

**City of Madison – Rental Rehabilitation Loan Program
APPLICATION FORM**

Loan Amount \$

Address of Property to be Improved		Property Type <input type="checkbox"/> Single-Family Dwelling <input type="checkbox"/> 2-8 Family Dwelling			
Madison, WI		Date purchased:	Down payment \$	Purchase price \$	Present value of property \$
Title in name(s) of			Year built:	No. of Units:	

IMPROVEMENTS PLANNED

BORROWER			CO-BORROWER		
Name:		Age:	Name:		Age:
Present Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent			Present Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent		
<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <small>(including single, divorced, widowed)</small>			<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <small>(including single, divorced, widowed)</small>		
Name & Address of Employer <input type="checkbox"/> Self-employed		Years employed in this line of work or profession? Years on this job _____	Name & Address of Employer <input type="checkbox"/> Self-employed		Years employed in this line of work or profession? Years on this job _____
Position/Title:		Type of Business:	Position/Title:		Type of Business:
Social Security Number:	Home Phone:	Business Phone:	Social Security Number:	Home Phone:	Business Phone:

If employed in current position for less than two years or if currently employed in more than one position, complete the following:

Name & Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)	Name & Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
Name & Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)	Name & Address of Employer <input type="checkbox"/> Self Employed		Dates (from – to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)

MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION

Gross Monthly Income	Borrower	Co-Borrower	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income*	\$	\$	\$	Rent	\$	
Overtime				First Mortgage (P&I)		
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other Income				Homeowner Assn. Dues		
				Other:		
Total	\$	\$	\$	Total	\$	\$

*Self Employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements.

Describe Other Income

B/C	Monthly Amount
	\$

ASSETS AND LIABILITIES

Schedule of Real Estate Owned (if additional properties are owned, use continuation sheet.)

Property Address (enter S if sold, PS if pending sale or R if rental being held for income)	Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes and Misc.	Net Rental Income
N		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$

ASSETS AND LIABILITIES (Continued)

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-Borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise separate Statements and Schedules are required. If the Co-Borrower section was completed about a spouse, this Statement and supporting schedules must be completed about that spouse also. Completed Jointly Not Jointly

ASSETS		Cash or Market Value	Liabilities and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property.		
Description			Credit Cards	Monthly Pymt. & Mos. Left to Pay	Unpaid Balance
Cash deposit toward purchase held by:		\$	Name:		\$
			No.:		\$
List checking and savings accounts below			Name:		\$
Name & address of Bank, S&L, or Credit Union			No.:		\$
			Name:		\$
			No.:		\$
Acct. No.			Name:		\$
\$			No.:		\$
Name & address of Bank, S&L, or Credit Union			Name:		\$
			No.:		\$
			Name:		\$
			No.:		\$
Acct. No.			Name:		\$
\$			No.:		\$
Name & address of Bank, S&L, or Credit Union			Name and address of Company	\$ Pymt./Mos.	\$
Acct. No.			Acct. No.		
\$			Acct. No.		
Stocks & Bonds (Company name/number & description)			Name and address of Company	\$ Pymt/Mos.	\$
Life insurance net cash value			Acct. No.		
Face amount: \$			Name and address of Company	\$ Pymt./Mos.	\$
Subtotal Liquid Assets					
\$			Acct. No.		
Real estate owned (enter market value from schedule of real state owned)					
\$			Acct. No.		
Vested interest in retirement fund			Name and address of Company	\$ Pymt./Mos.	\$
Net worth of business(es) owned (attach financial statement)			Acct. No.		
\$			Alimony/child Support/Separate Maintenance Payments Owed to:	\$	
Automobiles owned (make and year)			Job Related Expenses (child care, union dues, etc.)	\$	
Other Assets (itemize)			Total Monthly Payments	\$	
Total Assets a.		\$	Net Worth(a minus b)	\$	Total Liabilities b.
					\$

