Rescue Mission of Utica, Inc. 293 Genesee St. Utica, NY 13501 (315) 735-1645



Small Home Residence Give-Away Application

Who May Qualify

Dear Prospective Applicant

Rescue Mission of Utica, Inc. is a faith-based non-profit multi-service organization founded in 1890. Rescue Mission's Skills for Success Program, is a multi-agency collaboration between MVCC YouthBuild, Human Technologies Corporation and the HomeOwnershipCenter, and has completed the construction of a 3 bedroom, 2 bath, 1150 square foot home. Rescue Mission intends to gift the small home to a low-income individual or family who do not presently own a home or real property.

If you believe you may qualify, please read the application completely before completing.

WHO MAY QUALIFY?

- Those who do not presently own a home or real property
- Those who successfully complete & comply with Financial Coaching Sessions provided by the HomeOwnershipCenter and have adequate financial resources/financial plan to be able to maintain the home
- Those who have participated or are participating in one of the following programs:

Rescue Mission of Utica Programs: Emergency Housing, Parker House Program, West Street Housing, Enriched Living Center, Addiction Stabilization Center

The Emmaus House of Utica

JCTOD Outreach, Inc. dba Johnson Park Center

A United States Veteran as defined by Title 38 of the Code of Federal Regulations currently residing in Oneida County

- Family size is limited to four persons
- All individuals over the age of 18 living in the household must sign the Consent for Release and Exchange of Confidential Information Form.
- Annual Income must be in the following ranges, income will be verified by the HomeOwnershipCenter

1 Person Household Yearly Household Income must be between	\$28,350 and \$45,350
2 Person Household Yearly Household Income must be between	\$32,400 and \$51,800
3 Person Household Yearly Household Income must be between	\$36,450 and \$58,300
4 Person Household Yearly Household Income must be between	\$40,500 and \$64,750

HOW TO APPLY:

Please complete the attached application along with the *Consent for Release & Exchange of Confidential Information form,* with each adult listed on the Application. Help us process your application by providing complete and accurate information; failure to do so will disqualify your application. All applications must be post marked by June 30, 2023 and should be mailed to:

Rescue Mission of Utica, Attn: Skills for Success Program 293 Genesee Street Utica, NY 13501

AFTER YOUR APPLICATION HAS BEEN COMPLETED & VERIFIED:

A referral will be made to the HomeOwnershipCenter, located at 1611 Genesee St, Utica, NY., who will verify income requirements. If income requirements are met, the HomeOwnershipCenter will schedule you for Financial Coaching Classes and Homebuyer Education. You must successfully complete and comply with Financial Coaching and Homebuyer Education at the HomeOwnershipCenter. If you meet all the requirements such as affordability and credit, this will allow you to be an eligible candidate for a Rescue Mission Small Home Give-Away. Please note applications will be processed & verified by Rescue Mission on a first come, first served basis. If more applications are received and verified than there are Financial Coaching/Homebuyer Education slots available, a waiting list will be created.

AFTER COMPLETION OF THE HOMEOWNERSHIPCENTER FINANCIAL COACHING SESSIONS:

Once the Financial Coaching Sessions & Homebuyer Education are successfully completed the HomeOwnershipCenter will refer you back to the Rescue Mission. A drawing of qualified individuals that successfully complete the HomeOwnershipCenter Financial Coaching Program, Homebuyer Education and meet income/credit qualifications will be held to determine the new owner of the Small Home.

Thank you for your interest in the Skills for Success Small Home Program.

Applying is *Free* Financial Coaching is *Free* (\$100.00 value) Homebuyer Education is *Free* (\$125.00 value) For *Your* CHANCE to win a NEW home! Applicant Information

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Primary Applic	ant:			
Last Name	First Name	Middle Initial	Date of Birth	
Primary Applic	ant Contact Informat	on:		
Landline :	(Cell: Email:		
Current Mailir	ng Address			
Current Reside	ential Address (if di	ferent from mailing addre	ss)	
Total Number	of Individuals who v	vill be living in the small h	ome (limited to 4 individuals)	
Please list the names of all Adults who will be living in the small home (leave blank if not applicable)				
Last Name	First Name	Middle Name	Date of Birth	
Landline:	C	cell:	Email:	
Current Mailir	ng Address:			
Current Reside	ential Address (if di	ferent from mailing addre	ss)	
Last Name	First Name	Middle Name	Date of Birth	
Landline:	C	cell:	Email:	
Current Mailir	ng Address			
Current Reside	ential Address (if di	ferent from mailing addre	ss)	

IF MORE THAN 3 ADULTS will be living in the small home, please attach a separate sheet with above information

Name of Children Residing In Home

Please List the names of children who will be living in the small Home (leave blank if not applicable)

Name	DOB	

Household Income Verification

Include a copy of all adults living in the home most recent pay stub and proof of any other income, eg. SSI, retirement, etc. with application. The HomeownershipCenter will be verifying income.

Per Rescue Mission Small Home Give-Away Guidelines, Income Limits Must be in the following ranges:

1 Person Household Yearly Household Income must be between	\$28,350 and \$45,350
2 Person Household Yearly Household Income must be between	\$32,400 and \$51,800
3 Person Household Yearly Household Income must be between	\$36,450 and \$58,300
4 Person Household Yearly Household Income must be between	\$40,500 and \$64,750

Program Participation

I have participated or am participating in the following program or I am a US Veteran (s): (check all that apply)

_____ Rescue Mission of Utica, Inc.

_____ The Emmaus House of Utica, Inc.

____ JCOTD Outraach, Inc. DBD Jonson Park Center (JPC)

A United States Veteran as defined by Title 38 of the Code of Federal Regulations currently residing in Oneida County

Veteran Status Ver	ification			
Branch:	From:	То:		
Type of discharge:				
Submit a copy of your DD form				
Diaslaimer and Cir				
Disclaimer and Signatures I certify that I personally completed this application and that all my answers are true and complete to the best of my knowledge. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to receive a Small Home residence, I may be disqualified from the program. I understand that this is a lottery and that even if I complete financial coaching and homebuyer education through the HomeOwnershipCenter I am not guaranteed to be to selected recipient of this small home. The original or a copy of this application will be retained by Rescue Mission of Utica even if the application is not approved.				
Signature of Primary Applicant		Date		
Signature of Co-Applicant (leave blank if there is no co-applicant)	[Date		
Signature of Co-Applicant (leave blank if there is no co-applicant)		Date		
Signature of Co-Applicant (leave blank if there is no co-applicant)	[Date		