

Application Requirements

To apply for a Granting Freedom Grant, the Agent for the applicant must provide the following documentation.

**All documentation must be completed in full and submitted
in a single application package through our Grants
Management System (GMS) at <http://vhdagrants.com>.**

1. A completed application, including a detailed description of the modification to be done (download the latest form on VirginiaHousing.com¹; be aware that this form may be revised at any time, so be sure you are using the latest form)
2. Service-connected disability documentation
 - a. For Veterans: US Department of Veteran Affairs Notification, Award or Rating Letter citing service-connected disability
 - b. For Service Members: MEB/PEB documentation citing service-connected disability
3. Written documentation for additional funding from other sources (if applicable)
4. Applicant Agreement
5. Contractor Documents: Each contractor must provide:
 - a. Contractor estimate with materials and labor separately itemized. Estimate must include statement from contractor that work will be completed within 120 days of approval.
 - b. A current Contractor's license and applicable trade licenses
 - c. Certification of Insurance
 - d. A statement as to whether or not a building permit is required by the locality. If so, this must be procured by the contractor.
 - e. A statement as to whether or not a Certificate of Appropriateness is required by the locality for work being proposed in a Historic District. If so, this must be procured by the contractor.
6. Digital photos of the specified work area(s) taken before work is started (email to Virginia Housing's Grant Programs Administrator as attachments to the application package)
7. Agent Agreement (for portable ramps only)
8. For Homeowners:
 - a. Title Deed, Mortgage Statement or Real Estate Tax Assessment citing applicant name and property address (Note: If veteran does not own the home, veteran must provide a letter signed and dated by the homeowner authorizing the modification)
9. For Renters:
 - a. Landlord/Owner Agreement
 - b. A copy of the Rental Lease Agreement (If the applicant is living in the residence of a family member, the family member must provide a copy of a valid rental agreement. An applicant paying rent to a person that owns and resides in the residence is not eligible for this funding.)

¹ <http://www.vhda.com/Programs/Pages/GrantingFreedom.aspx#.V9a4rU32bcs>



Granting Freedom Grant Program Agent Application Checklist

Applicant Name: _____

Agent Name: _____

Items Required for Award Approval	Check Box
Completed Application in GMS	<input type="checkbox"/>
Completed Applicant Demographic Information	<input type="checkbox"/>
Contractor estimate (includes 120-day statement of completion)	<input type="checkbox"/>
Copy of Contractor License	<input type="checkbox"/>
Copy of applicable Trade Licenses	<input type="checkbox"/>
Certificate of Insurance	<input type="checkbox"/>
Statement whether a Building Permit or Certificate of Appropriateness is required	<input type="checkbox"/>
Written documentation if additional funding is being provided from other sources	<input type="checkbox"/>
Agent Agreement for Portable Ramp	<input type="checkbox"/>
Rental Lease Agreement with both landlord and tenant signatures	<input type="checkbox"/>
Landlord /Owner Agreement	<input type="checkbox"/>
Deed, Mortgage Statement or Real Estate Tax Assessment	<input type="checkbox"/>
Applicant Agreement	<input type="checkbox"/>
US Department of Veteran Affairs Notification, Award or Rating Letter citing service-connected disability	<input type="checkbox"/>
MEB (Medical Evaluation Board) or PEB (Physical Evaluation Board) documentation	<input type="checkbox"/>
"Before Pictures"	<input type="checkbox"/>



Granting Freedom Grant Program Application

Date _____

Homeowner Tenant

I. Agent Information	
Agent Name	
Agency Name	
Agency Street Address	
City, State, Zip Code	
Agent Email Address	
Agent Phone Number	
II. Applicant Information	
Applicant Name	
Street Address	
City, State, Zip Code	
Phone Number	
Address of Property to be Modified <i>(if different from above)</i>	
III. Description of service-connected disability per US Department of Veteran Affairs letter or Medical Evaluation Board (MEB)/Physical Evaluation Board (PEB) documentation	

V. Scope of Work

Explain the need for home or rental unit modification(s) for the service member or veteran. Be specific as to proposed modification(s). List estimate of contractor chosen to do the job.

Estimated Cost	\$
Grant amount requested for property modification	\$
Name of Contractor	

VI. Other Funding

List other sources of funding you plan to use to fund the modification project. Other sources include personal funds, other lines of credit or loans, civic organizations, grants, or gifts. Attach the documentation.