DECLARATIONS

If you answer "yes" to any questions a through l, please use continuation sheet for explanation.	Borrower		Co-Borrower	
	Yes	No	Yes	No
a. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Have you been declared bankrupt within the past 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure or judgment? [This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name and address of Lender, FHA, or VA case number, if any, and reasons for the action.]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you presently delinquent or in default on any Federal debit or any other loan, mortgage, financial obligation, bond or loan guarantee? If "Yes" give details as described in the preceding question	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Is any part of the down payment borrowed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Are you a co-maker or endorser on a note?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Are you a U.S. citizen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Are you a permanent resident alien?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Do you intend to occupy the property as your primary residence? If "Yes," complete question m below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Have you had an ownership interest in a property in the last three years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)?				
2. How did you hold title to the home – solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?				
n. Are you a City employee, elected City official, City board or committee member or an immediate family member of the aforementioned? "Immediate family" member of a City employee, official or board/committee member means a spouse, a registered domestic partner, or a relative by marriage, adoption or lineal descent who receives more than one-half of his or her support from the City employee, official or board/committee member.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OPERATING DATA ON PROPERTY					
ESTIMATE OF INCOME FROM PROPERTY AFTER REHABILITATION					
Number of Each Type of Unit	Bedrooms per Unit	Monthly Rent per Unit	Annual Rent at Full Occupancy	Occupancy Rate Assumed	Gross Income Expectancy
		\$	\$		
1. Total Income from dwelling units			\$	%	\$
2. Garage or Parking Spaces				%	
3. Other (specify)				%	\$
4. TOTAL			\$		\$
ESTIMATE OF ANNUAL OPERATING EXPENSE AFTER REHABILITATION			EQUIPMENT & SERVICES TO BE INCLUDED IN RENT (Check those to be furnished)		
Administrative:			Equipment:		
Advertising		\$	Ranges (gas or electric)		
Management			Refrigerators (gas or electric)		
Operational:			Kitchen exhaust fan		
Elevator power			Attic vent fan		
Elevator maintenance			Laundry facilities		
Air conditioning			Other (specify)		
Fuel (heating and domestic hot water)					
Janitorial supplies					
Lighting and miscellaneous power					
Water					
Gas			Services:		
Garbage and trash removal			Water (hot and cold)		
Maintenance:			Gas		
Decorating			Electricity		
Repairs			Janitor service		
Exterminating			Air conditioning		
Insurance			Ground maintenance		
Ground expense (materials only)			Garbage and trash removal		
Furniture and furnishings			Other (specify)		
TOTAL OPERATING EXPENSE		\$			

MINORITY CODE: The following information is requested for statistical purposes to determine the degree to which programs are utilized by minority families. This information will not be used in determining your eligibility.

BORROWER	CO-BORROWER
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American
<input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White	<input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

CERTIFICATION

I/We apply for the loan indicated in this application which may be secured by a mortgage or deed of trust on the property described herein and represent that the property will not be used for any illegal or restricted purpose, and that all statements made in this application are true and are made for the purpose of obtaining the loan. Verification may be obtained from any source named in this application.

NOTICE REGARDING LOBBYING ORDINANCE: If you are seeking approval of a development that has over 40,000 gross square feet of non-residential space, or a residential development of over 10 dwelling units, or if you are seeking assistance from the City with a value of over \$10,000 (this includes grants, loans, TIF or similar assistance), then you likely are subject to Madison's lobbying ordinance, sec. 2.40, MGO. You are required to register and report your lobbying. Please consult the City Clerk for more information. Failure to comply with the lobbying ordinance may result in fines of \$1,000 to \$5,000.

Borrower's Signature

Date

Co-Borrower's Signature

Date

CONTINUATION SHEET/APPLICATION FORM

Use this continuation sheet if you need more space to complete the Application Form. Mark B for Borrower and C for Co-Borrower

Borrower:

Co-Borrower:

**TERMS AND CONDITIONS
RENTAL REHABILITATION LOAN**

This sets forth the terms and conditions to which the borrower(s) must agree in order to obtain a loan under the Rental Rehabilitation Loan Program.

