## **Resilient & Ready Home Repair Program Application**

Form Description: This application shall be used by the applicant to apply for assistance under the Resilient & Ready Home Repair Program. The program addresses the damages sustained to homes due to three storm events that occurred between July 10<sup>th</sup> – August 19<sup>th</sup>, 2024, in select counties of New York State. Homeowners can apply for reimbursement of costs incurred to their primary home, which were not covered by the homeowner's insurance, or, they can apply to get work done for damages incurred. Documents such as 1) Proof of Ownership of the Damaged Property and 2) Proof of Income will need to be furnished by the homeowner in order to receive assistance.

I. Applicant Information				
Applicant Name				
Applicant Telephone Number	Cell		Home	
Applicant Email Address				
Applicant Mailing Address				
Street				
City				
Zip Code				
Municipality (Town/City/Village where you				
pay taxes)				
County				
II. Home & Homeowner Information				
List all owners (Names on Deed)				
Supporting documentation will be required to				
verify ownership.				
Damaged Property Address (if different from				
above)				
Street				
City				
Zip Code				
County				
Year Home was built				
When did you purchase home?				
Is there a mortgage on property?				
Are you behind on mortgage payments?				
Do you have homeowners' insurance? (please				
list the carrier, if applicable)				
Do you have flood insurance?				
Have you filed an insurance claim for flood				
damage repairs (exclude claims for personal	No			
property loss).				
		ng on response		
		was denied		
		ance covered claim.		<b>A</b>
	Amount c	overed?		\$
Is this application for reimbursement of				
costs? Yes No No				
If "YES" how much is being requested for				
reimbursement? (Refer to the program guide				
to see which eligible activities are allowed to be reimbursed. Link: Program Guide)				
be rembursed. Link. I rogium dude)				

Household Income							
Provide the household income information below. Include all members of the household, even those who do not make an							
income, such as children. Supporting documentation will be required to verify income eligibility for program assistance.							
Enter # of People in Household:							
Name of Person in Household	Age	Relation	Source of Income (wages, 1099 etc.)	Amount	Frequency of Payment (annual, bi- weekly)		
1.							
2.							
3.							
4.							
5.							
6. (List all others)	'	ı					
Total Housel	hold Income (	Annual Gross)					
III. Storm Damage							
Describe the specific and critical home repairs needed following storm damage. What will a contractor need to do?							
Basement flooded							
Replace sump pump that died whe	en basement j	flooded.					
Repair siding that fell off after windstorm.							
IV. Estimated Cost of Repairs		T					
Repair needed Esti	mated cost		Do you have an estimate from a contractor? Or has work already been completed?				

## **Applicant Certification**

Check and initial each item <u>and</u> sign this form, to certify that I (we) have reviewed the Program Guidelines agree to the following statements:

I (we) hereby apply for home repair assistance for damage from recent severe storms.
I (we) hereby certify the funds will be used to address direct disaster caused damage to the primary residence, which is not covered by any other federal, state, local recovery program funds and said damage is not covered by any third-party insurers.
I (we) hereby that I (we) are the legal and lawful owners.
I (we) hereby certify that the statements and information provided in this application are true, accurate, and complete to the best of my (our) knowledge and belief. False statements made knowingly by applicant will disqualify the applicant from participation in the program and may be subject to prosecution.
I (we) hereby certify that we intend to remain in the home as a primary resident for at least the next 24 months and I (we) understand that we will be required to complete an attestation confirming this.
<ul> <li>I (we) hereby consent and authorize Arbor Housing &amp; Development to:         <ul> <li>obtain verification of information required for compliance within the regulations of this program, including identity, ownership, income, insurance, property tax/utility payments, property condition, contractor estimates.</li> <li>upon giving reasonable notice, to enter the applicant's property for the purpose of determining what improvements are needed and to inspect completed work.</li> <li>I (we) hereby give Arbor Housing &amp; Development permission to discuss share this application and/or project information with NYS Homes &amp; Community Renewal.</li> </ul> </li> </ul>
I (we) understand that <b>Arbor Housing &amp; Development</b> is the sole arbiter in interpreting the intent and implementation of the Program and Program Guidelines, determining eligibility for program assistance and determining amount of funding awarded as such <b>Arbor Housing &amp; Development's</b> decision is final.

Homeowner(s)						
Printed Name		Date				
Signature						
Printed Name		Date				
Signature						
Printed Name		Date				
Signature						

Return application and required documents to: **Arbor Housing & Development 26 Bridge St., Corning, NY 14830** or email as PDF to glandon@arbordevelopment.org. Call with any questions: Georgia Landon (607) 654-7487 x2049