



Southeast Rural Community Assistance Project, Inc.
SERCAP Individual Programs Application

Low-interest Loans/Grants for Wells, Septic Systems, and Home Improvement

SERCAP has Low interest loans and grants available to construct, refurbish or replace individual water well systems, septic systems, or home improvements!



General Program Requirements

- Residence must be in an eligible rural area, town, or community in SERCAP's seven state service area.
- Applicants must own (or provide recorded Lifetime Rights) and occupy the home being improved.
- New home construction and community water systems are not eligible.
- Household income may not exceed the state median income limit.

Please contact SERCAP staff for further information: (540)345-1184

Please mail all correspondences to the following address:

Southeast Rural Community Assistance Project, Inc.
347 Campbell Ave. SW
Roanoke, VA 24016

If any additional information is requested it must be sent to us within TEN (10) business days, or your application will be denied.

Application fee is non-refundable, whether approved or denied from assistance.



SERCAP Individual Programs Application

Please Check the Box Next to the Program to which You are Applying:

- Individual Well Loan Program:** (DE, MD, VA, NC, SC, GA, FL) - \$30.00 Application Fee per Applicant. SERCAP's Individual Well Loan program can be used for repairs, upgrades, or drilling of a new well for an Existing Home Only - Cannot be Used on New Construction.
 - Applicant must own and occupy the property
 - Maximum loan amount \$11,000
 - 1% fixed interest rate, for the duration of the loan term 5-10 years
 - Well MUST BE ATTACHED to Applicant's House/Property - Program CANNOT be Used for New Construction

- Septic Loan & Home Improvement Loan Program:** (VA & DE Only) - \$30.00 Application Fee per Applicant. SERCAP's Septic Loan Program can be used for the repair, upgrade, or installation of a new septic system.
 - Applicant must own and occupy the property
 - Maximum Loan Amount up to \$15,000 for the construction of a new septic system, or repairs/upgrades to an existing system
 - Maximum Loan Amount up to \$15,000 for repairs or modifications to a home, that increases the health, safety, and/or standard of living

Information Needed for Application: Well, Septic & Home Improvement

- 1 months most recent bank statements (all pages)
- Copy of at least 1 months most recent pay stubs, and/or award letter
- If Self-employed 2 years of signed tax returns (all pages)
- Copy of Federal or State issued photo identification, such as a driver's license
- Copy of Social Security Card
- Two written estimates from licensed & insured contractors
- Copy of Deed to property
- Certificate of Title of mobile home (if applicable)
- Latest Proof of Payment for Real Estate Taxes
- Copy of Homeowners Insurance
- Application fee(s), please send the corresponding fee amount for the program you are applying for.
- Application fee is per applicant - Please make the check or money order paid to the order of SERCAP, Inc.

If approved applicant may be required to pay a title search fee that may range from \$150-250, dependent on circumstances.

Please Check the Box Next to the Program to which You are Applying:

IPR/Housing Programs: Available Only In Specific Counties: No application fee

- Program Income: (General Home Repairs): Amherst, Botetourt, Buckingham, Caroline, Clarke, Floyd, Frederick, Lunenburg, Montgomery, Prince Edward, Prince George, Pulaski, Roanoke, Rockingham, Shenandoah, Suffolk, and Wythe.
- County Funds: (Water/Wastewater/ADA Ramp): Alleghany, Amelia, Bath, Bland, Buckingham, Dinwiddie, Fauquier, Fluvanna, Northampton, Northumberland, Page, Pittsylvania, Pulaski, Roanoke, Rockbridge, Southampton, and Surry.
- IPR (No indoor bathroom/Indoor plumbing, failed septic system, or non-potable water): Augusta, Albemarle, Buckingham, Fluvanna, Greene, Highland, Louisa, Nelson, Page, Rockingham, and Shenandoah.

N.B. Please Note the Contractors for the IPR Program MUST BE Lead Certified.

