



Home Preservation Grant Program APPLICATION

The City of Commerce offers its residents the **Home Preservation Grant Program**. The Home Preservation Grant Program (“Program”) assists income eligible City of Commerce (“City”) residents with the repairs and rehabilitation of single-family owner-occupied housing within the City. The Program offers eligible applicants to receive a maximum grant amount of up-to \$25,000 per home for rehabilitation and asbestos/lead abatement (if needed). The Program is made possible with the City’s Community Development Block Grant (CDBG) funds, received from the Los Angeles Community Development Authority (LACDA).

Please review all requirements below before submitting your completed grant application. Once your application is received, Program staff will review your documents to determine your eligibility and may contact you to request additional information or documentation. After your eligibility has been determined, Program staff will guide through the program processes.

Program funds are based on availability, and applicants must meet all program requirements before moving forward.

ELIGIBILITY REQUIREMENTS

- Property must be located within the City of Commerce.
- Property must be owner-occupied.
- Applicant must provide proof of homeowner’s insurance.
- Total household income cannot exceed 80% of Los Angeles County Income Limits. *See Table Below*
- Applicant/Property must not have applied and received a grant in the last ten (10) years.

**Maximum Annual Household Income Limits as
Determined by HUD effective April 1, 2024**

Persons in Household

	1	2	3	4	5	6	7	8
80% Income Limit	\$77,700	\$88,800	\$99,900	\$110,950	\$119,850	\$128,750	\$137,600	\$146,500

https://www.huduser.gov/portal/datasets/il/il2024/select_Geography.odn

ELIGIBLE REHABILITATION

Eligible exterior and interior improvements must be integral to the home and the principal fixtures and components that support it (i.e., electrical and HVAC systems). Serious health and safety issues as defined in Section 17920.3 of the California Health & Safety Code and the applicable City of Commerce Municipal Codes will be prioritized. An inspection will be conducted by Program staff to determine the presence of code violations/deficiencies after an application is approved.

Eligible rehabilitation may include but is not limited to:

- Repair or replacement of doors, windows, locks, flooring, porches (when structurally integral to the home).
- Repair or replacement of electrical, heating, plumbing, ventilation, and air conditioning systems.
- Repair or replace kitchen and/or bath fixtures, cabinets, countertops
- Structural repairs such as housing frames, foundation, roofing, and stairs.
- Energy conservation (i.e. weather stripping, insulation, low flow plumbing fixtures)
- Special rehabilitations necessary elderly or disabled people such as grab bars, handrails, ramps
- Work in compliance with Federal Regulations for Lead Based Paint Hazards & Asbestos



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REQUIRED DOCUMENTATION

The following documents are required to determine program eligibility and must be submitted along with your application. Please provide copies of documents, not original documents.

- Grant Deed to the Property
- Most Recent Mortgage Statement or Property Tax Bill
- Property Insurance Certificate (Declarations Page)
- Income Tax Returns from prior year, including all schedules for each working member of the household
- Two (2) months** most recent consecutive months of payroll stubs for each working member of the household
- Copies of all sources of income for all household members for the past **two (2) months**, including but not limited to Social Security/SSI benefits, Unemployment checks/statements, retirement/pensions, and public assistance.
- Two (2) months** most recent bank statements for all household members.
- Copy of Photo ID for Applicant and all adult household members

SUBMITTING YOUR APPLICATION

Please submit your completed application, in a sealed envelope to the

Economic Development & Planning Department

Attn: Home Preservation Program

2535 Commerce Way

Commerce, CA 90040

If you have any questions, you may contact

Adriana Robledo at

arobledo@agi.com.co

(909) 816-2960



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APPLICANT INFORMATION

Applicant Name: _____ **Date:** _____

Home Address: _____

Phone Number: _____ **Email:** _____

- Race:**
- American Indian/Alaskan Native & Black African American
 - American Indian/Alaskan Native & White
 - American Indian/Alaskan Native
 - Asian
 - Asian & White
 - Black/African American & White
 - Black/African American
 - Native Hawaiian/Other Pacific Islander
 - Other Race Not Listed
 - White
- Ethnicity:** Hispanic?
- Yes
 - No

Co-Applicant Name: _____

Home Address: _____

Phone Number: _____ **Email:** _____

- Is the Head of Household Female?** Yes No
- Is the listed applicant(s) the legal property owner(s)?** Yes No
- Does the listed address serve as the applicant's primary residence?** Yes No

PROPERTY INFORMATION

- Which of the following best describes your home?**
- Single Family Residence
 - Multi Family Residence (Townhome, Condo, Duplex, etc.)
 - Manufactured Home

- Are you aware of any unpermitted structure(s) or code violations on the property?**
- No
 - Yes (Please describe them below)
-



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Does the property have up to date insurance? No
 Yes

Has the property previously received assistance from the City of Commerce? No
 Yes (Please provide when and how much)

INCOME INFORMATION

Please complete the table below for all persons living in the household, regardless of age or relation. Remember to include the applicant and co-applicants.

	Name	Age	Annual Gross Income	Relationship to Applicant
1			\$	
2			\$	
3			\$	
4			\$	
5			\$	
6			\$	
7			\$	
8			\$	

Total Number of Persons (Over 18 years) in household: _____

Estimated Total Annual Gross Income: \$_____

REQUESTED REPAIRS

Please review and select the types of repairs needed on your home. Please also include the location of the needed repair along with a brief description. All the repairs will be considered but will be prioritized based on health and safety hazards and available funds.

	Area of Need	Description
<input type="checkbox"/>	Accessibility Repairs: Ramps, bathroom grab bars, accessible shower stalls, etc.	
<input type="checkbox"/>	Doors and/or Windows: Repairs, replacement, weather stripping, etc.	
<input type="checkbox"/>	Electrical: Outlets, switches, fuse box, etc.	
<input type="checkbox"/>	Flooring: Repairs, replacement, steps, etc.	
<input type="checkbox"/>	Heating/Ventilation/Air Conditioning: Repairs, replacement, etc.	



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<input type="checkbox"/>	Painting	
<input type="checkbox"/>	Plumbing	
<input type="checkbox"/>	Roofing Repairs	
<input type="checkbox"/>	Structural Repairs	
<input type="checkbox"/>	Others: Identify any repairs needed not listed above.	

APPLICANT CERTIFICATION/CONSENT

The applicant(s) certifies, under the penalty or perjury, that all information provided in this application, and supporting documentation is true and complete to the best of the applicant(s)'s knowledge. Applicant(s) also gives consent to have the City of Commerce to obtain any information or documents required to verify statements made herein, including income, employment, mortgage, and all other debt and credit obligations which may be required in connection with the applicant's application.

Applicant Signature

Date

Co-Applicant Signature

Date