1. Interest Rate. The annual base rate of interest applicable to the Rental Rehabilitation Loans are established by the Board of Estimates and approved by the Common Council of the City of Madison. The base rate of interest shall not exceed the cost of borrowed funds to the City of Madison in the previous year, plus a service fee of one percent, rounded upward to the nearest one-quarter of one percent.
2. Program Fees and Charges.
 - A. Application Fee. A \$200 non-refundable application fee is to be paid by the borrower(s) at time of application.
 - B. Title Insurance. The City shall be provided with a Mortgagee's Title Insurance Policy satisfactory to the City, in the amount of the Rehabilitation Loan, and issued by a title insurance company licensed in the State of Wisconsin.
 - C. Recording Fees. The cost of recording the mortgage and any other documents will be charged at loan closing.
 - D. Loan Processing Fee. The amount of the loan processing fee is 1% of the loan amount and is charged at loan closing.
 - E. Appraisal Fee. The borrowers(s) for a Rental Rehabilitation loan will be responsible for covering the cost of an appraisal for a property containing two or more units at the time of application.
3. Maximum Term of Loan. The maximum term for the loan is determined by whichever of the following results in the shortest term:
 - A. 15 years; or
 - B. Three-fourths of the remaining economic life of the property.
4. Lump-Sum Repayment of Loan. The loan shall become immediately due and payable to the City upon the occurrence of any of the following:
 - A. Title to, or equitable ownership in, the property is transferred to any party other than the surviving spouse of the borrower(s), if any; or
 - B. The borrower(s) default in meeting any of the terms and conditions of the loan, or
 - C. The borrower(s) refinance with cash-out.

5. Repayment of the Loan. Except as otherwise stated, the loan shall be repaid in substantially equal monthly installments with interest in arrears.
6. Prepayment of the Loan. The borrower(s) reserve the right to prepay, at any time, all or part of the loan without penalty.
7. Loan Security.
 - A. Form of Loan Security Required. The borrower(s) must provide security for a Rental Rehabilitation Loan in the form of a mortgage. In the case of multiple ownership, the signature of every titleholder to the property will be required.
 - B. Preservation of the Security. The borrower(s) must agree to maintain the property in decent, safe, sanitary, and sound condition during the term of the Rental Rehabilitation Loan.
 - C. Property Insurance. The borrower(s) must maintain property insurance on the property as required, during the term of the loan and list the City of Madison as a Mortgagee.
 - D. Total Debt on Property. Total debt secured by the property, including the new City loan, cannot exceed 90% of the after rehabilitation value of the property.
8. City Ordinance Requirements. In addition to the terms and conditions referred to in the preceding paragraphs, the borrower(s) must agree to comply with the following terms and conditions:
 - A. Nondiscrimination Based on Disability. Borrower assures and certifies that they will comply with section 39.05 of the Madison General Ordinances, entitled “Nondiscrimination Based on Disability in City Assisted Programs and Activities,” and agrees to ensure that any subcontractor who performs any part of this agreement complies with section 39.05, where applicable. This includes but is not limited to assuring compliance by the Borrower, Contractor and any subcontractor, with section 39.05(4) of the Madison General Ordinances, “Discriminatory Actions Prohibited.”
 - B. Nondiscrimination. In the performance of work under this contract, the borrower(s)/contractor(s) agrees not to discriminate against any employee or applicant for employment because of race, religion, marital status, age, color, sex, handicap, national origin or ancestry, income level or source of income, arrest record or conviction record, less than honorable discharge, physical appearance, sexual orientation, gender identity, political beliefs or student status. Borrower(s)/contractor(s) further agrees not to discriminate against any subcontractor or person who offers to subcontract on this contract because of race, religion, color, age, disability, sex, sexual orientation, gender identity, or national origin.
 - C. Equal Opportunity and Fair Housing. The borrower(s) shall comply with all applicable Local, State, and Federal Provisions concerning Equal Opportunity and Fair Housing.
 - D. Prevailing Wage. If eight or more units and does not include commercial space, the borrower(s) agree to comply with Madison General Ordinance Section 4.23 entitled “Prevailing Wage on

Building or Work Financed In Whole Or In Part With City Financial Assistance”. This Section is not applicable if project funded in whole or in part with federal funds.