Information Needed for Application: Housing Programs

- 2 months most recent bank statements (all pages)
- Copy of at least 2 months most recent pay stubs, and/or award letter
- Copy of at least 2 months Bills - Mortgage, Utility Bills, etc.
- If Self-employed 2 years of signed tax returns (all pages)
- Copy of Federal or State issued photo identification, such as a driver's license
- Copy of Social Security Card
- Copy of Deed to Property or Proof of Lifetime Rights
- Certificate of Title of mobile home (if applicable)
- Latest Proof of Payment for Real Estate Taxes
- Two written estimates from licensed & insured contractors
- ***(N.B. Please Note that NO ESTIMATES are Required for the IPR Program)***
- Copy of Homeowners Insurance

If approved applicant may be required to pay a title search fee, ***Costs May Vary***, dependent on circumstances.



SERCAP Individual Programs Application

Applicant Information:

Name (include Jr. or Sr. if applicable): _____ Email: _____

Telephone Number: _____ Cell Phone Number: _____

Address: _____ City, State, Zip: _____

County: _____ Community/Area Name: _____

Mailing Address, if different from above: _____

Do you currently own and live in the home where the work will be completed: Yes No

If not, explain: _____

How long have you been at this address? _____

Type of home where the work will be completed: Stick Built Manufactured Mobile

Brief well/water system history and/or problem to be corrected with the loan/grant:

How did you hear about the loan/grant program? _____

LOAN/GRANT REQUESTED \$ _____ MONTHLY PAYMENT REQUEST (\$) _____

NOTICE: The federal Equal Opportunity Act Prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from an public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administer compliance with this law concerning this creditor is the Federal Trade Commission, Division of Credit Practices, 6th and Pennsylvania Avenue, NW, Washington, D.C. 20580



SERCAP Individual Programs Application



Household Information: Complete the Chart for All Members of the Household

	Full Name (List Head of Household First)	Social Security #	Relationship to Applicant*	Date of Birth* (mm/dd/yyyy)	Male/Female
1					
2					
3					
4					
5					
6					
7					

Household Income Information: Complete the Chart for All Members of the Household

Source of Income	Applicant (\$ Amount)	Co-Applicant (\$ Amount)	Other
Wages, Salaries, Tips, Business Income			
Social Security			
VA Benefits			
Other Disability Benefits			
TANF/Food Stamps			
Child Support/Alimony*			
Pension			
Rental Income			
Other (Specify):			
Other (Specify):			

Household Debt Information: Complete the Chart for All Members of the Household

Total Debt/Loans	\$ Amount	Monthly Payment	Total Debt/Loans	\$ Amount	Monthly Payment
Mortgage Loan(s):			Other (Specify):		
Total Auto Loan(s):			Other (Specify):		
Total Credit Card(s):			Other (Specify):		



SERCAP Individual Programs Application

Other Household Characteristics

This information is for administrative purposes, and is not used to determine whether or not you are granted assistance. Please complete the following fields with the number of persons in the home whom receive, qualify, or have obtained the following (Please Check All that Apply):

Have Health Insurance

Veterans

Receiving Food Stamps

Disabled

Income Verification:

Please provide information for your current employment. If unemployed put N/A. If receiving Social Security, Disability, SNAP/EBT, Food Stamps, etc., please provide a copy of award letter for verification of benefit(s). If you are choosing to list child support, or alimony as income please include award documentation, and proof of receipt of payment.

Does either applicant own any other real estate? Yes No

If yes, please list: _____

Applicant's Employer Name: _____

Applicant's Employer Address: _____

Business Phone # _____ Business Fax # _____

Years on this Job: _____ Position/Title/Type of Business: _____

IF APPLICANT LEGALLY MARRIED, SPOUSE MUST CO-SIGN:

Co-Applicant's Employer Name: _____

Co-Applicant's Employer Address: _____

Business Phone # _____ Business Fax # _____

Years on this Job: _____ Position/Title/Type of Business: _____

Co-Applicant Phone Number(s): _____

Driver's License #: _____ Date of Birth: _____



SERCAP Individual Programs Application

Contractor Information

- Minimum of 2 (two) estimates in writing are required - Contractor must be Licensed and Insured
- For Loans - Contractor must be Bonded
- For IPR/Housing Program Applicants ONLY - Estimates MUST Be Obtained from Lead Certified Contractors

List Contractors Supplying Estimates:

Contractor 1: _____ Federal ID/Social Security #: _____

Contractor 2: _____ Federal ID/Social Security #: _____

For Housing Programs, we must use the lowest estimate. If approved for a loan you have the right to use the contractor of your choice. If approved which contractor supplying an estimate do you choose?

