



# 2026 EXTERIOR HOME REPAIR GRANT APPLICATION

Applicants must meet **ALL** program and income guidelines to participate. Only one grant application per household. Below is an outline of program guidelines and instructions to apply. **Grant limit: \$2,500**

**Incomplete applications will NOT be accepted.**

## GRANT PROGRAM GUIDELINES:

- This is a first come, first serve grant and approval is based on how fast you submit all your documents.
- Project must be an exterior repair, nothing new, on an owner-occupant property. Rentals not allowed.
- Property must be the owner’s primary residence for at least one year at time of application.
- Property taxes must be current or in an approved Cuyahoga County repayment plan.
- The property cannot be listed for sale at the time of application NOR completion of project.
- Grant funds cannot be used to address open/current Point-of-Sale violations.
- Applicant must not have received any grant funds from this program in year 2024 and year 2025.
- Applicant must have current homeowner’s insurance policy on property.
- Grant funds cannot be used for repair projects where work has already started.
- **Applicant must obtain Three (3) comparable project estimates for repair projects over \$500.**
- A homeowner contribution of 10% of the total project cost OR the overage above grant amount is required, whichever is greater.

Household gross income must be at or below the federally established income limits:

### 2026 Income Eligibility Guidelines Chart (effective date April 1, 2025)

#### *Household Size with Maximum Income Limit*

1	\$55,650	5	\$85,900
2	\$63,600	6	\$92,250
3	\$71,550	7	\$98,600
4	\$79,500	8	\$104,950

## APPLICATION INSTRUCTIONS:

Submission must be the ENTIRE completed application and ALL supporting documents listed on next page.

1. Submit full application packet by ONE of the following:
  - **Mail:** Maple Heights City Hall, 5353 Lee Road, Maple Heights, Ohio 44137
  - **Email:** aholloway@mapleheightsohio.gov (**PDF version only**)
  - **In Person:** Building & Housing Division lobby, 1<sup>st</sup> floor City Hall

Applications will not be reviewed at the time of drop-off. Copies of submitted documents will not be provided. **If anyone needs assistance with completing an application please call and schedule for an appointment.**

**QUESTIONS?** Call Ashley R. Holloway, Housing Administrator at (216) 587-9026

## Supporting Documents Checklist: Provide one item from each category

**Missing items will delay or deny your application.**

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### Application Required Documents:

- 1. Signed Application *with all information completed*
  - 2. Signed Homeowner Responsibilities Checklist (*make sure to read completely and sign*)
  - 3. Signed Lead Certification form – A lead inspection is NOT required; Complete form to the best of your knowledge.
  - 4. Three (3) comparable project estimate bids from three (3) different contractors.
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### Supporting Documents (applicant to submit along with application) **\*\*DO NOT SUBMIT ORIGINALS\*\***

**Proof of Income:** Please submit documents showing your household **Gross** monthly income. Every household member over the age of 18 must provide proof of income.

- If you receive monthly income, submit (all that apply):
  - pension and/or social security statements showing current monthly benefit amount
  - 90 days of consecutive pay stubs
  - rental receipt(s) **OR** signed lease for rental income
  - proof of other income (e.g. dividends from stocks, alimony, child support, etc.)
- If you are unemployed, submit:
  - Notarized Declaration of No/Zero Income letter
  - Current/most recent year tax return **OR** IRS Form 4506-T
- If you are self-employed, submit:
  - Most recently filed 1040 including all schedules

### Proof of Self:

- Copy of driver's license, state ID, birth certificate, **OR** passport. (choose only one to submit)

### Proof of Residency:

- Copy of most recent gas, electric, **OR** phone bill; must show applicant name and address (Choose only one to submit)

### Proof of Homeowner's Insurance:

- Copy of Declaration Page showing current policy coverage term

### Contractor Estimates:

- Copy of three (3) comparable estimate bids for the work described in the project description. Only one (1) estimate bid is required if the total project cost will be less than \$500.

### Please note:

- If approved, you will receive written notification of approval. Funds ARE NOT reserved at the time of approval.
- Work cannot commence until a Notice to Proceed is released for the project. Funds ARE reserved at this point.

# 1. APPLICATION – HOME REPAIR GRANT PROGRAMS

NAME OF HOMEOWNER(S): \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

PHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_ PROPERTY TAXES CURRENT? \_\_\_\_\_

TYPE OF HOME:  Single-family  Multi-Family (if so, is other unit currently occupied? \_\_\_\_\_)

\*Rental receipts **OR** copy of signed lease required\*

EMERGENCY CONTACT NAME: \_\_\_\_\_ PHONE# \_\_\_\_\_

How did you hear about the program?  City Staff  Internet  Other \_\_\_\_\_

DESIRED PROJECT DESCRIPTION:  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever received City of Maple Heights home repair grant funding?  Yes  No If yes, what year? \_\_\_\_\_

Are you currently a defendant in Mayor's Court for exterior violations?  Yes  No

## HOUSEHOLD INFORMATION

How many people reside in the home? \_\_\_\_\_

List below **ALL** persons living in the house (including yourself) and **income received for all occupants over 18 years of age.**

NAME	BIRTHDATE <i>(mm/dd/yyyy)</i>	PAY FREQUENCY <i>(Weekly, bi-weekly twice a month, monthly, etc...)</i>	MONTHLY <u>GROSS</u> INCOME <i>(Amount BEFORE taxes and deductions)</i>

\*Use an additional sheet of paper if more space is needed.