- E. Section 8. The Borrower(s) agree to not refuse to lease or otherwise make unavailable units in the Project solely because any applicant for a unit is a direct recipient of a Federal, State or Local government-housing subsidy. Borrower(s) shall comply with the provisions of Madison General Ordinances Section 32.12 (13), for as long as the loan remains outstanding.
 - F. Lobbying Ordinance. The Borrower(s) agree to comply with the City of Madison’s Lobbying Ordinance. If you are seeking approval of a development that has over 40,000 gross square feet of non-residential space, or a residential development of over 10 dwelling units, or if you are seeking assistance from the City with a value of over \$10,000, then you likely are subject to Madison’s lobbying ordinance, Madison General Ordinance Section 2.40 and may be required to register and report your lobbying. Please consult the City Clerk for more information. Failure to comply with the lobbying ordinance may result in fines of \$1,000 to \$5,000.
 - G. Affirmative Action Department. Section 39.02(9)(c) requires that contracts (unless exempt) that borrower(s) agree to comply with the workforce utilization and affirmative action provisions.
9. Use of Proceeds. The borrower(s) shall agree to use the proceeds of the Rental Rehabilitation Loan only to pay for costs of services and materials necessary to carry out the rehabilitation work for which the loan is approved. Six percent of the constructions costs must be set-aside in the escrow account for contingencies.
10. Escrowing the Rehabilitation Funds. The borrower(s) shall agree to permit the City of Madison, its agents or designees, to act as escrow agent of the proceeds of the Rental Rehabilitation Loan and other funds used in combination with the City loan, including the borrower(s) own funds. The borrower(s) permit the City, its agents or designees to disburse such funds in the manner set forth in the Contract for Rehabilitation Work.
11. Completion of Work. The borrower(s) shall assure that the rehabilitation work shall be carried out promptly and efficiently through written contract(s).
12. Contract for Rehabilitation Work form to be used. The Contract for Rehabilitation Work form, which is provided by the Department of Planning & Community & Economic Development (DPCED) Staff, shall be used for rehabilitation work financed in whole or in part with a Rental Rehabilitation Loan.
- 13 Best Value Contracting. Borrower(s) shall utilize for construction of the Project those firms which have met the prequalification requirements of Section 33.07(7), Madison General Ordinances, if applicable.
14. Inspections. The borrower(s) shall permit inspection by DPCED Staff of the property to be rehabilitated with the assistance of a Rental Rehabilitation Loan, for compliance with the Minimum Housing and Property Maintenance Code and other applicable local codes and ordinances. The borrower(s) shall also permit all other inspections deemed necessary by the DPCED Staff of the property, the rehabilitation work, and all contracts, materials, equipment, payrolls, and conditions

of employment pertaining to the work.

15. Lead-Based Paint Hazards. Any work, which disturbs a painted surface, must include lead testing and lead safe work practices.

16. Records. The borrower(s) shall keep such records as may be required with respect to the rehabilitation work performed with the assistance of a Rental Rehabilitation Loan.

17. Interest of Public Body. The borrower(s) shall allow no member of the governing body of the City of Madison, and no official or employee of the City of Madison who exercises any functions or responsibilities in connection with the administration of the Rental Rehabilitation Program to have any interest, direct or indirect, in the proceeds of the Rental Rehabilitation Loan, or in any contract entered into by the borrower(s) for the performance of work financed in whole or in part with the proceeds of the loan.

18. Bonus, Commission, or Fee. The borrower(s) shall not pay any bonus, commission, or fee for the purpose of obtaining approval of the loan application, or any other approval or concurrence required by the Community Development Authority or the DPD Staff to complete the rehabilitation work financed in whole or in part with the Rental Rehabilitation Loan.

19. Tenant Income Limits. The Borrower(s) agree to have 75% of the project occupied by households with incomes of no more than 80% of the Dane County median income for the first year.

20. Rent Income. The project rents after rehabilitation for the first year cannot exceed the HUD fair market rents for Dane County.

By signing this document, I/We hereby acknowledge having read and understand the above terms and conditions and hereby agree to comply with the above terms and conditions of the Rental Rehabilitation Loan of the City of Madison.

Signature date

Signature date

Signature date

Signature date



City of Madison

Rehabilitation Loan Program

This notice to you as required by the Right to Financial Privacy Act of 1978 that the Department of Housing and Urban Development has a right of access to financial records held by any financial institution in connection with the consideration or administration of the rehabilitation loan for which you have applied. Financial records involving your transaction will be available to HUD without further notice or authorization but will not be disclosed or released to another Government agency or Department without your consent except as required or permitted by law.

Applicant's permission to verify

This is to certify that we have given our permission to the City of Madison to request and receive information required to verify employment, mortgages, deeds of trust, savings accounts, credit accounts, and all other information necessary to complete our application for a Housing Rehabilitation loan.

