

Dear Homeowner / Renter:

Thank you for requesting an application for the Home Accessibility Program for Independence (HAPI). HAPI offers a grant to income eligible City of Pittsburgh homeowners and renters with permanent disabilities to help them remain in their homes.

The following application packet contains:

1. Fact Sheet and Borrower's Information
2. Home Accessibility Program for Independence (HAPI) Application
3. Income Verification and Computation Worksheet
4. Notice to Borrower on Loan Processing Fee Form
5. Notification - Watch Out for Lead Based Paint Poisoning
6. Conflict of Interest Disclosure Form
7. Requested Modifications Form

To qualify for a HAPI grant, you will need to complete the above forms and include:

1. Proof of Disability in the form of a letter or excuse from your Doctor, or a letter showing that you receive Social Security Disability
2. Copy of two most recent pay vouchers for each wage earner
3. Verification of other sources of income
4. Copy of latest Income Tax Return, or a non-filing verification letter, which can be obtained by calling 1-800-829-1040
5. If you are a renter, you must supply written permission from your Landlord to make modifications to the property along with a copy of the lease.

Please complete the application packet and submit all required information to:

**Urban Redevelopment Authority of Pittsburgh**  
200 Ross Street, 10<sup>th</sup> Floor  
Pittsburgh, PA 15219  
Attention: Sharon Taylor

If you have any questions, please contact me at 412-255-6677.

On behalf of the Urban Redevelopment Authority of Pittsburgh, I look forward to working with you.

Sincerely,



Sharon Taylor  
Program Officer



**Urban  
Redevelopment  
Authority  
of Pittsburgh**

200 ROSS STREET, 10th Floor  
PITTSBURGH, PA 15219  
412-255-6677  
www.ura.org



June 30, 2017

# Pittsburgh

## Home Accessibility Program for Independence (HAPI)

The Urban Redevelopment Authority of Pittsburgh is proud to introduce the HAPI pilot program for Pittsburgh homeowners and renters who have permanent disabilities. HAPI is a grant program to assist eligible homeowners and landlords in providing accessibility modifications for the home. HAPI funds will allow those with permanent disabilities an opportunity to remain within their homes.

**Accessible modifications include but are not limited to:**

- Exterior Ramps
- Chair Gliders or Lifts
- Door Widening
- Bathroom Modifications
- Lowering Kitchen Counters
- Sliding Shelves
- Visual door bells
- Visual phone signalers

**Maximum Grant Amount**

Homeowner:	\$1,000 to \$10,000
Landlord:	\$5,000 per unit
Fee:	\$150.00

**Income Limits by Household Size**

**PRIORITY (50% AMI)**

1 person: \$25,450	4 person: \$36,300
2 person: \$29,050	5 person: \$39,250
3 person: \$32,700	6 person: \$42,150

**(120% AMI)**

1 person: \$61,000	4 person: \$87,150
2 person: \$69,700	5 person: \$94,100
3 person: \$78,450	6 person: \$101,100

**How to qualify:**

Funds are limited and will be given on a first come first serve basis with priority given to applications with incomes below 50% of the Area Median Income (AMI). The maximum incomes are listed within the chart.

Contact the URA at 412-255-6677 and request an application. Return the application to the URA with the following information:

- **Proof of Disability in the form of a letter, excuse from your Doctor, or a letter showing that you receive Social Security Disability**
- **Proof of ownership or proof of owner's permission to make modifications**
- **Verification of all income, with copies of the two most recent pay stubs for each wage earner**
- **Copy of the latest Income Tax Returns or Non-Filing Verification Letter (1-800-829-1040)**
- **Verification that City and County Real Estate Taxes are paid (if available)**

**Call the URA at  
412-255-6677 for more  
information, or visit us at  
www.ura.org.**

# Pittsburgh Home Accessibility Program for Independence (HAPI)

## CONTRACTOR INFORMATION

The HAPI program offered by the URA will help you make modifications that will allow you to stay in your home.

The URA construction advisor will conduct an initial inspection of the property and prepare a work write-up which identifies the home modifications. The URA construction advisor is not responsible for performing a home assessment audit to determine what modifications are necessary. **If you would like to obtain a home assessment, it would be at your own expense.**

Work may be performed by your own contractor or you can request the URA send your approved work write-up out to bid.

