

**BLUE HILLS / IVANHOE
B.R.I.T.E. HOUSING PROGRAM
(BUILD, REVITALIZE, INVEST, TRAIN & EDUCATE)**



Blue Hills Community Services
3101 Broadway, Suite 120
Kansas City MO 64111
(816) 333-7870 Ext. 205 / (816) 333-0448 fax
ksmith@bhcsmo.org

You may bring your application and documents to Blue Hills Community Services offices or send via mail.

The Southtown/31st & Baltimore TIF Plan housing benefit area is generally bound by 31st Street on the north, 63rd Street on the south, Prospect on the east, and Paseo on the west. The B.R.I.T.E. program funds are available in large part to the work of the Blue Hills Neighborhood Association who worked to ensure that portions of the Southtown/31st & Baltimore TIF funds would be available for Blue Hills homeowners. **Phase One of the B.R.I.T.E. Program is designed to assist single family, owner occupied homes or rental conversions in the areas between 51st Street (on the north) to 57th Street (on the south), Woodland (on the east) to Paseo (on the west) excluding the Woodland Highlands Housing Development (53rd to 54th Streets, Woodland to Highland).** This is a cooperative program administered by the City, the Tax Increment Financing Commission, and is operated by a joint partnership between Blue Hills Community Services and Ivanhoe Neighborhood Council.

PARTIALLY SPONSORED BY
RESEARCH MEDICAL CENTER, A HCA MEDICAL FACILITY

Blue Hills Community Services
3101 Broadway, Suite 120
Kansas City MO 64111

REQUIREMENTS:

The property must have no delinquent property taxes, interest/penalties due and/or unpaid liens and be current with earnings tax as verified by recent pay stub.

PHASE ONE TARGET AREA:

The Blue Hills neighborhood fund is available within an area generally bounded by 51st Street (on the north) to 57th Street (on the south), Woodland (on the east) to Paseo (on the west) excluding the Woodland Highlands Housing Development (53rd to 54th Streets, Woodland to Highland).

SINGLE FAMILY HOMES:

Single family homes are structures built to house one family.

REVIEWING & PROCESSING YOUR APPLICATION:

BHCS must verify your income, employment, homeowners insurance, and mortgage information.

We will contact you if you have or have not been approved for this program.

GETTING APPROVED FOR FUNDING:

Make sure you have copies of each applicable document listed above.

CONFIDENTIALITY:

Information you provide will be used solely by BHCS and the TIF Commission in making a decision.

ELIGIBLE REPAIRS

Exterior repairs must be addressed first. Interior repairs can be up to 30% of the funds. If health and safety violations are identified during pre-qualification inspection, they must be corrected upon approval. Code and non-code items are eligible. Any cited code violations must be addressed first, and properties containing dangerous and hazardous health and safety code violations that cannot be corrected with funding provided under this program or other financing will be disqualified from participation.

ELIGIBILITY

All single-family owner-occupied homes are eligible to participate regardless of income. However, there are match requirements, which are income based and outlined below.

<u>Household Income</u>	<u>Matching Private/Loan Funds</u>
Lower than 100% of Median	No match required
Between 100% and 125% of Median	1 to 1 match required
Greater than 125% of Median	2 to 1 match required

# persons in household	<u>Household Income Chart</u>	
	100% of Median	125% of Median
1	\$47,900	\$59,900
2	54,700	68,400
3	61,550	76,950
4	68,400	85,500
5	73,850	92,300
6	79,350	99,200
7	84,800	106,000
8	90,300	112,900

These income levels are subject to change by H.U.D.

HOW MUCH YOU CAN APPLY FOR

Single-family owner-occupied up to \$15,000 for improvements.

Single-family rental homes up to \$20,000 and must be sold to single-family owners within 18 months. 1 to 1 match required for rental conversions.