Print Name (Borrower)

Print Name (Co-borrower)

Signature (Borrower)

Signature (Co-borrower)

Borrower Social Security #

Co-borrower Social Security #

Street Address

City, State, and Zip Code

Date

Please read, sign, and return this form along with the completed application to:
City of Madison-Community Development Division
215 Martin Luther King Jr Blvd, Ste 300
P.O. Box 2627
Madison WI 53701-2627

**Rental Rehabilitation Program
CHECKLIST**

_____ \$200 Application Fee (Check payable to City of Madison Treasurer)

_____ Completed Application Form.

_____ Completed Permission to Verify form.

_____ Copy of lease for each tenant.

_____ Copy of the last two year's tax returns and all schedules and W-2s.

_____ Copy of signed Terms & Conditions form. (Return one signed set)

_____ Copy of bids. (Prior to loan commitment)

(Note: Applicant will be responsible for payment of appraisal fee prior to City ordering.)

Upon receipt and review of above information, the following process and timeline are followed:

_____ Inspection of property by City staff.

_____ City issues commitment letter.

_____ First American Title schedules closing.

_____ Loan closed---takes approximately 2-3 weeks once scheduled.

(NOTE: Loan funds available for disbursement 4 business days after Closing.)

_____ Work commences.

_____ Submit invoices for payment to City, as work progresses.

_____ Final Inspection by City Staff.

Mail to:

City of Madison – CDD

PO Box 2627

Madison WI 53701-2627

Any questions call Terri Goldbin 608-266-4223 or Craig Wilson 608-266-6557

**DETACHED UNITS
ALLOWANCE FOR UTILITIES AND APPLIANCES**

EFFECTIVE – 1/1/18

NAME OF FAMILY _____ NO. OF BEDROOMS _____

ADDRESS OF UNIT _____

SCHEDULE OF MONTHLY ALLOWANCES (Allowances must be for actual size of unit rented. Circle those that apply, add these together and enter the total on line 3 below.)

UTILITY SERVICE/ APPLIANCE	1-BR	2-BR	3-BR	4-BR	5-BR	6-BR
HEAT						
Natural gas	26.00	31.00	36.00	40.00	45.00	50.00
Electric	76.00	89.00	102.00	116.00	129.00	142.00
HOT WATER						
Natural gas	6.00	8.00	11.00	13.00	16.00	19.00
Electric	22.00	28.00	34.00	40.00	46.00	52.00
COOKING FUEL						
Natural gas	2.00	3.00	3.00	4.00	5.00	6.00
Electric	6.00	9.00	12.00	15.00	18.00	21.00
LIGHTING AND REFRIGERATION						
	36.00	50.00	64.00	78.00	92.00	106.00
WATER & SEWER						
	39.00	49.00	63.00	77.00	94.00	111.00
AIR CONDITIONING						
	3.00	6.00	10.00	13.00	17.00	21.00
BASE CHARGES- include a base charge if any of the above services uses natural gas, electricity or both.						
Natural Gas	22.00	22.00	22.00	22.00	22.00	22.00
Electric	20.00	20.00	20.00	20.00	20.00	20.00
APPLIANCES (Tenant furnished)						
Range	5.00	5.00	5.00	5.00	5.00	5.00
Refrigerator	5.00	5.00	5.00	5.00	5.00	5.00

1. **Rent Limit**..... \$ _____
2. **Contract Rent**..... \$ _____
3. **Allowance for Utilities and Appliances** \$ _____
4. **Gross Rent** (Total of lines 2 and 3, cannot exceed line 1) \$ _____

RENT LIMITS

	Efficiency	1 BR	2 BR	3 BR	4 BR
Fair Market Rents*	\$929	\$1,076	\$1,254	\$1,676	\$1,948

*The rents have been adjusted effective June 15, 2022 by HUD.

**DUPLEX, FOURPLEX, ROWHOUSE
ALLOWANCE FOR UTILITIES AND APPLIANCES**

EFFECTIVE – 1/1/18

NAME OF FAMILY _____ NO. OF BEDROOMS _____

ADDRESS OF UNIT _____

SCHEDULE OF MONTHLY ALLOWANCES (Allowances must be for actual size of unit rented. Circle those that apply, add these together and enter the total on line 3 below.)