If you obtain your own contractor, they will need to complete a City of Pittsburgh Business Registration form, a short application and W9 form. Please note that no money is given up front to the contractor to start the job. The contractor will need to provide written proposals based on the work write-up or home assessment and include itemized costs per line item.

You may request that the URA send your approved work write-up out to bid to three pre-approved contractors. The contractors will visit the home and bid on the job. You will choose the contractor.

The URA will review the proposal to determine a fair and equitable cost of the proposed modifications.

The URA construction advisor will provide project management and conduct on-site inspections during the construction and at the time the contractor requests payment for completed work. The URA will make payments directly to the contractor based on work completed and an approval by the construction advisor and the grantee.

At the time the work is completed, the URA construction advisor and, if necessary, a Department of Permits, Licensing and Inspection (PLI) representative will make a final inspection. If PLI or Allegheny County Health Department (ACHD) has issued permits for the work, the contractor must have the appropriate representatives of PLI or ACHD sign the Permit Sign-Off form, which needs to be returned with the Payment/Inspection form for the contractor to receive final payment.

**Call the URA at  
412-255-6677 for more  
information, or visit us at [www.ura.org](http://www.ura.org).**

DATE: \_\_\_\_\_

**HOME ACCESSIBILITY PROGRAM FOR INDEPENDENCE (HAPI)**

Please return application to:  
URA of Pittsburgh  
200 Ross Street Pittsburgh, PA 15219  
Attention: Sharon Taylor

PERSONAL INFORMATION:				APPLICANT 1	APPLICANT 2				
Last Name:	First	Initial	Birth Date	/ /	Last	First	Initial	Birth Date	/ /
Marital Status: Married ( ) Widowed ( ) Unmarried ( ) Separated ( )					Relationship to Applicant:				
Home Address:					Home Address:				
Zip Code					Zip Code				
Years There:					Years There:				
Telephone:					Telephone:				
Previous Address:					Previous Address:				
Social Security No.:					Social Security No.:				
Number of Dependents:					Number of Dependents:				
Nearest Relative Not Living With You:					Nearest Relative Not Living With You:				
Address:					Address:				
Telephone:					Telephone:				
BUSINESS INFORMATION:				APPLICANT 1	APPLICANT 2 (Or Other Person)				
PRESENT EMPLOYER:					PRESENT EMPLOYER:				
Name:					Name:				
Address:					Address:				
Telephone:					Telephone:				
Years There/Position Held:					Years There/Position Held:				
PREVIOUS EMPLOYER (if less than 2 years):					PREVIOUS EMPLOYER (if less than 2 years):				
Name:					Name:				
Address:					Address:				
Telephone:					Telephone:				
Years There/Position Held:					Years There/Position Held:				
CREDIT INFORMATION:				APPLICANT 1	APPLICANT 2				
MONTHLY GROSS INCOME:					MONTHLY GROSS INCOME:				
Other Income Sources & Amounts:					Other Income Sources & Amounts:				
(Social Security & Pension)					(Social Security & Pension)				
\$					\$				
\$					\$				
\$					\$				
TOTAL MONTHLY INCOME:					TOTAL MONTHLY INCOME:				
\$					\$				

**CREDIT INFORMATION CONT. APPLICANT 1**

**APPLICANT 2**

<b>CHECKING ACCOUNT:</b> Name of Bank:	<b>CHECKING ACCOUNT:</b> Name of Bank:
Branch Address:	Branch Address:
Account No./Balance:	Account No./Balance:
<b>SAVINGS ACCOUNT:</b> Name of Bank:	<b>SAVINGS ACCOUNT:</b> Name of Bank:
Branch Address:	Branch Address:
Account No./Balance:	Account No./Balance:
<b>HOME MORTGAGE:</b> Name of Bank:	<b>HOME MORTGAGE:</b> Name of Bank:
Branch Address:	Branch Address:
Original Mortgage Amount:     \$	Original Mortgage Amount:     \$
Unpaid Balance:                     \$	Unpaid Balance:                     \$
Monthly Payment:                   \$	Monthly Payment:                   \$
<b>CAR OWNED:</b> Year and Make:	<b>CAR OWNED:</b> Year and Make:
Financed By:	Financed By:
Account No.	Account No.
Unpaid Balance:                     \$	Unpaid Balance:                     \$
Monthly Payment:                   \$	Monthly Payment:                   \$

**SECTION A - SECURED PROPERTY**

Address of Property to be Improved: \_\_\_\_\_

Number of Dwelling Units In Home \_\_\_\_\_ Family Size \_\_\_\_\_

Do you currently live in the property?  Yes  No    If not, when do you plan to move in \_\_\_\_\_

**Renters:**

Name of Landlord: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_

Address of Landlord: \_\_\_\_\_ Years renting from Landlord: \_\_\_\_\_ Monthly Rent Payment: \_\_\_\_\_

Do you have written permission from your Landlord to make modifications to the property?  Yes  No

**SECTION B - INSTALLMENT DEBTS**

(Show all Banks/Credit Unions, Credit Cards and Finance Companies from which you have borrowed or you are authorized to use. Use a separate sheet if necessary.)

