



July 17, 2025

RE: Application for LMI Financial Assistance - Sanitary Sewer Connection

Dear Homeowner:

Harrison County has a contract with RCAP, a non-profit organization, to coordinate the Low-to-Moderate Income (LMI) Homeowner Financial Assistance applications for CDBG grant funds on the Freeport Sanitary Sewer Project. These grant funds are awarded to help income-eligible homeowners with all or part of the cost to connect to public water or sewer systems.

Enclosed, please find the application form. Before completing, please review the income and other guidelines to determine if you are eligible to apply.

Eligibility

1) You must own and occupy the home and your name must be on the Deed, 2) Your Household Gross Income must not exceed the income limits below:

# Persons	1	2	3	4	5	6	7	8
	\$47,750	\$54,550	\$61,350	\$68,150	\$73,650	\$79,100	\$84,550	\$90,000

Items you will need to include with your application (as applicable):

- A copy of the Property Deed. Obtain from the Harrison County Recorder's Office.
- A copy of Proof of Income for every person in your home, any of the following:
 - 3 months of paystubs send complete copies of stub showing gross amount year-todate
 - o a statement from Social Security or VA stating how much is received monthly or annually.
 - o a document stating how much interest income or annuity is received.
 - o a document from the Department of Human Services stating how much a person receives in public assistance (ADC, General Relief, Food Stamps, etc.).
 - o court order for child support or other court-ordered support
 - o <u>WE CANNOT ACCEPT 1040 TAX FORMS</u>
 - o Copy of certificate of homeowner's property insurance, if applicable.

RCAP WILL BEGIN ACCEPTING APPLICATIONS ON AUGUST 1, 2025. YOU HAVE 60 DAYS TO PROVIDE A COMPLETE APPLICATION. YOU MAY CHOOSE FROM THE FOLLOWING OPTIONS TO SUBMIT YOUR APPLICATION:

- E-MAIL your completed application in PDF format to: wbmartens@glcap.org
- MAIL your completed application to: Great Lakes Community Action Partnership, Attn: Ben Martens, 127 S. Front St., P.O. BOX 590, Fremont, OH 43420.

IMPORTANT: COMPLETE APPLICATIONS MUST BE RECEIVED NO LATER THAN OCTOBER 1, 2025

Harrison County/Village of Freeport CDBG PROGRAM APPLICATION FOR ASSISTANCE LMI HOMEOWNER SEWER CONNECTION

Instru	JCTIONS: PLEASE	FILL OUT AI	====== LL SECTIC	ONS COMPLETE	ELY ANI	SIGN PA	====== .GE 3	
A. HOUSEHOLD MEM	IBERS (For all	those living	at the add	dress for the s	ewer ho	ookup)		
APPLICANT NAME	SC	CIAL SECU	RITY #	ŧ				
ADDRESS				<u></u>			OH	
ADDRESS_ HOW LONG AT THIS A	ADDRESS?			TELEP	HONE	#		
CO-APPLICANT NAME	E			SOCIAL	SECU	RITY #_	ЭН	
ADDRESS HOW LONG AT THIS A	ADDRESS?			TELEPI	HONE#	, ` ‡		
								purposes only
Name	Marital S	arital Status Sex		Relationship to Applicant		Age	Race	Handicapped (please specify)
				- self -				
PLI	EASE LIST ADDITI	ONAL HOUSE	EHOLD MI	EMBERS ON A S	SEPARA	TE SHEE	Γ.	
B. INCOME SOUR	CFS							
Proof of income must be statements may be used a	provided for the							
Applicant:			_					
Employer's				nployer's				
	name			name				
Address				Address Occupation				
Occupation Monthly Salary							nthly Salary	
From: To:			From: To:			itiliy Salary		
110111.			110	JIII. 10	<u>'•</u>			
Co-Applicant's employm	ent (if applicable	e).						
Employer	, , , , ,		En	nployer				
Address			Ad	Address				
Occupation			Oc	cupation				
Employment Dates	Mon	nthly Salary	En	nployment Da	ites		Moi	nthly Salary
From: To:				From: To:				- ·

Indicate which sources	of income your	household me	embers receive	with an X alon	g with the montl	hly income as
follows:	•					•

INCOME SOURCES	Applicant	Co-Applicant	Other Household Members	Monthly Total
Gross Income:				
Base Employment				
Overtime				
OWF (ADC) or DA GR)				
Unemployment				
Social Security				
Veteran's Pension				
Pension				
Dividends				
Interest Income				
Rental Income (Address)				
Other:				
Child Support				
Alimony				
Other Income (explain)				

Location of Rental Property that you own.	Monthly Income:		
Copies of checks, verification letters or notariz	ed statements may be used as pro-	of of income.	
C. INSURANCE INFORMATION			
Amount of Insurance on Home	Insurance Agent		
Dlagge attack conv. of Contificate of Ingurous	os with this application		

Please attach copy of Certificate of Insurance with this application.

D.	PROPERTY OWNERSHIP
Owner	on Record

Attach copy of Property Deed with the application.

E. CERTIFICATION BY APPLICANT (S)

PLEASE READ THE FOLLOWING STATEMENT. IF YOU DO NOT UNDERSTAND ANY PART OF IT OR HAVE ANY QUESTIONS ABOUT WHAT YOU ARE ASKED TO SIGN, PLEASE ASK FOR ASSISTANCE. BOTH APPLICANTS MUST SIGN IN INK BELOW.

