonuses, and benefits for Beneficiary Member ID: Testcase

Add a job for this member?

Yes  No

Description

Wages/Salaries

Hourly  Annual

Hourly Wage      Hours per week      Weeks per year

\$            

Overtime/Bonuses

Total Overtime/Bonus Pay, Month 1      Total Overtime/Bonus Pay, Month 7

\$       \$

Total Overtime/Bonus Pay, Month 2      Total Overtime/Bonus Pay, Month 8

\$       \$

Total Overtime/Bonus Pay, Month 3      Total Overtime/Bonus Pay, Month 9

\$       \$

Total Overtime/Bonus Pay, Month 4      Total Overtime/Bonus Pay, Month 10

\$       \$

Total Overtime/Bonus Pay, Month 5      Total Overtime/Bonus Pay, Month 11

\$       \$

Total Overtime/Bonus Pay, Month 6      Total Overtime/Bonus Pay, Month 12

\$       \$

Raises

All forms of income earned by program applicants must be accounted for. In addition to base salary, this will include raises and annual cost of living adjustments (COLAs). Use the data entry fields below to enter information about any anticipated increase in annual income the applicant will experience over the next 12 months due to a raise in his or her hourly wage or annual salary and/or an annual COLA.

Check if member anticipates a raise or COLA increase.



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Continue



Beneficiary ID: TESTcase1      Area, State: Raleigh, NC MSA  
Number of Members: 1      Income Limit: \$53,600.00

**Assets**

Member ID	Asset Type(s)	Current Cash Value	Actual Income from Assets
Testcase	Cash	\$200.00	\$0.00
<b>NET CASH VALUE OF ASSETS</b>		<b>\$200.00</b>	

TOTAL ACTUAL INCOME FROM ASSETS      \$0.00

IMPUTED INCOME FROM ASSETS  
(only if the Net Cash Value of Assets is greater than \$5,000):      \$0.00

**Anticipated Annual Income**

Member ID	Wages/Salaries	Benefits/Pensions	Public Assistance	Other Income	Asset Income
Testcase	\$0.00	\$0.00	\$8,088.00	\$0.00	
<b>TOTALS</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$8,088.00</b>	<b>\$0.00</b>	<b>\$0.00</b>



TOTAL ANNUAL INCOME      \$8,088.00

**Income Eligibility Result**

Based upon the information submitted, the Annual Income of **TESTcase1** has been determined to be \$8,088.00, which is below the 2021 80% income limit of \$53,600.00 for a 1-member household in Raleigh, NC MSA (CBSA: METRO39580M39580). (Completed on June 09, 2022.)



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**Save & Return to Dashboard**

Continue to Adjusted Income >



U.S. Department of Housing and Urban Development  
Office of Community Planning and Development  
Income Eligibility Calculator  
24 CFR PART 5 ANNUAL INCOME CALCULATION  
Completed on 07/22/2019

3. Last Name: [Redacted] 4. Area/State: [Redacted] NC 58A 5. 2019 Income Limit: \$38,800.00

6. Net Cash Value of Assets: \$0.00  
7. Total Actual Income from Assets: \$0.00  
8. Imputed Income from Assets: \$0.00

ANTICIPATED ANNUAL INCOME

First Name	Member ID	a. Wages/Salaries	b. Benefits/Pensions	c. Public Assistance	d. Other Income	e. Asset Income
[Redacted]	A	\$0.00	\$14,202.00	\$0.00	\$0.00	
[Redacted]	B	\$6,177.60	\$0.00	\$0.00	\$0.00	
9. Totals		a. \$6,177.60	b. \$14,202.00	c. \$0.00	d. \$0.00	e. \$0.00
10. Enter total of items from 5a through 5e. This is Annual Income: \$20,379.60						

Based upon the information submitted, the Annual Income of [Redacted] has been determined to be \$20,379.60 which is below the 2019 80% income limit of \$38,800.00 for a 2-member household in [Redacted] NC 58A (CPSA) METROSTAT (Completed on July 22, 2019)

COMPLETE SIGNATURES ON NEXT PAGE

U.S. Department of Housing and Urban Development  
Office of Community Planning and Development  
Income Eligibility Calculator  
24 CFR PART 5 ANNUAL INCOME CALCULATION  
Completed on 07/22/2019

Beneficiary ID: [Redacted]

HEAD OF HOUSEHOLD  
Signature: [Redacted] Printed Name: [Redacted] Date: 7/25/2019

OTHER BENEFICIARY ADULTS\*  
Signature: [Redacted] Printed Name: [Redacted] Date: 7/25/2019

PREPARER  
Signature: [Redacted] Printed Name: [Redacted] Date: 07/22/2019

Page 1 of 3 Page 2 of 3 Page 3 of 3

match application  
match application  
Original signatures and dates  
Certifying signature and date

