



## WAYLAND MUNICIPAL AFFORDABLE HOUSING TRUST FUND Affordable Homeowner Repairs Assistance Program Information for Potential Applicants

The Wayland Municipal Affordable Housing Trust Fund (“WMAHTF” or “the Trust”) Affordable Homeowner Repairs Assistance Program (“the Program”) helps preserve owner-occupied affordable units in Wayland by providing funding to offset the cost of repairs and improvements related to health or safety. The Program is not intended to fully fund the repairs, but as a supplement to money that you put toward the repairs.

There is no guarantee that the WMAHTF will provide funding for your request. The Trust will not pay for work already completed.

**BEFORE YOU APPLY, PLEASE READ THE FOLLOWING INFORMATION TO**  
→ **SEE IF YOU, YOUR PROPERTY, AND THE WORK TO BE DONE QUALIFY FOR FUNDING AND**  
→ **DECIDE WHETHER YOU WANT TO COMMIT TO THE TERMS OF THE PROGRAM.**

**COMPLETE THE SCREENING QUESTIONS BEFORE WORKING ON THE APPLICATION.**

### **Is your home eligible for the Program?**

To be eligible, the property applied for must

- Be located in Wayland
- Be occupied by the owner as the owner’s primary residence
- Have a recorded affordable housing restriction or similar device in accordance with Massachusetts Department of Housing and Community Development laws, regulations, and guidelines
- Not be in foreclosure
- Be current in payment of real estate taxes and other fees to the Town
- Be in compliance with the Zoning Bylaw or deemed to be a lawfully pre-existing nonconforming use or structure.

The property can be a single-family or multi-family home or a condominium unit. If the property includes more than one unit, the grant will not exceed the proportionate share of the cost relative to share of ownership.

### **What kinds of work are eligible for the Program?**

The Program covers only extraordinary expenses, such as those relating to substantial repairs, system replacements, and condominium assessments for capital improvements. The Program will not fund unit maintenance, regular condominium fees or betterments, mortgage payments, homeowner’s insurance, or real estate taxes.

The work must be at least one of the following:

- necessary for or related to the health or safety of occupants of unit
- to address a structural deficiency
- imposed by a condominium trust or homeowner association for an extraordinary expense related to the physical condition of the property.

Prior to deciding on your application, the Trust may make an inspection of the relevant portions of your property. The Trust may also inspect the property to ensure that the work has been completed.

### **How much money can you apply for? When and how much will you have to repay?**

Requests up to \$7,500 may be funded as grants with no repayment requirement, but there must be a deed restriction or other qualifying affordable housing restriction that ensures that your unit will continue to be classified as affordable. The Trust hopes that you will repay the Trust as soon as you are able. Whenever possible, the Trust will make payments directly to contractors, vendors, condominium trusts, and homeowner associations through the Town of Wayland Finance Department. Please note that this may be considered taxable income to you, regardless of whether the payment is made to you or to someone else for your benefit,

For requests between \$7,500 and \$15,000, the funds will be provided as a non-interest-bearing loan (0% interest), with the loan amount due when you sell, refinance, or vacate your unit, or your mortgage is foreclosed. In the case of a loan, the Trust will provide the money to you or you may assign the amount to the contractor(s), vendor(s), condominium trust, or homeowner association.

### **What fees are involved in applying?**

There is no fee for applying for assistance from this Program. However, the Trust may require payment for expenses such as but not limited to property inspections, recording documents at the Registry of Deeds, and legal costs. Legal expenses and recording fees may be added to the amount of the loan if you are unable to pay for them when your application is approved.

### **When does the Trust accept and consider applications?**

The Trust considers applications four times each year, usually in February, May, August, and November. Applications may be submitted at any time, but for consideration in that quarter, applications are due to the Town Building if on paper or by email to [mahtfbmembers@wayland.ma.us](mailto:mahtfbmembers@wayland.ma.us) by 5pm on January 10, April 10, July 10, and October 10, or on the first business day following if the due date falls on a weekend or federal or state holiday.

The Trust aims to have money available through the year. If your application is not funded for lack of available funds, you may request that it be considered in the following quarter.