Creditor - Address/Account No.	ORIGINAL AMOUNT	UNPAID BALANCE	MONTHLY PAYMENT
1.	\$	\$	\$
2.	\$	\$	\$
3.	\$	\$	\$
4.	\$	\$	\$
<b>TOTALS</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not it is approved. The Urban Redevelopment Authority is authorized to check my credit and employment history and to discuss any questions about my credit experience.

**BORROWER'S SIGNATURE:**

**CO-BORROWER'S SIGNATURE:**

\_\_\_\_\_

\_\_\_\_\_

## INCOME VERIFICATION AND COMPUTATION WORKSHEET

DATE: \_\_\_\_\_

APPLICANTS NAMES: \_\_\_\_\_

**INCOME:**

Source(s) of Incomes	Monthly Gross Income	Annual Gross Income	Verification
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
Total Annual Income:		\$ _____	

.....  
Total Members in Household: \_\_\_\_\_

Name & Age of Each Member:

_____	Age: _____
_____	Age: _____
_____	Age: _____
_____	Age: _____

\_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Borrower's Signature

## NOTICE TO BORROWER ON LOAN PROCESSING FEE

You will be charged a non-refundable fee of **ONE HUNDRED AND FIFTY (\$150.00) DOLLARS** to cover the cost incurred by the Urban Redevelopment Authority of Pittsburgh ("URA") in the processing of your Home Accessibility Program for Independence (HAPI) grant. The fee must be paid at closing.

\_\_\_\_\_ I will pay this fee at the time of the closing with a check made payable to the "URA".

URA may inspect your property before and during construction. The inspections are performed solely to protect URA's grant funds. URA does not warrant the value of the property. URA does not warrant or guarantee that its inspection will reveal everything that may be wrong with your property. URA does not warrant materials or workmanship. If you want to satisfy yourself that the condition of the property does not require other work or that the work done by the contractor is done correctly, you must, at your own expense, obtain your own home inspector.

### ACKNOWLEDGEMENT

**I have read and understood the foregoing Notice to Borrower.**

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Witness

Date: \_\_\_\_\_

\_\_\_\_\_  
Co-Borrower

\_\_\_\_\_  
Witness

Date: \_\_\_\_\_

(A witness cannot be anyone applying for this loan).

## NOTIFICATION

### Watch Out for Lead-Based Paint Poisoning

If the property was constructed before 1978, there is a possibility of lead-based paint. Please read the following information concerning lead-based paint poisoning.

#### Source of Lead Based Paint

The interiors of older homes and apartments often have layers of lead-based paint on the walls, ceilings, windowsills, doors and doorframes. Lead-based paint and primers may also have been used on outside porches, railings, garages, fire escapes and lampposts. When the paint chips flakes or peels off there may be a real danger for babies and young children. Children may eat paint chips or chew on painted railings, windowsills or other items when parents are not around. Children can also ingest lead even if they do not specifically eat paint chips. For examples, when children play in an area where there are loose paint chips or dust particles containing lead, they may get these particles on their hands, put their hands into their mouths, and ingest a dangerous amount of lead.

#### Hazards of Lead-Based Paint

Lead poisoning is dangerous – especially to children under the age of seven (7). It can eventually cause mental retardation, blindness and even death.

#### Symptoms of Lead-Based Paint Poisoning

Has your child been especially cranky or irritable? Is he or she eating normally? Does your child have stomachaches and vomiting? Does he or she complain about headaches? Is your child unwilling to play? These may be signs of lead poisoning. Many times though, there are no symptoms. This does not mean that you should not be concerned if you believe your child has been exposed to lead-based paint.