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# FORMS AND REPORTING

URP22 Implementation Webinar

June 14, 2022

Sarah Zinn

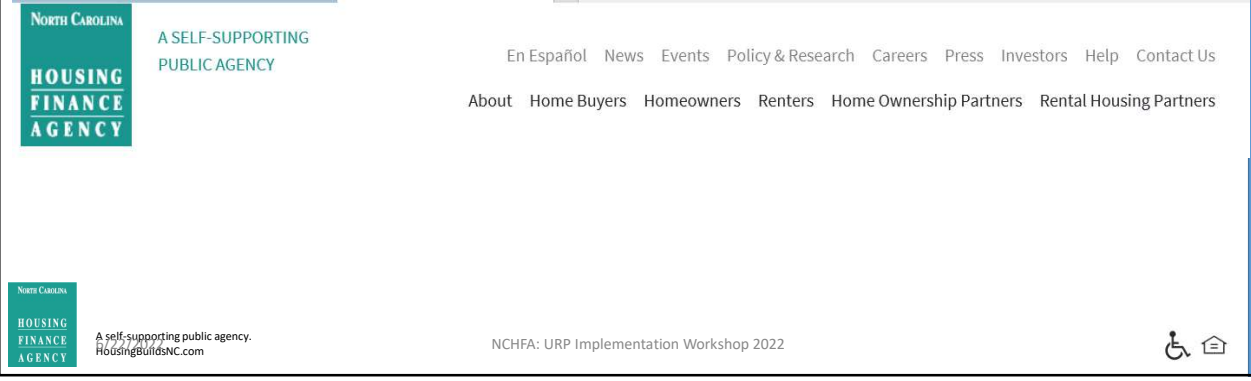
Housing Rehabilitation Officer



# HOW DO I GET THE FORMS?

[www.nchfa.com](http://www.nchfa.com)

<https://www.nchfa.com/homeownership-partners/community-partners/community-programs/urgent-repair-program/forms-and-resources>




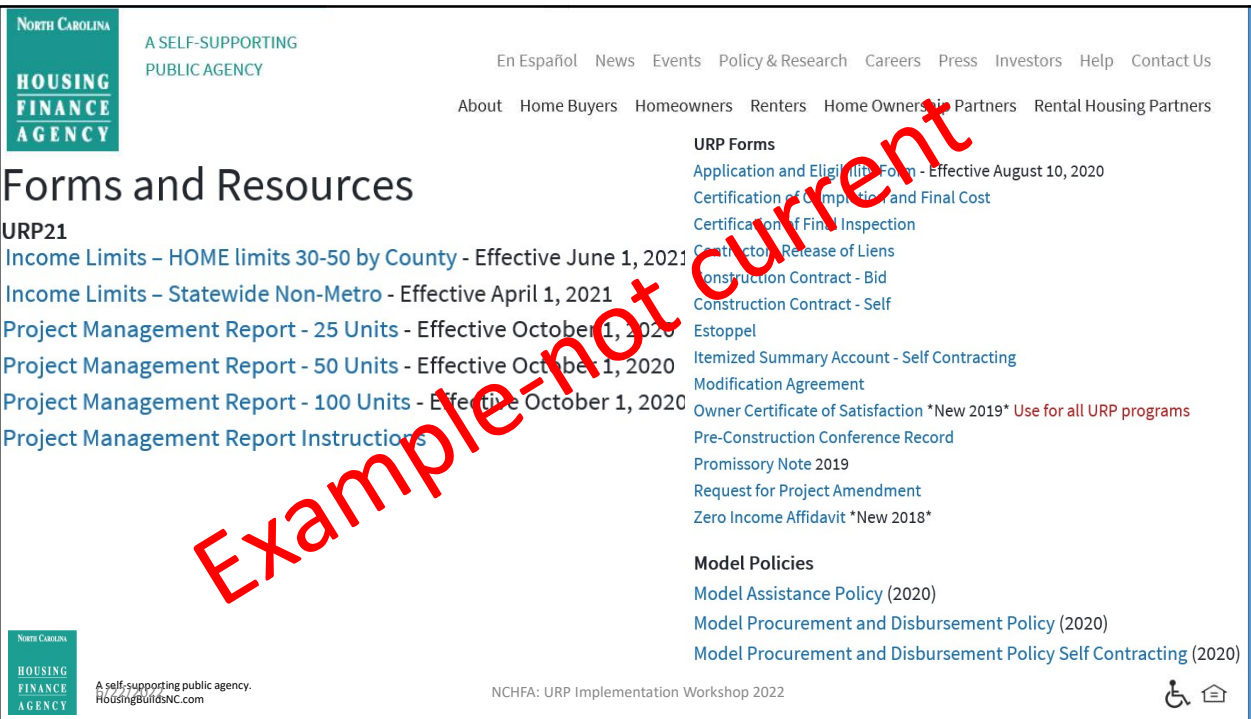
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## Forms and Resources

**URP21**

- [Income Limits – HOME limits 30-50 by County - Effective June 1, 2021](#)
- [Income Limits – Statewide Non-Metro - Effective April 1, 2021](#)
- [Project Management Report - 25 Units - Effective October 1, 2020](#)
- [Project Management Report - 50 Units - Effective October 1, 2020](#)
- [Project Management Report - 100 Units - Effective October 1, 2020](#)
- [Project Management Report Instructions](#)

**URP Forms**


- [Application and Eligibility Form - Effective August 10, 2020](#)
- [Certification of Completion and Final Cost](#)
- [Certification of Final Inspection](#)
- [Contractor Release of Liens](#)
- [Construction Contract - Bid](#)
- [Construction Contract - Self](#)
- [Estoppel](#)
- [Itemized Summary Account - Self Contracting](#)
- [Modification Agreement](#)
- [Owner Certificate of Satisfaction \\*New 2019\\* Use for all URP programs](#)
- [Pre-Construction Conference Record](#)
- [Promissory Note 2019](#)
- [Request for Project Amendment](#)
- [Zero Income Affidavit \\*New 2018\\*](#)

**Model Policies**

- [Model Assistance Policy \(2020\)](#)
- [Model Procurement and Disbursement Policy \(2020\)](#)
- [Model Procurement and Disbursement Policy Self Contracting \(2020\)](#)

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Example-not current

## REQUIRED PROGRAM DOCUMENTS (PG 4.3.1)

- 1) Application and Eligibility Certification (Agency);
- 2) Verification of ownership;
- 3) Verification of occupant income;
- 4) Work write-up and cost estimate;
- 5) Construction proposals (bids received) if applicable, or itemized summary account (model);
- 6) Preconstruction conference record (Agency);
- 7) Construction contract (model);
- 8) Contractor's release of liens (model);
- 9) Promissory Note & Modification Agreement or Estoppel (Agency);
- 10) Certification of Final Inspection (Agency); and
- 11) Owner Certificate of Satisfaction (Agency).