### **What information do you need to provide?**

You will need to submit documentation that shows

- your unit has a permanent affordability restriction, usually in the form of a deed rider filed at the Registry of Deeds
- you are the owner, usually the property deed
- you live in the unit, which may include utility bills, mortgage bills, paycheck stubs, bank checks, or similar items
- the current condition of the property needing repair or improvement, including photos, inspection reports, citations, and similar items
- the scope and cost of the work, usually by providing at least 2 estimates including scope of work from licensed and insured contractors and/or tradespeople
- **PLEASE DO NOT SUBMIT FINANCIAL INFORMATION OR ANY DOCUMENTS WITH ACCOUNT NUMBERS, SOCIAL SECURITY NUMBERS, OR ANY OTHER SENSITIVE INFORMATION VIA EMAIL. WAIT UNTIL YOUR OWNERSHIP AND THE SCOPE OF WORK HAS BEEN SCREENED. THE TRUST WILL PROVIDE INSTRUCTIONS FOR HOW TO**

SUBMIT THIS INFORMATION. When requested, you will need to submit documentation that shows

- the income and assets of all owners and all adult household members, so if other people own and/or also live in the unit, their income and assets are included (if aged 21 or older); documentation may include tax returns, paycheck stubs, bank and brokerage statements, and similar items
- that you are able to pay for the balance of the work, beyond what the Program would cover, which may include bank statements, letters or checks from other people, or similar commitment of funds
- the balance and monthly payments of your mortgage and other loans, if applicable.

Please note: The Trust is not liable for work undertaken at the property. You are responsible for vetting the contractor(s), reviewing licenses and insurance, checking references, and any other activities that a prudent owner would be expected to do.

### **What legal information do you need to know?**

If the Trust approves your application, you may be required to sign documents that ensure the unit will continue to qualify as an affordable unit through a recorded affordable housing restriction or similar device in accordance with MA Department of Housing and Community Development laws, regulations, and guidelines. You may also need to sign a promissory note, loan agreement, grant agreement, or similar documents, which may be recorded with a lien on the property at the Middlesex South Registry of Deeds and will therefore be a public record and enforceable.

You must use the funds consistent with your application and the grant award letter or terms of loan. If you are not able to use the funds as described, the Trust will rescind the grant or loan. Unless you have made false statements, provided false information, failed to sign necessary documents, pay fees that you and the Trust agreed to, or otherwise tried to get money from the Trust that you would not be entitled to receive, you may submit a new or revised application.

If you receive a grant of up to \$7,500, you will be asked, but not required, to pay back as much of the grant as you are able so that the Trust can continue to support other affordable property owners in similar situations. The Trust will not take any action regarding repayment unless you have received funding on the basis of providing false information or otherwise misleading the Trust about your income, ownership, or residence, or the nature, scope, or cost of the work, or any other information relevant to this grant.

By accepting a loan from the Trust, you accept responsibility for repaying the full outstanding balance of the loan when any of these events occurs:

- You sell your unit
- Your unit is foreclosed
- There is a change in use or occupancy (e.g., if you move out, start renting the unit, or die)
- If you refinance your mortgage for cash (exceptions may apply depending on the expenses associated with the cash-out).

You may make payments toward your loan at any time prior to when you are required to pay. This will help the Trust continue to support other homeowners.

**Who do you contact with questions?** Send an email to [mahtfbmembers@wayland.ma.us](mailto:mahtfbmembers@wayland.ma.us).



**WAYLAND MUNICIPAL AFFORDABLE HOUSING TRUST FUND**  
**Affordable Homeowner Repairs Assistance Program**

**Screening Questions**

**COMPLETE THIS FORM BEFORE WORKING ON YOUR APPLICATION.**

Please indicate YES or NO for the statements below.

YES	NO	
		The property is located in Wayland, Massachusetts
		The property is owner-occupied
		The property is subject to an affordable housing restriction
		The gross household income does not exceed 80% of the Area Median Income*
		The owner has money to put toward the repair, whether their own and/or from someone else
		EITHER the amount being requested is \$7,500 or less OR the amount requested is more than \$7,500 and the owner will agree to a zero-interest loan
		The work to be done qualifies as <u>at least</u> one of these: <ul style="list-style-type: none"> <li>• Repair, replacement, or restoration that is necessary for, or related to, the health and safety of occupants of the property</li> <li>• Work that addresses a structural deficiency</li> <li>• Payment required by a condominium trust, homeowner association, or other entity with authority over the unit for an extraordinary expense related to the physical condition of the property</li> </ul>

If you answered NO to any of the above, you, your project, or both do not qualify for funding from the Wayland Municipal Affordable Housing Trust Fund.

Thank you for your interest.

Income limits for 80% AMI by household size

1 person	2 people	3 people	4 people	5 people	6 people	7 people	8 people
\$67,400	\$77,000	\$86,650	\$96,250	\$103,950	\$111,650	\$119,350	\$127,050



**WAYLAND MUNICIPAL AFFORDABLE HOUSING TRUST FUND**  
**Affordable Homeowner Repairs Assistance Program**  
**Application**

The WMAHTF Affordable Homeowner Repairs Assistance Program is intended to supplement money that you put toward the repairs. The property must be located in Wayland, MA.

