



Victoria Long Term Recovery Group

Hope Meadows Development Application

Program Details

The information below provides information on basic eligibility requirements and how to apply for a home in Hope Meadows subdivision located at 194 Seventh St. Bloomington, TX. After reviewing this information, you may complete the attached application to be considered for this program.

Applicants must meet all the following basic criteria:

- Be a homeowner in Victoria County as of 08/25/2017 and impacted by Hurricane Harvey.
- Must apply and be denied or unable to apply because you do not meet minimum qualifications for the GLO Homeowners Assistance Program.
- Classify as a vulnerable household: (must meet one or more of the following)
 - Racial and ethnic minorities living in poverty
 - Limited English proficiency (identified as primarily Spanish speakers)
 - Persons with special access and functional needs, including hearing, vision, cognitive, ambulatory, self-care and/or independent living difficulties
 - Elderly persons (over 65)
 - Households with children under 18
 - Female heads of household
 - Veterans – (DD-214)
 - Displaced homeowners
 - Homeowners within a FEMA-designated flood hazard zone
- Have the ability to pay escrow for homeowners insurance and property taxes (approximately \$265 per month) in addition to normal utility expenses.
- Be willing to *trade* disaster property (home and land) with clear deed/title for a new home in Hope Meadows. Ownership must not be contested.
 - The applicant must own only one property and this property must have served as the homeowner's primary residence prior to the storm.
 - This requires the approved applicant to relocate to the Hope Meadows subdivision in Bloomington, TX.

Application process:

1. Complete application and gather all required documents as noted on the checklist.
 - Ensure you submit *copies* not originals of the “required documents”.
 - **Completing this application is not a guarantee you will receive services.**
2. Submit your application by mail or in person to the VCLTRG office or to your disaster case manager
 - Upon review of your application, if you are missing any documentation, you will have 15 days to submit the requested documents. If you provide the documents after this time frame, your application will be placed at the end of the list for review. If you do not submit the documents requested within 30 days of notification, your application will be closed.
 - It can take up to 1 month for your application to be reviewed based on number of applications received.

Application Review & Approval Process:

Step 1: Complete and submit your application for consideration into the program.

Step 2: A case manager with the VCLTRG assigned to this program will review your application. If your application is filled out correctly and you have all requested documents, your application will move to the next step.

Step 3: The case manager will schedule an in-person interview to continue the application process and submit additional documentation as requested.

Step 4: The Project Manager will also visit your home to complete an assessment and take photos.

Step 5: All adult household members will be screened for criminal background and sex offender registry to determine eligibility.

Step 6: The case manager will present eligible applications to the Hope Meadows Development Committee (HMDC) for an approval decision.

Step 7: Applications for approval to the program will be prioritized according to the following criteria:

- 1) Applicants whose homes cannot be rebuilt as they have been declared substandard by the City or County of Victoria
- 2) Applicants whose homes cannot be rebuilt affordably due to substantial damage and/or repetitive loss.

Step 8: Approval of application can take up to 2-3 months after submission for a determination. You will be notified of your application status promptly once a decision has been made.

Step 9: The case manager and the approved applicant will review the scope and terms of the program. If the applicant agrees, he/she will become a client and move to the construction queue.

Step 10: Upon acceptance into the program, the applicant is required to open a bank account with First Community Bank for escrow payments and attend a financial literacy class provided by First Community Bank.



Victoria County Long Term Recovery Group

Hope Meadows Development Program Application

Please complete this form to apply for the VCLTRG Hope Meadows Development Program. Fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential and only used to determine your eligibility for this program.