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## RECOMMENDED PROGRAM DOCUMENTS (PG 4.3.3)

- 1) Before and after photographs;
- 2) Record of contacts/correspondence;
- 3) Construction drawings/plans (existing and proposed, if relevant);
- 4) Project financial log, (including change orders);
- 5) Bid invitation;
- 6) Bid opening record/tally;
- 7) Record of interim inspections;
- 8) Certification of compliance from Building Inspector;
- 9) Contractor's invoices and receipts; and
- 10) Zero Income Affidavit (Agency)



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## DESKTOP MONITORING (PG 3.12)

**To streamline monitoring field visits, the agency requires desktop monitoring of written documentation.**

- Mark will notify you when to send your backup homeowner documentation
- We request file backup documentation be scanned
- Email to Mark Lindquist prior to the onsite visit
- Review may differ from homes visited

### Results:

- Case manager can spend more time visiting homeowners/homes
- Less time in the office reviewing files on day of visit



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## DESKTOP MONITORING

### The documents requested consist of:

1. Application/Eligibility Certification-**Agency form**
  - Dated, signed by homeowner and intake personnel
2. Verification of ownership
  - Source of document
3. Verification of occupant income
  - Dated within 6 months of contract
4. Work write-up detailing necessary improvements
  - Dated
5. Itemized cost estimate of proposed improvements
  - Dated, signed by estimator
6. Construction proposals (bids received)
  - Dated, signed by proposer
7. Bid opening record/tally
  - Dated, signed by recorder/observer
8. Renovation, Repair and Painting (RRP) Certificate, *if property built before 1978*
  - Current
9. Pre-construction conference record-**Agency form**
  - Date, signed by all attendees



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## DESKTOP MONITORING

### The documents requested consist of:

10. Executed construction contract
  - Dated, signed by all parties with date of signature
11. Contractor's release of liens-**Agency form**
  - Dated, signed by contractor, subcontractors
12. Promissory Note-**Agency form**
  - Dated, signed
13. Change orders, *if applicable*
  - Dated, signed by all parties
14. Certification of Final Inspection-**Agency form**
  - Dated, signed by inspector
15. Owner Certification of Satisfaction-**Agency form**
  - Dated, signed by homeowner
16. Estoppel or Modification-**Agency form**, *if applicable*
  - Dated, signed by homeowner/URP member
17. Additional auditing requirement as requested
  - i.e. List of applicants and rankings



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## AUDIT COMPLIANCE (PG 3.9)

### Non-Profit Organizations only:

- N.C. State General Statute 143C-6-23 – State grant funds: administration; oversight and reporting requirements. (State funds include federal funds that flow through the State). The reports required by this Statute are provided by and submitted directly to NCHFA at [subreport.rehabteam@nchfa.com](mailto:subreport.rehabteam@nchfa.com).

### For Local Government Organizations:

- [www.treasurer.state.nc.us](http://www.treasurer.state.nc.us) – NC State General statute 159-34 – Audit Requirements of “*The Local Government Budget and Fiscal Control Act*”  
Electronic audit reports are submitted to [caxtell@nchfa.com](mailto:caxtell@nchfa.com)



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## REPORTING BY RECIPIENT (PG 3.11)

### Project Management Report

**Download report from [nchfa.com](http://nchfa.com)**

**Form and Resources-URP22 *(To be Posted by July 1)***

**25 units, 50 units, or 100 units**

**Due by the last day of the month following the end of the federal calendar quarter  
(i.e., by: April 30 (for the 1st quarter), July 31, October 31, and January 31)**

**First report will be due January 31, 2023**

**DON'T BE LATE**

**Reports must be submitted regardless of level of activity. (PG 3.11.2)**



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- **Project Management Reports will be updated to include Administrative Fees and posted on-line**
- **Mike Handley will show how to claim Administrative fees on a PMR later this afternoon**



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# Forms and Resources

## URP21

- Project Management Report - 25 Units - Effective October 1, 2020
- Project Management Report - 50 Units - Effective October 1, 2020
- Project Management Report - 100 Units - Effective October 1, 2020
- Project Management Report Instructions



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**PROJECT MANAGEMENT REPORT**

Recipient organization: **Pinestraw County** Date of Report: **January 15, 2020**

Reporting period: From: **July 1, 2019** to: **December 31, 2019** Funding Agreement No: **URP1901**

Report prepared by: **Mark Lindquist** Phone number: **919-501-4263**

URP allocation (per Funding Agreement): **\$100,000** Participant Tax ID #: **56-123654**

Total matching funds (hard costs only) per approved Application: **\$5,000** Case Manager: **Michael Handley**

Completion Date (per Funding Agreement): **December 31, 2020** Number of units targeted: **15**

**A. Account Balances**

- Beginning Balance:**
  - a. Sum of URP funds received from NCHFA prior to reporting period: **\$50,000**
  - b. Sum of Program Income received prior to reporting period: **(\$) 25**
  - c. Sum of disbursements by Recipient prior to reporting period: **(\$) 0**
  - d. Total URP Project beginning balance (a, plus b, minus c): **\$50,025**
- Receipts Since Last Report:**
  - a. Program funds received from NCHFA since last report: **\$0**
  - b. Interest earned on Program fund deposits during this reporting period: **\$0**
  - c. Total receipts since last report (a, plus b): **\$0**
- Recipient Disbursements Since Last Report:**
  - a. URP-eligible hard costs: **\$17,600**
  - b. Program Support: **\$1,800**
  - c. Total disbursements since last report (a, plus b): **\$19,400**
- Net balance of URP funds on hand:** **(\$31,225)** (Id, plus 2c, minus 3c, (e))

**B. Key Indicators and Progress Toward Goals**

1. Months remaining to completion date: <b>12</b>	4. Percent of targeted units completed: <b>20%</b>	7. Percent of completed units 90 - 50% AMI: <b>0%</b>
2. Percent of project time used: <b>92%</b>	5. Average completions/month needed to finish on time: <b>0.93</b>	8. Percent of completed units below 50% AMI: <b>0%</b>
3. Percent of URP funding spent: <b>15%</b>	6. Percent of matching funds invested to date: <b>14%</b>	

**Certification:**

I certify that the information contained in this Report is complete and accurate.