**COMPLETE THE SCREENING QUESTIONS FORM BEFORE WORKING ON THIS.**

Property street address:	Unit number if condominium
Applicant's full name:	
Property owners: <input type="checkbox"/> Applicant <input type="checkbox"/>	
Mailing address if different:	
Phone number:	Email:

Please check off each of the following that is correct:

- The property needing repair assistance is located in Wayland, Massachusetts
- At least one property owner lives in this property as their primary residence
- The property has a recorded affordable housing restriction as prescribed by the Massachusetts Department of Housing and Community Development or a different kind of affordable housing restriction
- There is a mortgage on the property
- The property is in foreclosure
- All real estate tax payments and fees owed to the Town for this property are up to date
- The property is in compliance with the Zoning Bylaw
- The property is deemed to be a lawfully pre-existing nonconforming use or structure
- The applicant's household income is not more than 80% of Area Median Income
- The applicant has funds to contribute toward the repair(s)

Which of the following describes the purpose(s) of the funding (check all that apply):

- Repair, replacement, or restoration that is necessary for, or related to, the health and safety of occupants of the property
- Work that addresses a structural deficiency
- Payment required by a condominium trust, homeowner association, or other entity with authority over the unit for an extraordinary expense related to the physical condition of the property
- Work that is already completed
- Property maintenance
- Payment of regular condominium fees or betterments
- Payment of mortgage
- Payment of homeowner's insurance
- Payment of real estate taxes

Is the property a single-family home? <input type="checkbox"/> Yes <input type="checkbox"/> No
If not a single-family home, what percent is this unit's share of the total? <span style="float: right;">%</span>

What is the work that needs to be done?

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List the contractors/tradespeople that you (or the condominium trust, homeowner's association, etc.) have contacted and their estimates. Please also provide a copy of each of the estimates.		
Name of individual or company	For the whole project?	Estimate \$
What is the amount that you are contributing to the cost?		\$
What is the amount that you are requesting from the Trust?		\$

**Please attach documentation for each of the following.** (Examples of appropriate documents are in parentheses.)

- A permanent affordability restriction on the unit (a deed rider filed at the Registry of Deeds or similar record)
- Your ownership (the property deed)
- You live in the unit (utility bills, mortgage bills, paycheck stubs, bank checks, etc.)
- The income and assets of all owners and all adult household members, so if other people own and/or also live in the unit, their income and assets are included (if aged 21 or older) (tax returns, paycheck stubs, bank and brokerage statements, etc.)
- Your ability to pay for the balance of the work, beyond what the Program would cover (bank statements, letters or checks from other people, or similar commitment of funds)
- The balance and monthly payments of your mortgage and other loans, if applicable (recent mortgage bill, printout from your online mortgage account)
- Adequate coverage on your homeowner's insurance (the pages of your homeowner's insurance policy that show what is covered and the limits of that coverage)
- The current condition of the property needing repair or improvement (photos, inspection reports, citations, etc.)
- The scope and cost of the work (usually by providing at least 2 estimates including scope of work from licensed and insured contractors and/or tradespeople)
- Attempts to get funding from other sources, such as family, charitable funds, government programs, faith communities, and non-profit organizations (correspondence, written statement with details).

**Initial each of the following if you agree:**

I consent to one or more representatives of the Trust making an inspection of the part(s) of my property to be affected by the work.	
I understand the Trust is not liable for work undertaken at my property.	
I acknowledge that I am responsible for vetting the contractor(s), reviewing licenses and insurance, checking references, and any other activities that a prudent owner would be expected to do.	
I understand that the Trust will only fund work at properties that are restricted as affordable housing and I warrant that my property qualifies.	
I acknowledge that, as a condition of receiving funding, I may need to sign documents to ensure continued affordability and documents relating to the loan and repayment terms, as applicable.	
If awarded funds, I will use such funds in a manner consistent with my application and grant letter or loan terms. If I fail to do so, the Trust may rescind the grant to loan.	
If my application is not funded, I may re-submit this application or submit a new one unless I have made false statements, provided false information, failed to sign necessary documents, failed to pay fees that I and the Trust agreed to, or otherwise tried to get money from the Trust that I would not be entitled to receive.	
<p>If I am awarded more than \$7,500, I accept responsibility for repaying the full outstanding balance of the loan when any of these events occurs:</p> <ul style="list-style-type: none"> <li>• I sell my unit</li> <li>• My unit is foreclosed</li> <li>• There is a change in use or occupancy (e.g., if I move out, start renting the unit, or die)</li> <li>• If you refinance I mortgage for cash (exceptions may apply depending on the expenses associated with the cash-out).</li> </ul> <p>I may make payments toward my loan principal at any time prior to when I am required to pay.</p>	

I attest that the information I am providing is accurate and true to the best of my knowledge and that I will advise the WMAHTF Board of any changes to property ownership, household income, scope of work, and other material information immediately while the application is pending.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit your application and documentation to the WMAHTF at Town Building if on paper or by email to [mahtfbmembers@wayland.ma.us](mailto:mahtfbmembers@wayland.ma.us). Questions? Send an email to that same email address.