



City of Pomona Housing Division CalHome Manufactured Housing Rehabilitation Loan Program

The Housing Division of the Community Development Department is accepting applications for the City of Pomona's CalHome Manufactured Housing Rehabilitation Loan Program. Applications will be accepted on a first-come, first-serve basis.

This Program helps provide funding for very-low to low-income mobile home homeowners with a deferred, zero interest rehabilitation loan of up to \$25,000 for a 20 year period. The loan is available to help correct code violations, address Health and Safety Issues, and improve the conditions of the property.

The Manufactured Home must be owner-occupied and located in one of the designated parks in the City of Pomona. (Big's, Foothill Village, Hi-Fi, Hillview Park, Park Vista Estates of Pomona, Pomona Islander, Valley Central Trailer Estates, Walnut Hills, and Westland Estates). Funding is available on a first- come, first-served basis.

Property owners gross household income must not exceed 80% of Area Median Income for Los Angeles County (low income) as published annually by the US Department of Housing and Urban Development (HUD) and the California State Department of Housing and Community Development. *Current chart limits below

Low-Income Limits		Effective April 15, 2015	
1 Person	\$47,850	5 Persons	\$73,800
2 Persons	\$54,650	6 Persons	\$79,250
3 Persons	\$61,500	7 Persons	\$84,700
4 Persons	\$68,300	8 Persons	\$90,200

All completed forms may be returned to the Housing Division at the City Hall in person or by mail to:
City of Pomona Housing Division
CalHome Manufactured Housing Rehab Loan Program
505 S. Garey Avenue
Pomona, CA 91766

You will be notified by mail whether your preliminary application is approved and you are placed on the waiting list. When we are ready to service you, an application package will be mailed to you.

If you have any questions, please contact the Housing Division at (909) 620-2368 or 620-3630.



CITY OF POMONA HOUSING DIVISION
CALHOME MANUFACTURED HOUSING
REHABILITATION LOAN
Preliminary Application Form

Applications will be received on a first-come, first-serve basis

APPLICANT INFORMATION

Homeowner
 Name _____
 Address: _____

 City: _____ Zip: _____
 Applicant Employed by : _____
 Home Phone #:() _____ Work #:() _____
 Are the homeowners occupying the property as
 their principal residence? ___ Yes ___ No

Co-Owner Name: _____
 Co-Applicant Employed by : _____
 Home Phone #:() _____ Work #:() _____

Please list the exact owner(s) of the manufactured
 homes as shown on your Registration Card:

Total number of people in your household: _____ Number of Dependents: _____
 Ages: _____

INCOME Total Household Annual Income: _____

Indicate **all sources of income** earned by each individual in your household. Documentation will be
 requested later for verification if applicant is eligible.

Name	Employer/Income Source	Monthly	Annually
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

MORTGAGE INFORMATION

Amount Owed: _____ (First Trust Deed) Name of Lender: _____
 Year Purchased: _____ Original Purchase Price: _____

DATA ON PROPERTY

Mobile Home Park where unit is located: _____
 Age of Structure: _____ Estimated Value: \$ _____ No. of Bedrooms: _____
 Check one: ___ Single Wide ___ Double Wide ___ Trailer/Travel Coach No. of Bathrooms: _____
 HCD Decal #: _____

LIST HOME IMPROVEMENTS REQUESTED

Exterior: _____

Interior: _____

List any building/ zoning, code violations that you are aware of: _____

Signature _____ Date _____

Signature _____ Date _____

Please submit in person or by mail to:

For questions, please
 call (909) 620-3630 or
 620-2368

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 CalHome Manufactured Housing Rehabilitation Program
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