City of Boston - AFSCME Council 93, AFL-CIO Housing Trust Fund Application and Affidavit for Home Improvement Funds

Qualified AFSCME members in good standing who are homeowners are eligible to apply for home improvement assistance to cover housing improvement related expenses as outlined in the Eligibility Criteria.

The home improvement loans are provided through the City of Boston Credit Union and repaid by the member through payroll deductions to the Credit Union. The maximum home improvement loan amount is \$5,000.00.

You must be or be eligible to become a member in good standing of the City of Boston Credit union to receive the home improvement loan funds.

Please mail or drop off this application to:

City of Boston - AFSCME COUNCIL 93, AFL-CIO Housing Trust Fund 8 Beacon Street, 8th floor Boston, MA 02108

Date:		
Name:		
City of Boston Employee ID Num	nber (found on check stub):	
Home Address:		
Do you own this property?	Yes □ No □	
Primary Phone:	Home email:	
Work Phone:	Work email:	
Best way to reach you (time of da	y, phone, email):	
Department and Work Site:		
Job title:		
Current base weekly salary, exclu-	ding overtime:	
In the past, have you received assi	istance from the Trust?	
No □ Yes □		
If yes, when did you receive assist	tance (date)?	

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For what Purpose? (circle all that apply) Rental Loan, Emergency Loan, 1st time								
Homebuyer Grant, Home Improvement Grant, Home Improvement Loan								
Are you still <u>repaying</u> the Credit Union for a Trust assisted loan?								
No □	o □ Yes □							
	bt must be repaid before you s receive a total of 2 Trust loan.	ubmit an application for additional funds. s in a 3-year period.)						
Describe the nature of your home improvement (please check off all that apply):								
□ Remodel K □ Remodel B □ Replace boo □ Painting □ Masonry □ Siding/Roo	athroom(s) ilers/furnaces/radiators	☐ Carpentry ☐ Windows ☐ Electrical Work ☐ Fences ☐ Plumbing ☐ Other (Please explain)						
Have you alrea	ady completed this project? N	Io □ Yes □ When (date)?						
-	\$5,000 Amount Requested \$							
Are you plann (Please attach	ing on hiring a contractor? Ye estimates)	es □ No □						
• •	ing on doing the project yours fill out the attached workshee							
When is your projected start date for the project?								
When is your projected end date for the project?								
-	opropriate documentation, e.g. urther documentation may b	, a bill, a contractor quote or other estimates. e required.						
ATTACH: A	Il copies of receipts and paid is	nvoices.						
ATTACH: A	copy of your deed.							
ATTACH: Th	ne completed Do-It-Yourself v	vorksheet (if required).						
ATTACH: Y	our most recent pay stub.							
ATTACH: Your "member in good standing letter" received from AFSCME Council 93 or your Local President or delegate, and issued within the past six months.								

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The undersigned hereby certifies to the Trust that the preceding information is accurate, truthful, and correct, and acknowledges that the Trust is relying upon this certification to provide Trust funds.

Default of this loan prohibits the undersigned from receiving any other benefits from the Trust.

I understand and agree to repay the loan in its entirety regardless of my employment status with the City of Boston.

I agree to repay the loan through payroll deduction as long as I am employed by the City of Boston.

I understand and agree that the Credit Union can share any information, notices and/or documentation associated with the member's Trust assisted loan.

I agree to hold harmless and indemnify the Trust and the Trustees for any false or misleading statements or representations made in my application to the Trust and/or to the Credit Union.

Signature of Applicant:		
For Trustee use only:		
Reviewed by:		
Date:	_	
Approved by Trustees on	(date)	
Not approved by Trustees on	(date)	
Commitment letter cent on	(data)	

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Worksheet for Do-It-Yourself Home Improvement

☐ Windows	oply and fill out ☐ Carpentry ☐ Electrical Wo ☐ Masonry	ork 🗆 F	Remodel Bathr Fences			
Painting: Rooms: □Bathroom □Bedroom □Kitchen □Living Room □Dining Room □Exterior □Other Estimated amount of paint (in gallons)						
Kitchen Remodel: Supplies needed: □Cabinets	□Hardware	□Paint	□Flooring	□Appliances		
Bathroom Remodel: Supplies needed: □Cabinets	□Hardware	□Paint	□Flooring	□Appliances		
Fences (please be sure to check your property line prior to installing a fence): Estimated length of fence:						
Windows: Number of Windows being replaced:						
Plumbing: Supplies needed:						
Electrical:						
Supplies needed:						
Masonry:						
Supplies needed:						
Carpentry:						
Supplies needed:						
Other:						
Supplies needed:						

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