All Blanks Must be Completed or Filled with N/A (Not Applicable)

1. APPLICANT INFORMATION

Applicant full legal name:	
Street address:	
City/State/Zip:	County:
Email address:	Home phone:
	Cell phone:
Name and contact information of nearest relative:	

2. CO-APPLICANT INFORMATION (If applicable)

Co-applicant full legal name:	
Street address:	
City/State/Zip:	County:
Email address:	Home phone:
	Cell phone:
Name and contact information of nearest relative:	

ETHNICITY CODES – Please select number which best describes applicant’s ethnicity as identified by applicant

Hispanic / Latino	American Indian or Alaska Native <small>Indicate tribal affiliation on back</small>	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White	Two or more races	Prefer not to answer	White alone / not Hispanic or Latino
1	2	3	4	5	6	7	8	9

RELATIONSHIP CODES (to Head of Household)

Spouse / Partner	Dependent Child (under 18)	Dependent Adult	Other Adult	Prefer not to answer
1	2	3	4	5

3. HOUSEHOLD COMPOSITION - List all current members of the household. Use codes above for relationship and ethnicity.

	Name of Household Member	Relationship to HOH	DOB	Gender	Ethnicity
1.		HOH			
2.					
3.					
4.					
5.					
6.					
7.					

**Please attach a separate sheet for additional household members.*

For Office Use Only:
Date Received:



Victoria County Long Term Recovery Group

Hope Meadows Development Program Application

4. DAMAGED RESIDENCE INFORMATION - Please select the type of structure for the property.

Single Family Home
 Townhome
 Mobile Home / RV
 Other:

Address:

City, State, Zip:

How did you acquire or purchase the property?	<input type="checkbox"/> Purchased with cash	<input type="checkbox"/> Purchased with mortgage	<input type="checkbox"/> Inherited	<input type="checkbox"/> Received as gift	Other: _____
---	--	--	---------------------------------------	---	-----------------

Please answer Yes or No to the following questions:

Were you the owner of the damaged <i>home</i> on 08/25/2017?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you the current owner of the damaged <i>home</i> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the damaged home your primary residence on 08/25/2017?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently living at the damaged home?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, were you permanently displaced due to Hurricane Harvey?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the damaged property in the floodplain?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Were you the owner of the <i>land</i> where the damaged home is located on 08/25/2017?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, are you the current owner of the <i>land</i> where the damaged home is located?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any people, other than those listed in the current household, on the deed/title for the damaged property (home & land)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you had the damaged property foreclosed upon or are you in the process of foreclosure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the damaged property have any liens?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are your property taxes current or in good standing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

5. DISASTER ASSISTANCE RECEIVED

Have you applied or received any assistance for the repair or rehabilitation of your home? Yes No

If yes, please complete the table below with details on the assistance you received.

Source	Amount Received	Date Received	Status of application / claim
Homeowners Insurance (hazard, wind, flood)			
FEMA – Federal Emergency Management Agency			
SBA – Small Business Administration Loan			
ARC – American Red Cross			
SA – Salvation Army			

Other – Are you currently or at any point have you worked with a Disaster Case Management Agency? Yes or No. If yes list below:

Other:			
Other:			
Other:			

Have you retained funding received from above resources? Yes No

If you received funding, how were the funds spent?

Did your bank or mortgage holder require funds you received be used to pay your mortgage? Yes No

If the answer is yes, how much was applied toward your mortgage?



Victoria County Long Term Recovery Group

Hope Meadows Development Program Application

6. DECLARATIONS – The following questions should be answered by both the applicant and the co-applicant (if applicable).			
	Applicant		Co-applicant <input type="checkbox"/> N/A
Do you have any outstanding judgements because of a court decision against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you declared bankruptcy within the past seven years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure or judgement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you required to pay alimony or child support?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, are you current or in good standing with your payments?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a co-signer or endorser on any loan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

7. INCOME INFORMATION – Please list the names of any household members and income received monthly.		
Household Member Name	Source of Income (employment, social security, disability, etc.)	Net Monthly amount received (post tax)

8. APPLICATION CERTIFICATION – Please <i>initial</i> to confirm each statement below.		
	Applicant Initials	Co-applicant Initials
I understand the information provided above is collected to determine if I am eligible to receive assistance under the VCLTRG Hope Meadows Development Program.		
I understand that by filing this application, I am authorizing VCLTRG to evaluate my actual need for this program and my ability to afford expenses associated with homeownership in Hope Meadows.		
I understand that the evaluation will include personal visits and income verification.		
If the VCLTRG Hope Meadows Development Program provides a new home for my family and me, I agree to live there as my primary residence for at least five years.		
I have answered all the questions on this application truthfully. I understand that if I have not answered truthfully, my application may be disqualified even if I have been previously approved, and I will forfeit any rights or claims to a home in Hope Meadows. Any inaccurate or fraudulent information may result in criminal prosecution.		