Source	Amount



Granting Freedom Grant Program Applicant Agreement

Applicant Name: _____

Property Address: _____

The Applicant certifies that all information provided herein, and all information in support of this application, is given for the purpose of obtaining assistance from the Granting Freedom Grant Program and is true, accurate, and complete to the best of the Applicant's belief and knowledge.

The Applicant hereby consents to the verification of any information given in this application. Applicant understands that the information will be used to determine eligibility for this program and is subject to the requirements of Granting Freedom Grant Program Guidelines.

The Applicant authorizes the Agent to disclose documentation of Applicant's service related injury to Virginia Housing for the purpose of evaluating eligibility for the Granting Freedom Grant Program; and the information disclosed under this authorization will not be re-disclosed by Virginia Housing.

The Applicant agrees to abide by Granting Freedom Grant Program requirements in connection with any assistance received pursuant to this application.

The Applicant hereby releases and agrees to indemnify and hold harmless the Agent and Virginia Housing from any liability in connection with the construction, performance, or use of the accessible modifications.

Virginia Housing is subject to the Virginia Freedom of Information Act. To the extent allowed by law, Virginia Housing will keep personal information from the Applicant confidential. In the course of administering this grant program, Virginia Housing will not endorse or recommend any particular contractor. The Applicant shall not falsely claim that Virginia Housing has endorsed or recommended any particular contractor.

The Applicant certifies that they **own** the property listed above or that it is a **rental** and that the modifications to be done are approved by the landlord/owner.

The Applicant also acknowledges that he/she is responsible for the upkeep of the modification, including but not limited to, repairs, and weatherization.

The Applicant acknowledges that permanent ramps are the property of the landlords and must remain with said property.

The Applicant acknowledges that a portable ramp is the property of the Agent and when it is no longer needed must be returned to the Agent.

The Applicant understands that he/she may request information as to the specific work to be done to the property prior to signing this authorization and release, and upon signing this authorization and release, agrees to the work to be performed as determined by the Agent, and Virginia Housing. The Applicant further understands that he/she is the one hiring the contractor even though this grant program will provide some of the funds to pay the contractor.

The Applicant also acknowledges that he/she has been made aware of the following documents:

- Joint statement of the Department of Housing and Urban Development and the Department of Justice Reasonable Modifications under the Fair Housing Act
- *What You Should Know Before Hiring A Contractor* (Board for Contractors, Department of Professional and Occupational Regulation)

Applicant Signature: _____ **Date:** _____



Granting Freedom Grant Program Landlord/Owner Agreement

Applicant Name: _____

Landlord/Owner Name: _____

Property Address: _____

Planned Modification: _____

In consideration for the Agent (these include but not necessarily limited to: Centers for Independent Living, Local Agencies, Non-profit Organization and Landlords in need of accessibility modifications for a specific tenant) and Virginia Housing to make accessibility improvements to the property, the Landlord/Owner does hereby agree to the following:

Landlord/Owner shall not raise the rent because of the increased value of the property due solely to the accessible modifications to the rental unit.

Landlord/Owner hereby releases the Agent and Virginia Housing from any liability in connection with the performance of the accessible modification(s). Landlord/Owner acknowledges that performance is the responsibility of the contractor and upkeep is the responsibility of the applicant.

Landlord/Owner acknowledges that a wooden ramp that is attached to the said property must remain with said property under this Virginia Housing program. If the Landlord/Owner prefers a non-permanent ramp, the Landlord/Owner may request that the Agent provide a portable ramp by writing "Portable Ramp" on the above Planned Modification line. The portable ramp will be removed by the Agent when it is no longer needed by the applicant.

Landlord/Owner acknowledges that a portable ramp is the property of the Agent and when it is no longer needed, it is the applicant's responsibility to return it to the Agent.

Landlord/Owner signature is considered to be approval for the accessibility modifications to be completed as specified above.

Landlord/Owner upon signing this authorization and release agrees to the work to be performed as determined by the Tenant, Agent, and Virginia Housing as specified above.

Furthermore, in the event the unit becomes vacant, the Landlord is strongly encouraged to list the unit on www.VirginiaHousingSearch.com with the applicable accessibility features indicated. This is a free service to landlords and tenants.

The Landlord/Owner also acknowledges that he/she has been made aware of the following documents:

- Joint statement of the Department of Housing and Urban Development and the Department of Justice Reasonable Modifications under the Fair Housing Act
- *What You Should Know Before Hiring A Contractor* (Board for Contractors, Department of Professional and Occupational Regulation)

Landlord/Owner Signature: _____ **Date:** _____



Granting Freedom Grant Program Final Inspection Report

(This report must accompany the final paperwork.)