Authorized Signatory/Date (Chief Administrative Official): \_\_\_\_\_

*(Please check this box and attach the Certification of Completion and Final Cost Report when you close your Project.)*

**For NCHFA Housing Finance Agency Use Only**

Date Received	Date Due	Recommended by/Date	Amount	To Finance on	Entered by	Date Entered	Units

Page 1 of 5

**PROJECT MANAGEMENT REPORT**

Date of Report: **January 15, 2020** Recipient: **Pinestraw County**

**C. Financial Status Report on all units assisted to date: completed and units in progress**

Unit #	First name and middle initial of homeowner	Last name of homeowner	Street address of completed unit	City/Town	County	Zip code	Sq. Ft. size of unit	URP Hard Costs	Other hard costs identified by source	URP Program Support	Total URP # HC + PS	
1	Wesley	John	Smith	14 Main St	Pinestop	Pinestraw	27777	\$500	\$10,000	\$200	\$10,700	
2	Wesley	Mary	Jones	70 Oak Dr	Pinestop	Pinestraw	27777	1,800	\$600	\$250	\$2,650	
3	Wesley	Paul	Johnson	345 Maple Ct	Pinestop	Pinestraw	27777	3,200	\$7,000	\$500	\$8,700	
4												
5												
6												
7												
8												
9												
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15												
16												
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20												
21												
22												
23												
24												
25												
Total units completed or in-progress during this quarter:								3150	\$17,600	\$700	\$1,160	\$16,760
Total units completed prior to reporting period:								3150	\$17,600	\$700	\$1,160	\$16,760
Cumulative totals to date (a + b):								3150	\$17,600	\$700	\$1,160	\$16,760

**D. Beneficiary Report on all units assisted to date: completed and units in progress**

Unit #	Homeowner's last name and first initial	Annual household income (dollars)	Income category	Special needs category?	Household racial composition	Disability	Brief description of repair/modifications performed on completed units
1	Smith, J	\$5,000	1		White (W)	NO	Roof, plumbing
2	Jones, M	\$3,500	2		Asian (A)	NO	Roof, grab bars
3	Johnson, P	\$12,675	3		American Indian/Alaskan/Native Hawaiian (I)	NO	Replace flooring and electrical
4							
5							
6							
7							
8							
9							
10							
11							
12							
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14							
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16							
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19							
20							
21							
22							
23							
24							
25							

Page 2 of 5



## REPORTING BY RECIPIENT (PG 3.11.1.1)

### **REMINDERS When Completing the PMR and CCFC**

**Don't use the report as a waiting list**

List units that you have actually assisted

- **Fill in light yellow Cells Only**
- **Authorized Signature/Date**
- **Funding Agreement Number**
- **Check Revision Box if changes are made from last report**
- **Use correct soft costs amounts**
- **Use full addresses**
- **Make sure there are totals in columns a, b and c on page 2 and 3.**
- **Unit Completion Dates cannot have a period in date (e.g. 9.1.22).**
- **Fill in as many special needs categories as necessary.**
- **Use basic Description of Repairs (HVAC, plumbing, electrical, etc.)**
- **Check the accessibility box for handicap modifications.**



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## REPORTING BY RECIPIENT (PG 3.11.1.2)

### **Certification of Completion and Final Cost**

One (1) human interest story with pictures (PG 3.13.5 & 3.13.6)

### **Due 45 days from the Completion Date**

**URP22 Completion Date: 12/31/2023**

**URP22 CCFC Due: 2/14/2024**



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**EXTENSIONS?  
NO.  
NEVER.  
DON'T ASK!!!**



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**NEED HELP?**



**Contact your Case Manager or  
Mark Lindquist (919) 501-4263**



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# Loan Closing Process



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# Promissory Note

[PRINT](#) [RESET](#)

NORTH CAROLINA HOUSING FINANCE AGENCY  
URGENT REPAIR PROGRAM

## Promissory Note

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of \_\_\_\_\_ (the "Holder"), the amount of \_\_\_\_\_ Dollars (\_\_\_\_\_) or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of \_\_\_\_\_ or at such place as the Holder of this Note may designate in writing.

- 1. Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
- 2. Term.** The term of the Loan shall be up to \_\_\_\_\_ (\_\_\_\_\_) years from the date of this Note (the "Maturity Date").
- 3. Payment.** During the term of this Note, Borrower shall make no payment of principal or interest, unless the Borrower is in default under any of the terms of this Note. So long as Borrower is not in default, the balance due under this Note shall automatically be reduced by two thousand dollars (\$2,000.00) on each anniversary date of this Note such that on the Maturity Date the outstanding principal balance due will be zero (\$0.00). If any default by the Borrower under this Note or any other document executed in connection with the Loan occurs during the term of this Note, then, at Holder's option, the entire outstanding balance of this Note shall become immediately due and payable, as herein provided.
- 4. Modification Agreement.** If there is an increase in the amount of the Loan, a modification agreement must be completed to account for changes in the original loan and will become part of this Note. Said agreement must be attached to the Note and copies sent to Holder of the Note.
- 5. Assumption.** The Loan may be assumed only upon the prior written approval of the Holder. The Holder shall not deny requests for assumptions by (1) an heir, or (2) buyers certified by the Holder as meeting Program eligibility requirements. Any and all terms and conditions of this Note shall remain in effect for any successors to Borrower and any successor shall assume all duties and obligations of the Borrower.