Victoria County Long Term Recovery Group Hope Meadows Development Program Application

9. AUTHORIZATION & ACKNOWLEDGEMENT	
I authorize the entity to which I am applying for assistance to obtain information about me and my household that is pertinent to determining my eligibility for participation in the VCLTRG Hope Meadows Development Program.	
I acknowledge that: <ul style="list-style-type: none">• A photocopy of this form is as valid as the original; AND• I have the right to review information received using this form; AND• I have the right to a copy of information provided to the entity and to request correction of any information I believe to be inaccurate; AND• All adult household members (18 and over) will sign this form and cooperate with the eligibility verification process; AND• VCLTRG screens all applicants on the sex offender registry. By completing this application, I am submitting myself to such an inquiry; AND• By completing this application, I am submitting to a criminal background check; AND• My documents may become electronically permanent.	
<i>NOTICE: By signing this application, the applicant(s) authorizes the VCLTRG or any of its duly authorized representatives to verify the information contained herein.</i>	
Signature of Applicant:	Date:
Signature of Co-applicant:	Date:
Signature of adult household member:	Date:
Signature of adult household member:	Date:
Signature of adult household member:	Date:
Signature of adult household member:	Date:

Submit your completed application and required documents to:
VCLTRG office at 207 N Glass, St. Victoria, TX 77901
or to your designated Disaster Case Manager, if applicable.



Victoria Long Term Recovery Group

Hope Meadows Development Application

Program Required Document List

Please provide *copies* of all required documents listed below to ensure that your application will be processed in an expedited manner. Check box if document is provided.

<input type="checkbox"/>	1. Completed VCLTRG Hope Meadows Development Application
<input type="checkbox"/>	2. Copy of all household members age 18 or older driver's license or other form of photo identification
<input type="checkbox"/>	3. Copy of property (home and land) deed/title in applicant's name
<input type="checkbox"/>	4. Copy of 2018 IRS Income Tax Return for all individuals that live at the damaged property and are over the age of 18
<input type="checkbox"/>	5. Proof of all income received in home for all individuals (ex: Copy of Social Security Award letter, Disability, Retirement, Child Support, 3 months of pay stubs and bank statements)
<input type="checkbox"/>	6. Property tax records including latest payment of property taxes or payment plan documentation from the applicable county appraisal office. Ensure the list of exemptions are listed for your home (ex: Homestead Exemption)
<input type="checkbox"/>	7. Utility bill at the time of the disaster event

If applicable, please provide *copies* of all documents listed below. Check box if document is provided.

<input type="checkbox"/>	8. FEMA Award/Denial Letter – Verification of the award/denial will be requested
<input type="checkbox"/>	9. Small Business Administration (SBA) Award/Denial Letter
<input type="checkbox"/>	10. Private insurance letter – If you did not have private insurance, please complete, sign and date the attached insurance acknowledgement form
<input type="checkbox"/>	11. Letter or approval document from an “Other” agency for an award/benefit received for the repair or replacement of your damaged home, e.g., non-profit, donation grant, etc.
<input type="checkbox"/>	12. Copy of receipts for the home repairs that have been made to the damaged property
<input type="checkbox"/>	13. Child support documentation
<input type="checkbox"/>	14. Statement of Location documentation (SOL for mobile home)
<input type="checkbox"/>	15. Veteran - proof of DD-214

Private Insurance Acknowledgement Form

I (print name), _____ acknowledge that I **did not** have homeowners insurance on my property at (address) _____ on August 25, 2017 which includes hazard, wind and/or flood insurance.

Signature of applicant

Date