Applicant Name: _____

Property Address: _____

Agent Name: _____

Brief Description of Accessibility Modification work completed:

I hereby certify that I am satisfied with the work done on my residence and that it has been completed in a workmanship-like manner.

Applicant Signature: _____ **Date:** _____

Agent Signature: _____ **Date:** _____



Granting Freedom Grant Program Claims Checklist

Applicant Name: _____

Agent Name: _____

Items Required for Grantee Payment	Applicable?	Included?
Final Invoice	<input type="checkbox"/>	<input type="checkbox"/>
Copy of building permit	<input type="checkbox"/>	<input type="checkbox"/>
Copy of locality inspection approval	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Certificate of Appropriateness for Historical Areas	<input type="checkbox"/>	<input type="checkbox"/>
“After” photos		<input type="checkbox"/>
Inspection report signed by agent and applicant		<input type="checkbox"/>



Granting Freedom Grant Program Contractor Request for Extension

Under the guidelines of this program, contractors are expected to complete modifications within 120 days from the approval date of the application. However, Virginia Housing understands that there are certain situations out of the control of the contractor that may impede them from meeting this deadline. An extension may be granted under these circumstances so that grant funds are still available.

To request an extension, please complete the form, and provide to the Agent, who will copy Virginia Housing. The request must be submitted before the 105th day of the project. The Agent will contact you with information regarding the approval of this extension within fifteen (15) business days.

Date: _____

Contractor Name: _____

Company: _____

Phone Number: _____

Email Address: _____

Applicant Name: _____

Property Address: _____

Reason Requesting Extension (check all that apply)	
<input type="checkbox"/>	Weather hindered the modification from being completed within 120 days.
<input type="checkbox"/>	Delay attributable to the manufacturer in delivery of materials needed for modification; written documentation of delay must be provided by contractor.
<input type="checkbox"/>	Awardee is hospitalized or has a medical condition delaying the contractors access to the unit/property.

Number of days needed to complete modification(s) (list 30-day increments): _____

AGENT USE ONLY

Agent Name: _____

Agent Organization: _____

Phone Number: _____

Email Address: _____

Agent Signature: _____

Date of Approval: _____ **Date of Denial:** _____

Reason for Denial:

Sample Rental Lease Agreement for Home Rentals

Rental Lease Agreement

(This sample form is just for home rentals and should be used only when a standard rental lease agreement is not available.)

_____ is renting the residence located at _____
(Tenant Name) (Address)

and is current on his/her rent which is \$ _____ per month.

Leasing term effective _____
(start/end dates)

The following modifications have been requested to be completed at this residence:

Signatures:

Landlord/Owner	Date
Tenant	Date
Agent	Date

Sample Portable Ramp Agreement

(Agent Letterhead)

I, _____, understand that the portable ramp provided for my use
(Applicant Name)

by _____ under the Virginia Housing Granting Freedom Grant program is to be returned to the Agent. I also agree to contact the Agent to let them know when I move or no longer need the ramp.

Agent Name: _____

Agent Phone Number: _____

Applicant:

_____ (Signature)

_____ (Date)

Landlord:

_____ (Signature)

_____ (Date)

(Copy to be provided to Agent, Virginia Housing, and Applicant)

Sample Contractor Estimate Sheet

(Contractor name and address)

Date:

Proposal Submitted to: <i>Applicant's Name</i> <i>Applicant's Address</i> <i>c/o Agent Name</i>	Copy to: Virginia Housing 601 S. Belvidere St. Richmond, VA 23220
-----------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------

Qty	Description	Unit Price	Line Total
1	Item One	\$	\$
1	Item Two	\$	\$
1	Item Three	\$	\$
	(Labor Cost)	\$	\$
	(Permit Costs, when required by locality)	\$	\$
	**Work is to be completed on or before 120 days from the date estimate is accepted.		
		Subtotal	\$
		Sales Tax	\$
		Total	\$

Sample Contractor Invoice

INVOICE

Date:

To: Virginia Housing 601 S. Belvidere St. Richmond, VA 23220	From: <i>Contractor Name</i> <i>Contractor Address</i>
On behalf of: <i>Applicant's Name</i> <i>Applicant's Address</i> <i>c/o Agent Name</i>	