6. **Default.** The note shall be deemed in default and the amount owed under this Note shall become immediately due and payable on the occurrence of any of the following events:

- (a) The Property is sold, transferred or otherwise alienated by Borrower whether voluntary or involuntary, or by operation of law, or without Lender's prior written consent, unless otherwise prohibited by applicable federal law.
- (b) The Property ceases to be occupied by Borrower, as Borrower's principal residence.

Upon default, Holder may employ an attorney to enforce Holder's rights and remedies, and the Borrower hereby agrees to pay to Holder all reasonable attorney's fees, plus all other reasonable expenses incurred by Holder in exercising any of Holder's rights and remedies upon default. The rights and remedies of Holder as provided by law, by this Note shall be cumulative and may be pursued singly, successively, or together in the sole discretion of Holder. The failure to exercise any such right or remedy shall not be a waiver or release of such rights or remedies or the right to exercise any of them at another time.

7. **Governing Law.** This Note is to be governed and construed in accordance with the laws of the State of North Carolina.

IN TESTIMONY WHEREOF, Borrower has executed this instrument under seal on the date first above written.

BORROWER(S):

\_\_\_\_\_  
(SEAL)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
(SEAL)

\_\_\_\_\_  
Printed Name



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# Completing the Documents

NORTH CAROLINA HOUSING FINANCE AGENCY  
URGENT REPAIR PROGRAM

## Promissory Note

Property Address: Where is the work being done? Date: Date Borrower Signs  
Include the street address, city, state and zip The Promissory Note

**Never use a PO Box.**

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of \_\_\_\_\_, (the "Holder"), the amount up to \_\_\_\_\_ Dollars (\_\_\_\_\_), or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of \_\_\_\_\_, or at such place as the Holder of this Note may designate in writing.

- 1. Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
- 2. Term.** The term of the Loan shall be up to \_\_\_\_\_ (\_\_\_\_\_) years from the date of this Note (the "Maturity Date").



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# Completing the Documents







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# Completing the Documents

## What is the loan amount?

- The total Cost of Repairs? 
- The maximum amount of \$12,000.00? 
- Cost of Repairs plus any Admin Funds 
- Only the amount of money you are receiving from NCHFA for repairs? 



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### Promissory Note

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of Your Organization Name, (the "Holder"), the amount up to \_\_\_\_\_ Dollars (\_\_\_\_\_), or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of \_\_\_\_\_, or at such place as the Holder of this Note may designate in writing.

1. **Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
2. **Term.** The term of the Loan shall be up to \_\_\_\_\_ (\_\_\_\_\_) years from the date of this Note (the "Maturity Date").



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### Promissory Note

Admin Funds are not included with the loan amount

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of \_\_\_\_\_, (the "Holder"), the amount up to Amount of Money needed from NCHFA for repairs Dollars (\$NCHFA), or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of \_\_\_\_\_, or at such place as the Holder of this Note may designate in writing.

- 1. Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
- 2. Term.** The term of the Loan shall be up to \_\_\_\_\_ (\_\_\_\_\_) years from the date of this Note (the "Maturity Date").



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### Promissory Note

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of \_\_\_\_\_, (the "Holder"), the amount up to Five Thousand Four Hundred and 00/100 Dollars (\$5,400.00), or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of \_\_\_\_\_, or at such place as the Holder of this Note may designate in writing.

- 1. Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
- 2. Term.** The term of the Loan shall be up to \_\_\_\_\_ (\_\_\_\_\_) years from the date of this Note (the "Maturity Date").



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### Promissory Note

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of \_\_\_\_\_, (the "Holder"), the amount up to \_\_\_\_\_ Dollars (\_\_\_\_\_), or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of [Organization to send payment to](#) \_\_\_\_\_, or at such place as the Holder of this Note may designate in writing.

- 1. Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
- 2. Term.** The term of the Loan shall be up to \_\_\_\_\_ (\_\_\_\_\_) years from the date of this Note (the "Maturity Date").



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# Completing the Documents

## What do we know about the payments?

- No payment, unless there is a default.
- If the borrower isn't in default the loan will be reduced by \$3,000 on each anniversary date.
- If the borrower never has a default, the borrower will not have to repay anything.



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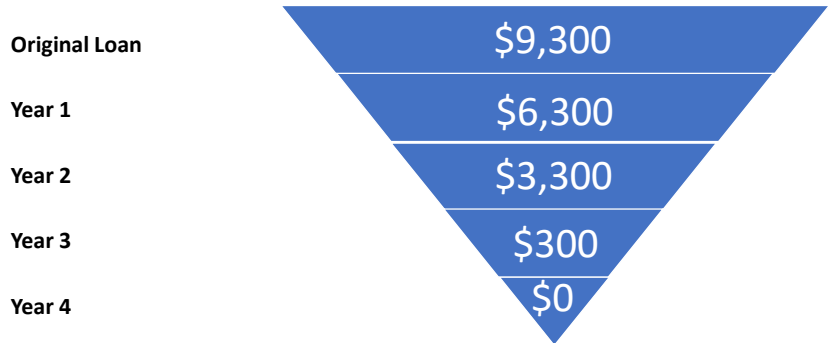
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# Completing the Documents

**Example 1:**

Peter comes to you for assistance. After processing the information, you determine that Peter is going to need \$9,300 of funding from NCHFA. Assuming Peter doesn't have a default, how long will Peter be obligated for repayment (of any amount) for his loan?