#### Advisability and Availability of Blood Lead Level Screening

If you suspect that your child has eaten chips of paint or someone told you this, you should take your child to the doctor or clinic for testing. If the test shows that your child has an elevated blood lead level, treatment is available. Contract your doctor or local health department for help or more information. Lead screening and treatment

are available through the Medical Program for those who are eligible. If your child is identified as having an elevated blood lead level, you should immediately notify the Community Development or other agency to which you or your landlord is applying for rehabilitation assistance so the necessary steps can be taken to test your unit for lead-based paint hazards. If your unit does have lead-based paint, you may be eligible for assistance to abate that hazard.

#### Precautions to Take to Prevent Lead-Based Paint Poisoning.

You can avoid lead-based paint poisoning by performing some preventive maintenance. Look at your walls, ceilings, doors, doorframes and windowsills. Are there places where the paint is peeling, flaking, chipping, or powdering? If so, there are some things you can do immediately to protect your child:

Cover all furniture and appliances;

Get a broom or stiff brush and remove all loose pieces of paint from walls, woodwork, window wells, and ceilings;

Sweep up all pieces of paint and plaster and put them in a paper bag or wrap them in newspaper. Put these packages in the trashcan. DO NOT BURN THEM;

Do not leave paint chips on the floor in window wells, Damp mop floors and windowsills in and around the work area to remove all dust and paint particles. Keeping these areas clear of paint chips, dust and dirt is easy and very important; and

Do not allow loose paint to remain within your children's reach since children may pick loose paint off the lower part of the walls.

#### Homeowner Maintenance & Treatment of Lead-Based Paint Hazards

As a homeowner, you should take the necessary steps to keep your home in good shape. Water leaks from faulty plumbing,

defective roofs and exterior holes or breaks may admit rain and dampness into the interior of your home. These conditions damage walls and ceilings and cause paint to peel crack or flake. These conditions should be corrected immediately. Before repainting all surfaces that are peeling, cracking, chipping or loose should be thoroughly cleaned by scraping or brushing the loose paint from the surface, then repainted with two (2) coats for non-lead-based paint. Instead of scraping and repainting the surface may be covered with other materials such as wallboard, gypsum, or paneling. Beware that then lead-base paint is removed by the scraping or sanding, a dust is created, which may be hazardous. The dust can enter the body either by breathing it or swallowing it. The use of heat or paint removers could create a vapor or fume which may cause poisoning if inhaled over a long period of time. Whenever possible, the removal of lead-based paint should take places when there are not children or pregnant women on the premises. Simply painting over defective lead-base paint surfaces does not eliminate the hazard. Remember that you as an adult play a major role in the prevention of lead poisoning. Your actions and awareness about the lead problem can makes a big difference.

#### Tenant and Homebuyer Responsibilities:

You should immediately notify the management office of the agency through which you are purchasing your home if the unit has flaking, chipping, powdering or peeling paint, water leaks from plumbing or a defective roof. You should cooperate with the office's effort to repair the unit.



## CONFLICT OF INTEREST DISCLOSURE

All applicants for the Urban Redevelopment Authority (URA) loan programs are required to disclose if they are employees of or are related to employees of the URA or the City of Pittsburgh. If you are a URA or City of Pittsburgh employee or are related to a URA or City of Pittsburgh employee, the URA must obtain a conflict of interest waiver from its Board of Directors.

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

Please circle the number of the following condition that applies:

1. I am not an employee of and am not related to an employee of the URA or the City of Pittsburgh
2. I am an employee of the URA.
3. I am an employee of the City of Pittsburgh. \_\_\_\_\_ Department
4. I am related to an employee of the URA. \_\_\_\_\_ (Name)
5. I am related to an employee of the City of Pittsburgh. \_\_\_\_\_ (Name)

Please circle the relationship: Spouse, Mother, Father, Daughter, Son, Other, \_\_\_\_\_

I acknowledge and agree that any misrepresentation contained in this Conflict of Interest Disclosure may result in the cancellation of my grant application or, if the misrepresentation is discovered after the grant is made, I may be required to repay the grant in full on demand.

Borrower's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Co-Borrower's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**HOME ACCESSIBILITY PROGRAM FOR INDEPENDENCE (HAPI)  
REQUESTED MODIFICATIONS**

**Which household member has a disability?** \_\_\_\_\_

**What type of disability?** \_\_\_\_\_

\_\_\_\_\_

**Is it progressive:** \_\_\_\_ Yes      \_\_\_\_ No

**Briefly describe the requested modifications:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please provide any additional information you feel would be helpful to us in the design and construction of your modification:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_