Name of Contractor Choice: _____

It is a criminal offense under the Code of the United States to make willful false statements or misrepresentation of any information provided in the completion of this application.

I have reviewed the information recorded, and attest that to the best of my knowledge, nothing requested has been omitted or misrepresented on this application.

I also certify, swear and affirm that I have not been debarred or banned from participating in any federal, state or local government programs.

CERTIFICATION AND CONFIDENTIALITY

My signature below grants permission to Southeast RCAP, Inc. or it's designated agent to verify any or all information contained herein with respect to this application for assistance. I understand the information in this application is strictly confidential, and is provided solely for the purpose of determining my eligibility under this program. No information contained herein will be released to any other local, state, or federal agency for any purpose without my expressed written consent, except as it may pertain to my receipt of the funding resources made available through this application.

I authorize you to make whatever credit inquiries you consider necessary concerning the statements made in this loan/grant application. I agree that the application shall remain your property whether or not the loan/grant is granted. I also agree that you may give information regarding my experience with you to credit bureaus and other proper persons. Under penalties of perjury, I certify that I have provided my correct Social Security/Taxpayer Identification Number.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____



SERCAP Individual Programs Application

CERTIFICATION

The undersigned applicant(s) hereby certifies to the best of his/her knowledge that the information provided in this application is correct. The applicant(s) is the owner and occupant of the property, for which he/she is applying for a loan/grant, for the property located at: _____

The undersigned further understands that Southeast Rural Community Assistance Project, Inc., will pay the requested loan amount to the contractor and the undersigned is responsible for any balance due the contractor assigned to the project on the property described above. Contractor MUST receive SERCAP approval before work can begin.

In consideration for any loan proceeds paid on behalf of the applicant, the undersigned hereby releases and agrees to indemnify and hold harmless SERCAP and its authorized representatives and the referring agency and its authorized representatives from any and all liability in connection with the performance of the repairs and/or improvements.

The undersigned agrees to provide Southeast RCAP, Inc., access to the property at a reasonable time for the purpose of inspecting the work and conducting follow-up visits if desired or necessary.

RELEASE FORM

The routine release of information concerning applicants is covered under the Privacy Act of 1974. From time to time Southeast Rural Community Assistance Project, Inc. (SERCAP) uses services of other agencies to assist the applicant.

I, the undersigned, do give

I, the undersigned, do not give

Southeast Rural Community Assistance Project, Inc. (SERCAP) or its designee and the referring agency, its staff, or authorized representative's permission to release information contained in my file to help provide the services.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____



Civil Rights and Equal Opportunity

The following information is requested by the Federal Government in order to monitor the Recipient's compliance with Section 504 of the Rehabilitation Act of 1973, The Americans with Disabilities Act of 1990, Title VI of the Civil Rights Act of 1964, and the Age Discrimination Act of 1975.

You are not required to furnish this information, but are encouraged to do so.

The law requires that the Recipient may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations the Recipient is required to note race and sex on the basis of visual observation or surname.

If you do not wish to furnish the following information, please check the box below. If you would like to provide the information, please check the applicable box in each category.

Applicant: I do not wish to furnish this information

Race:

- White
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- Other

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino

Sex:

- Male
- Female

Co – Applicant: I do not wish to furnish this information

Race:

- White
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- Other

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino

Sex:

- Male
- Female

Credit from the Intermediary Relending Program is provided without regard to sex, marital status, race, color, religion, national origin, age, physical or mental disability, receipt of income from public assistance or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.



SERCAP Individual Programs Application

U. S. DEPARTMENT OF AGRICULTURE

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION – LOWER TIER COVERED TRANSACTIONS

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency with which this transaction originated.

1. The prospective participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Where the prospective participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Emergency Contacts:

Name: _____

Relationship to Applicant: _____

Phone Number: _____

Name: _____

Relationship to Applicant: _____

Phone Number: _____