HOW THE PROGRAM WORKS

Funds are available as a loan, which is then converted to a grant at 20% per year. If you live in your home for 5 years after the repairs have been made, the loan then converts to a full grant and no funds have to be paid back.

Here's what we need from you...

Along with your completed application, you need to provide COPIES of the following:

- Title insurance policy verification or a copy of the First Deed of Trust or Warranty Deed on your home (complete)
- Last two year's signed Federal Income Tax Return (1040 Form and W2's)
- Your most recent paid real estate tax bill (contact Jackson County Collection Dept. 816-881-3232)
- Year-end statement on current mortgage (contact your mortgage company)
- Current homeowners insurance coverage
- Any award letters (Social Security, food stamps, TANF, SSI, pension, unemployment insurance, disability or workers' compensation, etc.)
- Your last two paycheck stubs
- Any code violation letters

BLUE HILLS/IVANHOE TIF – B.R.I.T.E. APPLICATION

Client Information

ID#: _____
 (Drivers License, Federal / Missouri State ID or Social Security #)

APPLICANT:

_____ Last name First M.I.

SPOUSE:

(or other titled owners) _____ Last name First M.I.

ADDRESS: _____ STREET CITY STATE ZIP CODE YEARS IN HOME

MARITAL STATUS: SINGLE MARRIED

() _____ () _____
HOME PHONE WORK PHONE E-MAIL

(For single family owner occupied only)
PLEASE LIST ALL HOUSEHOLD RESIDENTS INCLUDING YOURSELF BELOW

First and Last Name	Age	Employment Income	Social Security Income	Other Income (Child Support, SSI, Pension/Retirement, Food Stamps, Unemployment)
Add additional page if necessary				TOTAL

OPTIONAL INFORMATION:
Tell us (briefly) what repairs your home requires:

Repairs are subject to approval of BHCS whose decision is final.

ABOUT YOUR HOME: IS YOUR HOUSE A SINGLE FAMILY HOME? Yes No

I LIVE AT THE HOME Yes No # OF BEDROOMS (CIRCLE ONE) 1 2 3 4 5

AGE OF YOUR HOME: _____

FINANCIAL INFORMATION (Include income information for all income received by all persons 18 years of age or over living in the household)

MORTGAGE LENDER

() _____
PHONE NUMBER

ADDRESS CITY STATE ZIP

GROSS YEARLY INCOME

EMPLOYMENT _____ PENSION/RETIREMENT _____

CHILD SUPPORT _____ FOOD STAMPS _____

SSI _____ UNEMPLOYMENT _____

SOCIAL SECURITY _____ OTHER (SPECIFY) _____

GROSS YEARLY INCOME \$ _____

I hereby certify that I am the occupant of the said property, and that the income I stated above represents the total household income for the year preceding this application.

The income information provided above is subject to verification by Blue Hills Community Services on behalf of the Tax Increment Financing Commission of Kansas City. I agree to submit, upon request, copies of last two year's federal tax returns.

I/We the undersigned, do hereby swear under penalty of perjury that all information contained on this application is true and correct to the best of my/our knowledge and behalf.

Applicant Signature: _____ Date: _____

Co-applicant Signature: _____ Date: _____

(For single family rental conversion only)

Legal name of business if different from applicant: _____

Property address: _____

Amount held in Replacement Reserve: \$ _____

Name of Financial Institution and Account #: _____

I hereby certify that I am the owner of said property, and that the replacement reserve I stated above is accurate as of my last bank statement.

The financial information provided above is subject to verification by Blue Hills Community Services on behalf of the Tax Increment Financing Commission of Kansas City. I agree to submit, upon request, copies of pertinent bank statements and copies of last two year's federal tax returns including Schedule C if applicable.

I/We the undersigned, do hereby swear under penalty of perjury that all information contained on this application is true and correct to the best of my/our knowledge and behalf.

Applicant Signature: _____ Date: _____

Co-applicant Signature: _____ Date: _____