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# Completing the Documents

**Example 1:**

Joe comes to you for assistance. After processing the information, you determine that Joe is going to need \$12,000 of funding from NCHFA. Assuming Joe doesn't have a default, how long will Joe be obligated for repayment (of any amount) for his loan?



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### Promissory Note

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

FOR VALUE RECEIVED, the undersigned (the "Borrower") jointly and severally promise(s) to pay to the order of \_\_\_\_\_ (the "Holder"), the amount up to \_\_\_\_\_ Dollars (\_\_\_\_), or so much thereof as may have been disbursed from time to time, according to the following terms, at the office of \_\_\_\_\_, or at such place as the Holder of this Note may designate in writing.

Input how long it will take to get to a \$0 balance here.

1. **Loan.** This Note evidences a loan (the "Loan") made by Holder to Borrower under the North Carolina Housing Finance Agency's Urgent Repair Program ("URP").
2. **Term.** The term of the Loan shall be up to <sup>Written</sup> \_\_\_\_\_ number (Number) years from the date of this Note (the "Maturity Date").  
Example: Five (5)
3. **Payment.** During the term of this Note, Borrower shall make no payment of principal or interest, unless the Borrower is in default under any of the terms of this Note. So long as Borrower is not in default, the balance due under this Note shall automatically be reduced by two thousand dollars (\$2,000.00) on each anniversary date of this Note such that on the Maturity Date the outstanding principal balance due will be zero (\$0.00). If any default by the Borrower under this Note or any other document executed in connection with the Loan occurs during the term of this Note, then, at Holder's option, the entire outstanding balance of this Note shall become immediately due and payable, as herein provided.



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# Completing the Documents

## Last, but not least!

IN TESTIMONY WHEREOF, Borrower has executed this instrument under seal on the date first above written.

BORROWER(S):

All Borrower(s) must sign and print their name.

*John Doe* \_\_\_\_\_ (SEAL)

John Doe \_\_\_\_\_ Printed Name

*Jane Doe* \_\_\_\_\_ (SEAL)

Jane Doe \_\_\_\_\_ Printed Name



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# Completing the Documents

What happens Next? 3 possible Actions to finish up.

- Do nothing – If there are no changes to the final loan amount, the loan documents are complete.
- Estoppel – Estoppel would be used if all work has been completed and the the final loan amount is less than what is stated on the Promissory Note. Estoppels only need to be signed by the Lender (partner organization).
- Modification- If there is an increase in the amount of the loan, a modification agreement must be completed to account for the changes in the original loan amount and will become part of the Promissory Note. All modifications must be signed by the lender and the borrower.

# Completing the Documents

<b>ESTOPPEL</b>	<b>MODIFICATION</b>
Loan amount decreasing 	Loan amount increasing 
Only 1 signature needed (Lender's)	2 signatures required (Lender's and Borrower's)

# Estoppel

PRINT RESET

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM STATEMENT OF ESTOPPEL

This document is to establish the final loan amount of that certain Promissory Note executed by \_\_\_\_\_ (the "Borrower"), dated \_\_\_\_\_ in the original principal amount up to \_\_\_\_\_ Dollars (\_\_\_\_\_).

The total outstanding balance of all obligations, after all disbursements have been made on Borrower's behalf, is \_\_\_\_\_ Dollars (\_\_\_\_\_).

Pursuant to the terms of the Promissory Note, the loan is expected to have a \$0.00 balance on or before \_\_\_\_\_, after which time there will be no further action to collect said obligation.

No future advances will be made under the foregoing instrument, except such expense as it may become necessary to advance to preserve the security now held.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

By: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Completed by: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### STATEMENT OF ESTOPPEL

Date Borrower signed the Promissory Note, not the date of the Estoppel

This document is to establish the final loan amount of that certain Promissory Note executed by Borrower's Name (as it appears on the Promissory Note) (the "Borrower"), dated \_\_\_\_\_ in the original principal amount up to Original loan amount - Written Dollars (Loan Amount Numeric).

Should be LESS than the original loan amount

The total outstanding balance of all obligations, after all disbursements have been made on Borrower's behalf, is Final Amount of NCHFA Funds Dollars (Final Amount Numeric). Disbursed on Borrower's Behalf\*\*\*

Pursuant to the terms of the Promissory Note, the loan is expected to have a \$0.00 balance on or before Final Loan Term, after which time there will be no further action to collect said obligation.



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# Completing the Documents

This Day day of Month, 20 Year

Your Organization Name

By: Authorized Person's Signature

Print Name: Authorized Person's Name

Title: Authorized Person's Title  
(i.e. President, Vice President, etc.)

Completed by: Name

Address including city, state and zip

Phone Number



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# Modification Agreement

NORTH CAROLINA HOUSING FINANCE AGENCY  
URGENT REPAIR PROGRAM

### Modification Agreement

Property Address: \_\_\_\_\_ Date: \_\_\_\_\_

THIS MODIFICATION AGREEMENT (the "Agreement"), is made and entered into by and between \_\_\_\_\_ (hereinafter referred to as "Borrower") and \_\_\_\_\_ (hereinafter referred to as "Lender").

#### WITNESSETH:

WHEREAS, Borrower has executed a Promissory Note (the "Note") dated \_\_\_\_\_ and payable to Lender in the original principal amount of \_\_\_\_\_ Dollars (\_\_\_\_\_) evidencing a loan from Lender to Borrower (the "Loan");

WHEREAS, Borrower and Lender desire to modify the Note to change the principal amount of the Loan to \_\_\_\_\_ Dollars (\_\_\_\_\_) and change the Maturity Date to \_\_\_\_\_;

NOW THEREFORE, for and in consideration of \$1.00 cash in hand paid and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto hereby agree as follows:

1. **Definition of Terms.** All capitalized items contained herein and not otherwise defined shall be defined as provided in the Note.

