

CITY OF POMONA HOUSING DIVISION
HOME REHABILITATION LOAN
Preliminary Application Form

Applications will be received on a first-come, first-serve basis

APPLICANT INFORMATION

Homeowner
 Name _____
 Address: _____

 City: _____ Zip: _____
 Applicant Employed by : _____
 Home Phone #:() Work #:()
 Cell Phone # ()
 Are the homeowners occupying the property as
 their principal residence? ___ Yes ___ No
 Email address: _____

Co-Owner Name: _____
 Co-Applicant Employed by : _____
 Home Phone #:() Work #:()

Please list the exact owner(s) of the property as shown
 on your Grant Deed:

Total number of people in your household: _____ Number of Dependents: _____
 Ages: _____

INCOME Total Household Annual Income: _____

Indicate **all sources of income** earned by each individual in your household. Documentation will be
 requested later for verification if applicant is eligible.

Name	Employer/Income Source	Monthly	Annually
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

MORTGAGE INFORMATION

Amount Owed: _____ (First Trust Deed) Name of Lender: _____
 Amount Owed: _____ (Second Trust Deed) Name of Lender: _____
 Year Purchased: _____ Original Purchase Price: _____

DATA ON PROPERTY

Age of Structure: _____ Total Square Footage: _____ No. of Bedrooms: _____
 Estimated Value: \$ _____ No. of Bathrooms: _____
 Check one: ___ Single Family Home ___ Attached Condominium ___ Detached Condominium

LIST HOME IMPROVEMENTS REQUESTED *(for condominium homes: City assistance is not available for
 improvements that are maintained by HOA)*

Exterior: _____

Interior: _____

List any building/ zoning, code violations that you are aware of: _____

 Signature Date Signature Date

Please submit in person or by mail to:

City of Pomona Housing Division
 Home Rehabilitation Program
 505 S. Garey Avenue
 Pomona, CA 91766

For questions, please call 909-620-3630.

Fax: 909-620-4567
 Antoinette_perez@ci.pomona.ca.us



City of Pomona Housing Division Substantial Rehabilitation Loan Program

The Housing Division of the Community Development Department is accepting preliminary applications for the City of Pomona's Substantial Rehabilitation Loan Program. Applications will be accepted on a first-come, first-serve basis.

This Program is designed to assist eligible homeowners to correct existing code violations and/or to address deferred maintenance in their property. Properties must be owner-occupied, single family homes. The program is a deferred loan up to \$75,000 and bears a 2% interest. Eligible improvements include: correction of code violations with potential immediate health and safety hazards, that must be addressed as a priority over an other times; room additions may be allowed in overcrowding situations; lead abatement, and other eligible items such as windows, doors, flooring, roof, paint, kitchen and bathroom improvements.

Property owners gross household income must not exceed 80% of Area Median Income for Los Angeles County (low income) as published annually by the US Department of Housing and Urban Development (HUD) and the California State Department of Housing and Community Development (HCD). *Current chart limits below

Low-Income Limits		Effective July, 2020	
1 Person	\$63,100	5 Person	\$97,350
2 Persons	\$72,100	6 Persons	\$104,550
3 Persons	\$81,100	7 Persons	\$111,750
4 Persons	\$90,100	8 Persons	\$118,950

HUD Income Limits

Low-Income Limits		Effective July, 2020	
1 Person	\$63,100	5 Person	\$97,350
2 Persons	\$72,100	6 Persons	\$104,550
3 Persons	\$81,100	7 Persons	\$111,750
4 Persons	\$90,100	8 Persons	\$118,950

HCD Income Limits

All completed forms may be returned to the Housing Division at the City Hall in person or by mail to:

City of Pomona Housing Division
Home Rehabilitation Program
505 S. Garey Avenue
Pomona, CA 91766

You will be notified by mail whether your preliminary application is approved. If you are approved, you will be mailed an application packet via certified mail.

If you have any questions, please contact the Housing Division at (909) 620-3630.