UTILITY SERVICE/ APPLIANCE	1-BR	2-BR	3-BR	4-BR	5-BR	6-BR
HEAT						
Natural gas	23.00	27.00	31.00	35.00	38.00	41.00
Electric	46.00	60.00	75.00	89.00	104.00	119.00
HOT WATER						
Natural gas	6.00	8.00	11.00	13.00	16.00	19.00
Electric	22.00	28.00	34.00	40.00	46.00	52.00
COOKING FUEL						
Natural gas	2.00	3.00	3.00	4.00	5.00	6.00
Electric	6.00	9.00	12.00	15.00	18.00	21.00
LIGHTING AND REFRIGERATION						
	31.00	43.00	55.00	67.00	80.00	92.00
WATER & SEWER						
	39.00	49.00	63.00	77.00	94.00	111.00
AIR CONDITIONING						
	4.00	6.00	9.00	11.00	14.00	17.00

BASE CHARGES-include a base charge if any of the above services uses natural gas, electricity or both.

Natural Gas	22.00	22.00	22.00	22.00	22.00	22.00
Electric	20.00	20.00	20.00	20.00	20.00	20.00

APPLIANCES (Tenant furnished)

Range	5.00	5.00	5.00	5.00	5.00	5.00
Refrigerator	5.00	5.00	5.00	5.00	5.00	5.00

1. **Rent Limit**..... \$ _____
2. **Contract Rent**..... \$ _____
3. **Allowance for Utilities and Appliances** \$ _____
4. **Gross Rent** (Total of lines 2 and 3, cannot exceed line 1) \$ _____

RENT LIMITS

	Efficiency	1 BR	2 BR	3 BR	4 BR
Fair Market Rents*	\$929	\$1,076	\$1,254	\$1,676	\$1,948

*The rents have been adjusted effective 6/15/22 by HUD.

**MULTI-UNIT STRUCTURE (MORE THAN 4 UNITS)
ALLOWANCE FOR UTILITIES AND APPLIANCES**

EFFECTIVE -1/1/18

NAME OF FAMILY _____ NO. OF BEDROOMS _____

ADDRESS OF UNIT _____

SCHEDULE OF MONTHLY ALLOWANCES (Allowances must be for actual size of unit rented. Circle those that apply, add these together and enter the total on line 3 below.)

UTILITY SERVICE/ APPLIANCE	0-BR	1-BR	2-BR	3-BR	4-BR	5-BR
-------------------------------	------	------	------	------	------	------

HEAT

Natural gas	16.00	18.00	22.00	25.00	28.00	31.00
Electric	27.00	32.00	44.00	55.00	67.00	79.00

HOT WATER

Natural gas	4.00	5.00	7.00	9.00	11.00	13.00
Electric	15.00	18.00	22.00	27.00	32.00	37.00

COOKING FUEL

Natural gas	2.00	2.00	3.00	3.00	4.00	5.00
Electric	6.00	6.00	9.00	12.00	15.00	18.00

LIGHTING AND REFRIGERATION

	21.00	25.00	34.00	44.00	53.00	63.00
--	-------	-------	-------	-------	-------	-------

AIR CONDITIONING

	3.00	4.00	5.00	6.00	8.00	9.00
--	------	------	------	------	------	------

WATER & SEWER

	39.00	39.00	49.00	63.00	77.00	94.00
--	-------	-------	-------	-------	-------	-------

BASE CHARGES-include a base charge if any of the above services uses natural gas, electricity or both.

Natural Gas	22.00	22.00	22.00	22.00	22.00	22.00
Electric	20.00	20.00	20.00	20.00	20.00	20.00

APPLIANCES (Tenant furnished)

Range	5.00	5.00	5.00	5.00	5.00	5.00
Refrigerator	5.00	5.00	5.00	5.00	5.00	5.00

1. Rent Limit..... \$ _____

2. Contract Rent..... \$ _____

3. Allowance for Utilities and Appliances \$ _____

4. Gross Rent (Total of lines 2 and 3, cannot exceed line 1) \$ _____

RENT LIMITS

	Efficiency	1 BR	2 BR	3 BR	4 BR
Fair Market Rents*	\$929	\$1,076	\$1,254	\$1,676	\$1,948

* The rents have been adjusted effective 6/15/22 by HUD.