2. **Amount of Loan.** The maximum principal amount of the Loan evidenced by the Note, including present and future advances, is changed to \_\_\_\_\_ Dollars (\_\_\_\_\_).

3. **Maturity Date.** The Maturity Date as stated on the Note is changed to \_\_\_\_\_ (\_\_\_\_\_) years from the Note date.

4. **Agreement of Borrower.** Borrower hereby acknowledges (i) the continued existence of the indebtedness evidenced by the Note; (ii) that this document is a modification of the terms of an existing contractual relationship between the parties in order to increase the principal loan amount and is not intended as a cancellation of the original debt or the creation of a new debt; (iii) that the acceptance by the Lender of this Agreement is not a waiver by Lender of any rights Lender may possess under the Note or any other documents or instruments evidencing the Loan (collectively, the "Loan Documents"); and (iv) that the failure by Borrower to fully and promptly perform under the Note or any other Loan Document shall entitle Lender to exercise any and all rights granted to Lender under the Note or any Loan Document, or otherwise as provided under applicable law.

5. **Waiver of Defenses.** Borrower represents and warrants to Lender that there are no defenses against the enforcement of the Note or any other Loan Document as provided in the Note.

6. **Headings.** The paragraph headings provided herein are for convenience only and are not intended to define or limit the content of the paragraphs.

7. **Further Assurances.** Each party hereto shall cooperate, and take such further actions and execute and deliver such documents as may be reasonably requested by the other party in order to effectuate the provisions hereof.

8. **Severability.** In the event any term, covenant or condition of this Agreement shall to any extent be invalid or unenforceable, the remainder shall not be affected thereby and each term, covenant or condition shall be valid and enforceable to the full extent permitted by law.

9. **Successors and assigns.** This Agreement shall apply to, inure to the benefit of, and be binding upon the parties hereto and upon their respective heirs, legal representatives, successors and permitted assigns, except as otherwise provided herein.

10. **Full Force and Effect.** Except as modified hereby, the Note remain unmodified and in full force and effect.

11. **Effective Date.** The provisions of this Agreement shall be and become effective as of the date hereof.

12. **Governing Law.** This Agreement shall be governed by and construed in accordance with the laws of the State of North Carolina.

IN WITNESS WHEREOF, the parties hereto have hereunto executed this Agreement under seal as of the day and year first above written.

LENDER:

BORROWER(S):

\_\_\_\_\_  
(SEAL)

\_\_\_\_\_  
(SEAL)

Printed Name

Printed Name

Title

\_\_\_\_\_  
(SEAL)

Printed Name



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# Completing the Documents

## NORTH CAROLINA HOUSING FINANCE AGENCY URGENT REPAIR PROGRAM

### Modification Agreement

Property Address: Address of where work was done. Date: Date borrower signs  
(Street address, city, state and zip code) Modification Agreement

THIS MODIFICATION AGREEMENT (the "Agreement"), is made and entered into by and between Borrower(s) Name as it appears on the Promissory Note (hereinafter referred to as "Borrower") and Your organization name (hereinafter referred to as "Lender");

#### WITNESSETH:

WHEREAS, Borrower has executed a Promissory Note (the "Note") dated Date Borrower Signed and payable to Lender in the original principal amount of Original loan amount - Written Dollars (Loan Amount) evidencing a loan from Lender to Borrower (the "Loan");

Numeric

Should match the loan amount on the Promissory Note



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# Completing the Documents

WHEREAS, Borrower and Lender desire to modify the Note to change the principal amount of the Loan to Final Loan Amount – Written Out Dollars (Final Loan), and change the Maturity Date to New Maturity Date, if ; Amount Numeric  
there is a change

NOW THEREFORE, for and in consideration of \$1.00 cash in hand paid and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto hereby agree as follows:

1. **Definition of Terms.** All capitalized items contained herein and not otherwise defined shall be defined as provided in the Note

2. **Amount of Loan.** The maximum principal amount of the Loan evidenced by the Note, including present and future advances, is changed to Final Loan Amount – Written Out Dollars (Final Loan Amount).  
Numeric

3. **Maturity Date.** The Maturity Date as stated on the Note is changed to Written number (Number) years from the Note date.

How many years until the new loan amount is \$0. \*\*\*Be sure to start counting from the original loan date.\*\*\*



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# Completing the Documents

IN WITNESS WHEREOF, the parties hereto have hereunto executed this Agreement under seal as of the day and year first above written.

LENDER:

BORROWER(S):

*Authorized Person's Signature*  
(SEAL)

*John Doe*

Authorized Person's Name

John Doe

Printed Name

Printed Name

Authorized Person's Title  
(i.e. President, Vice President, etc.)

*Jane Doe*

Title

(SEAL)

Jane Doe

Printed Name



# Questions?



# REMEMBER:



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# This



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is



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a



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# LOAN!



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# URP Administrative Expenses New for 2022



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## PG 2.1.10

URP Administrative funds are limited to ten percent (10%) of the total amount of Program funds allocated to rehabilitation hard costs and soft costs up to \$1,000 on each completed unit.

Admin funds can not exceed the total amount of administrative costs specified in your Funding Agreement.



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## PG 2.1.10

Administrative funds may be used for:

- 2.1.10.1. general management, oversight and coordination;
- 2.1.10.2. travel and mileage expenses;
- 2.1.10.3. project monitoring;
- 2.1.10.4. indirect costs, overhead costs related to administration of URP activities;
- 2.1.10.5. URP project related outreach; and intake, advertising and public information.