I certify that all the information in this application is true and complete to the best of my knowledge. I understand this information is subject to verification.

The Applicant (s) further certify that she/he is the owner of the property identified in this application and that any and all funds provided to the Applicant (s) will be used for the labor, material and fees necessary to connect to the public water or sanitary sewer system and/or eligible assessment costs associated with the construction of the water or sanitary sewer project.

I authorize this agency or its representatives and designees of the Ohio Development Services Agency and the U.S. Department of Housing and Urban Development (HUD) to inspect and evaluate actual services provided to me. I understand that any and all information provided in this application may be used for that purpose.

I understand that the personal financial information contained in this application is necessary for the evaluation of my application. This information, however, will remain confidential and will not be disclosed to the news media or other third parties. I further understand that my name, address and total amount of assistance will be subject to public disclosure since public funds are being used to provide assistance.

PENALTY FOR FRAUDULENT STATEMENT: U.S.C. Title 18, Section 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies...or makes any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

Signature of Applicant	Date
Signature of Co-Applicant	Date

RETURN APPLICATION and REQUIRED DOCUMENTS TO:

Great Lakes Community Action Partnership
Attn: Ben Martens
127 S. Front St.
P.O. Box 590
Fremont, OH 43420
or
wbmartens@glcap.org



Village of Freeport Sanitary Sewer Project

CDBG - Low/Moderate Income (LMI) - Homeowner Connection Assistance Program -

Frequently Asked Questions and Answers

1. Q - If I qualify, what work can be paid for with grant money?

A - **The grant can pay for:** pumping your existing tank, crushing the top, filling it with gravel, running the sewer line from your house to the street sewer line, the permit/inspection fee. Your connection fee (tap-in fee) may also be paid from the grant. <u>Grant funds may be capped</u> if costs exceed the amount of funds needed to assist homeowners, or the county may choose to spend the funds only on the connections. You will be notified as soon as possible regarding what will be paid.

2. Q - How will you determine my income?

A - We will need proof of our income for this tax year. **We need all sources of income for the past twelve (12) months.** Provide a copy of your "Statement of Benefits" from all sources if you receive monthly payments, including any retirement income. If employed, provide check stubs with Y-T-D income if you have been working the same job since January 1. Any adult in the household not employed will need to provide a signed and dated written statement to that effect.

3. Q - What else, other than proof of income, will be needed to qualify for the grant funds?

A - You will need **a copy of your deed** that clearly states the name(s) of the owner(s) of the property and the address of the property. It should have a stamp it was filed with the county.

4. Q - Can any contractor do the work?

A - No, only contractors on the approved installers list can be used.

5. Q - Where can I obtain a copy of the approved installer's list?

A - RCAP will enclose a list when you are sent your letter stating that you qualify for the grant.

6. Q - What if I'm doing the work, can I get grant money to pay myself?

A - No, only work being done by a contractor who is listed on the approved installer list can be paid from the grant funds. Homeowners are usually not permitted to do the work themselves when funding agencies are involved.

7. Q - How much will it cost?

A – Costs vary depending on distance, location of tap, and factors such as obstacles along the line.

8. Q - If I rent am I responsible for the connection?

A - No, only the homeowners are responsible for paying for the new connection.

Q - If I own a home and have another that I rent, can I get a grant for both?

A - No, only for one structure that you own. Grants only go to <u>owner – occupied</u> residences.

10. Q - What if I'm buying my house on land contract, am I eligible?

A - You are eligible if the land contract has been filed with Harrison County.

11. Q - Will the permit/inspection fee be paid for the grant money?

A – Permit/inspection fees are an eligible cost, but it depends on what the county decides.

12. Q - Do churches, businesses, fire departments, lodges, grange halls, libraries, or any of these types of

entities qualify?

A - No, only owner-occupied residential dwellings qualify for grant money.

13. Q - Will I receive a check for the grant money?

A - No, once your connection is completed and I have received the required paperwork, RCAP will work with the respective counties to request your payment to the contractor. The county will receive the grant money, and the county will send the contractor a check paying for the work on your property.

14. Q - How long will it take to get my contractor paid?

A - Approximately 4-6 weeks, depending on if the county will wait to be reimbursed from the state.

15. Q - Is there a maximum amount I can receive if I qualify?

A – Not at this time, but there is only \$200,000 available for all the Low-Moderate Income individual connections, so if there is more work than we can pay for from these funds, those homeowners in the lowest income bracket will receive the assistance first, until all funds are expended.

16. Q - What if I don't have a copy of my deed?

A - You should be able to get a copy of your deed from Harrison County.

17. Q - Do I have to sign a contract with the contractor who is doing my work?

A – You and your contractor will be asked to sign an Agreement. Once the work is completed and inspected, the contractor will be paid for his or her work.

18. Q - Does the Village of Freeport assume liability for any work on my private property?

A - No, the contract is between the homeowner and the contractor. All liability is between the contractor and the homeowner. Contractors are bonded with Harrison County.

19. Q - What specifications does my contractor need to follow?

A - Your contractor needs to follow the specifications and connection diagram distributed by Harrison County, which is posted on their website.

20. Q - Who do I contact with questions regarding the Individual Connection Grant?

A – This program is being coordinated by Ohio RCAP. Contact information will be included in the application packet. This is only for the LMI Grant Program and not for any questions better suited for a contractor, the village, or regional authority. You will receive an Approval or Denial Letter from the RCAP office in approximately 45 days. Please make sure your phone number is included so that you can be reached with any questions about your application.