I certify that the information provided above is true and correct to the best of my knowledge and I understand any false statement will be grounds for the immediate termination of my application and subject me to civil and criminal liability.

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

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

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

## 2. HOMEOWNER RESPONSIBILITIES

**READ COMPLETELY AND SIGN BELOW**

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### Application & Approval Phase

1. Submit application and ALL required supporting documents, including three (3) estimates.
2. If application is complete, you will receive an acceptance letter for notification. Funds **are not** set aside at this point.
3. Select contractor and inform Housing Administrator of your selection.
  - a. *Always check references first!*
  - b. Selected contractor must be registered with the City or obtain registration prior to release of Notice to Proceed.
4. Wait for the written Notice to Proceed from the City. Funds **are** then set aside at this point.
5. An award letter stating grant approval will be sent.

### Construction Phase

6. Schedule project start date with contractor. **Work cannot commence prior to a Notice to Proceed letter.**
7. Make sure the contractor has all needed permits and approvals **BEFORE** work starts.
8. **Monitor work!** Remember, it is your responsibility to be on-site and oversee work. Contact Housing Administrator immediately at 216-587-9026 if you have any concerns while work is underway. **Don't wait until the job is complete!**
9. If there are any changes to the original project cost, the homeowner and City should be notified in writing prior to moving forward with repair work.

### Payment Phase

10. Once work is complete, it will be inspected:
  - a. Did the work require a permit?
    - i. If so, Contact SafeBuilt to schedule an inspection.
    - ii. If not, Contact Housing Administrator to schedule a post-inspection.
11. If satisfied with completed project, applicant must sign Client Satisfaction letter which will be provided after post-inspection. Payment to the contractor is contingent upon successfully passing inspection(s).
12. Homeowner portion of payment must be paid in full directly to the contractor.
13. Contractor should submit final invoice to the City for release of grant funds. No payments will be generated until all permit inspections and sign-offs have been received.

**Again, grant funds ARE NOT set aside for you until you received the *Notice to Proceed* letter.**

**I have read the above and understand my responsibilities to participate in the City's Home Repair Grant program.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

### 3. LEAD CERTIFICATION FORM

**A lead inspection is not required. Complete form to the best of your knowledge**

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NAME OF HOMEOWNER(S): \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

PROPERTY ADDRESS:

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TYPE OF HOME: Single-family Multi-Family

***Lead-based Paint Warning: "Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not taken care of properly. Lead exposure is especially harmful to children and pregnant women."***

Was house built prior to 1978?  Yes  No

Are there children in the household age 5 years or younger?  Yes  No

Has paint testing, a lead inspection, or a risk assessment been performed at the property?

Paint testing  Yes  No      Lead Inspection  Yes  No      Risk Assessment  Yes  No

(If age 5 years or younger) Has testing been done?  Yes  No

If yes, Please list their names: \_\_\_\_\_

Existing elevated blood lead level? -  Yes  No

**(For any "yes" response, a copy of the report must be provided to city as part of the application.)**

***To City of Maple Heights:***

***I/we certify that the above information is true; and if there are children in the household age 5 years or younger I will request a copy of the booklet "Protect Your Family from Lead in Your Home" from the EPA.***

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*\*Remember, incomplete applications will not be considered\*\***

# WAIT.....

BEFORE YOU TURN IN YOUR APPLICATION,  
PLEASE READ, CHECK OFF, AND SIGN THIS PAGE.

- I UNDERSTAND THIS IS A FIRST COME, FIRST SERVE APPLICATION PROCESS.
- I UNDERSTAND I MUST MEET ALL THE CRITERIA TO QUALIFY FOR THE GRANT.
- I UNDERSTAND THE GRANT AMOUNT IS UP TO \$2,500 BUT THE EXACT AMOUNT AWARDED TO ME IS BASED ON MY PROJECT COST.
- I UNDERSTAND IF I'M AWARDED THE GRANT, I MUST PAY EITHER 10% OF MY PROJECT COST OR PAY THE REMAINING BALANCE AFTER GRANT IS APPLIED.
- I UNDERSTAND GRANT FUNDS ARE NOT GUARANTEED FOR ME UNTIL I RECEIVE THE NOTICE TO PROCEED LETTER.
- I ENCLOSED THREE (3) ESTIMATES FROM THREE (3) DIFFERENT CONTRACTORS.
- I PROVIDED PROOF OF INCOME.
- I PROVIDED A RECENT UTILITY BILL (JUST ONE).
- I PROVIDED PROOF OF SELF.
- I PROVIDED MY HOMEOWNERS INSURANCE DECLARATION PAGE.
- I UNDERSTAND MY PROJECT MUST START WITHIN THREE (3) WEEKS OF RECEIVING THE *NOTICE TO PROCEED LETTER* OR ELSE I AM NO LONGER ELIGIBLE TO RECEIVE THE GRANT.
- I READ, UNDERSTAND, COMPLETED, AND SIGNED ALL APPLICATION PAGES.

SIGNATURE: \_\_\_\_\_

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

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED!!!**