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## PG 3.2.4

URP Administrative funds will be disbursed per submittal of Project Management Reports.

Disbursement will be equal to 10% of the unit hard and soft costs up to \$1,000 per the completed units, not to exceed administrative costs listed in Member's Funding Agreement.



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## PG 4.2.2.3

Can not use URP Repair Funds (NC HTF) for administrative expenses.

Can not use URP Agency admin funds for URP repair expenses.

Repair funds (Hard and Soft) are for Repair

Admin funds are for Admin



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## PG 4.4.1

Do not include Admin funds in the URP loan to the home owners.

Continue to just include the URP Agency hard and soft costs in the loan.



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## PG 4.6.2

When can you draw down URP administrative costs?



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# Requesting Admin Using the PMR

NORTH CAROLINA HOUSING FINANCE AGENCY  
URGENT REPAIR PROGRAM  
**PROJECT MANAGEMENT REPORT**

Recipient organization: _____		Date of Report: _____
Reporting period: From _____	to _____	Funding Agreement No: _____
Report prepared by: _____		Phone number: _____
URP Fund Allocation (per Funding Agreement): _____		Developer: The DOW _____
URP Admin. Allocation (per Funding Agreement): _____		Fund URP Award: _____
Direct matching funds (last three only per approved Application): _____		Case Manager: _____
Completion Date (per Funding Agreement): _____		Number of units targeted: _____

**A. Account Balances**

- Beginning Balance**
  - a. Sum of URP Repair Funds received from NCHFA prior to reporting period: \_\_\_\_\_
  - b. Sum of URP Administrative Funds received from NCHFA prior to reporting period: \_\_\_\_\_
  - c. Sum of Program Income received prior to reporting period: \_\_\_\_\_ (N)
  - d. Sum of disbursements by this report prior to reporting period: \_\_\_\_\_ (N)
  - e. Total URP Project beginning balance as of July 8, 2014: \_\_\_\_\_ (N)
- Receipts Since Last Report**
  - a. Program Repair Funds received from NCHFA since last report: \_\_\_\_\_
  - b. Program Administrative Funds received from NCHFA since last report: \_\_\_\_\_
  - c. Interest earned on Program Fund deposits during this reporting period: \_\_\_\_\_
  - d. Total receipts since last report as of July 8: \_\_\_\_\_ (N)
- Receipts Disbursement Since Last Report**
  - a. URP-eligible and costs: \_\_\_\_\_
  - b. Program Support: \_\_\_\_\_ (N)
  - c. Administrative Costs: \_\_\_\_\_
  - d. Total disbursements since last report as of July 8: \_\_\_\_\_ (N)
- Net balance of URP funds on hand:** \_\_\_\_\_ (if at July 22, 2014 E.O.) (N)

**B. Key Indicators and Progress Toward Goals**

1. Units remaining to completion date: _____	4. Percent of agreed units completed: _____	7. Percent of completed units 20-50% ALC: _____
2. Percent of project time used: _____	5. Average completion month needed to finish on time: _____	8. Percent of completed units below 50% ALC: _____
3. Percent of URP funding spent: _____	6. Percent of matching funds increased to date: _____	

**Certification:** I certify that the information contained in this Report is complete and accurate.

Authorized Signature Date (Chief Administrative Officer): \_\_\_\_\_

**Report Type**

Quarterly Report:

Repair Disbursement Request:

Admin Disbursement Request:

Final Report:

\*Please check this box and attach the Certification of Completion and Final Report when you close your Project.

For NC Housing Finance Agency Use Only					
Date Received	Date ForWARDED BY/DATE	Disbursement Service and Approval	Amount	To Finance as	Units Entered by

Page 1 of 3      revised 6/12/22



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# The Program Support Game



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# “What’s My Program Support?”

(Table A, PG 2.1.8)

## Hard Cost                      Maximum Program Support Allowed

URP Hard Costs	Maximum Program Support
From \$501 to \$12,000	\$200 + 10% of the Hard Cost (not to exceed \$1,000)
Up to \$500	\$200

North Carolina

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# “What’s My Program Support?”

(Table A, PG 2.1.8)

## Hard Cost                      Maximum Program Support Allowed

\$112

?

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# “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200

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# “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	

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## “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
<b>\$3624</b>	<b>\$562</b>

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## “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
<b>\$9999</b>	

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## “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
<b>\$9999</b>	<b>\$1000</b>

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## “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
<b>\$2391</b>	

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## “What’s My Program Support

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
<b>\$2391</b>	<b>\$439</b>

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## “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
\$2391	\$439
<b>\$11489</b>	

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# “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
\$2391	\$439
<b>\$11489</b>	<b>\$511</b>



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# “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
9999	\$1000
\$2391	\$439
\$11489	\$511
<b>\$5500</b>	



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# “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
\$2391	\$439
\$11489	\$511
<b>\$5500</b>	<b>\$750</b>

Notre Cause



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# “What’s My Program Support?”

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
\$2391	\$439
\$11489	\$511
\$5500	\$750
<b>\$11999</b>	

Notre Cause



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# "What's My Program Support?"

(Table A, PG 2.1.8)

Hard Cost	Maximum Program Support Allowed
\$112	\$200
\$3624	\$562
\$9999	\$1000
\$2391	\$439
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<b>\$11999</b>	<b>\$1</b>



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# Questions?



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“Never doubt that a small group of thoughtful, committed citizens can change the world: indeed, it's the only thing that ever has.”

*Margaret Mead*



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THANK YOU!!



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"Nothing will work  
unless you do."

*-Maya Angelou*

North Carolina

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