



**2021
NEIGHBORHOOD IMPACT PROGRAM (NIP)**
NIP is to help eligible households with select deferred maintenance repairs.

HOMEOWNER INFORMATION		
The applicant must own and occupy the home in need of repair		
NAME:		
ADDRESS:	COUNTY:	
CITY:	STATE:	ZIP:
PHONE:	EMAIL ADDRESS:	
Have you received FHLBI grant funds (HOP,NIP,AMP,DRP) in the past 5 years? YES _____ NO _____		
Have you applied for FHLBI funds with any other organization this program year? ** YES _____ NO _____		
<small>**Households may submit only one application per program year.</small>		

HOUSEHOLD MEMBERS						
List everyone who lives in this home, including the homeowner(s). Attach a separate page for additional household members.						
First and Last Name	Relationship to Applicant			College Student?		Gross Annual Income
1)	Self					\$
2)						\$
3)						\$
4)						\$
5)						\$
6)						\$
Total Household Income:						\$

Income Sources: Select all sources of household income for those persons listed above.

Other
Other

FOR FHLBANK INDIANAPOLIS MEMBER USE ONLY:

NIP ELIGIBLE HOME REPAIRS

From the list below, select the repair(s) you are requesting assistance for:

Windows	Gutters/Downspouts	Well/Septic/Sewer
Roof	Soffits/Fascia	Insulation/Caulking
Furnace/AC	Exterior Doors	Electrical
Siding	Water Heater	<u>(replace knob-and-tube wiring only)</u>

What type of home do you live in?

HOMEOWNER ACKNOWLEDGEMENT

- 1) I own and occupy the home referenced as my primary residence and have done so for at least 6 months;
- 2) All occupants of the home have been listed on this application and all income has been disclosed;
- 3) I must qualify to receive funds, and funds are available on a first-come first-serve basis. There is no guarantee that I will receive funding;
- 4) It is my responsibility to provide a minimum of two, independent third-party bids for the requested repairs;
- 5) If I qualify, it is my responsibility to choose the contractor who completes the repairs;
- 6) Any disputes surrounding the repairs will be resolved between myself and the contractor;
- 7) The maximum amount available per household under this program is \$7,500;
- 8) I have not received a grant from any Federal Home Loan Bank in the past 5 years;
- 9) My application is subject to approval by the FHLBI and the member institution submitting it on my behalf;
- 10) All information on this application is true and accurate.

Homeowner Signature

Printed/Typed Name

Date

Homeowner Signature

Printed/Typed Name

Date

FOR FHLBANK INDIANAPOLIS MEMBER USE ONLY

DATE RECEIVED: _____

2021 INCOME DOCUMENTATION GUIDE

Use this guide to determine what type of documentation for each income type is required

- 1. Household member has no income**
 - A “ Zero Income Affidavit” is needed for individuals who are 18 or older.
- 2. If required to file 2020 Federal tax return**
 - Provide a copy of filed 2020 Federal tax returns including all W-2s, 1099s, attachments and schedules (State/ City tax returns are NOT needed)
- 3. Wages from an Employer: This is needed for each employer.**
 - Employer Name, Employment Type (Full Time, Part Time, Seasonal, Irregular), Pay Frequency (Weekly, Bi-Weekly, Semi-Monthly, Monthly), Length of Employment, Date of last pay increase/raise
 - Income Certification:
 - If Paid Monthly: 2 consecutive paystubs that are dated within the last 60 days
 - If Paid Semi-Monthly: 2 consecutive paystubs that are dated within the last 30 days
 - If Paid Bi-weekly: 2 consecutive paystubs that are dated within the last 30 days
 - If Paid Weekly: 4 consecutive paystubs that are dated within the last 30 days
 - If Paid on an Irregular Schedule: 2-4 of most recent
- 4. Social Security**
 - Current year’s award letter confirming the gross payments and frequency of payments AND the most recent bank statement reflecting the monthly net amount from the award letter
 - If these amounts differ, a current benefits statement dated within 60 days will be necessary.
- 5. Child Support/Alimony**
 - Court-ordered documentation evidencing a minimum of 6 months of the most recent payments
 - Documentation from the court system should reflect the current amount due and paid
 - If less is being received, the actual amount must be documented from state or local entity responsible for enforcement of payments
- 6. Pensions/Annuities/Insurance Policies**
 - Pension statement/award letter confirming gross payments & frequency of payments dated within 60 days
- 7. Unemployment Current/Past Year**
 - Most recent benefit letter prepared by the authorizing agency along with schedules reflecting payments received YTD or similar third-party documentation
- 8. Interest/Dividends**
 - Quarterly/Monthly Statements as generated
 - If received annually; verification letters received from the institution or the IRS 1099 form
- 9. Self-Employment**
 - Two (2) years of completed, signed, and filed U.S. Federal tax returns, including all attachments and schedules for the business and personal, where applicable
- 10. Rental Property**
 - Executed lease agreement or Comparative Market Analysis (CMA) evidencing rental income
 - Projected income from vacant units must be included
- 11. Other: This will be dependent on the type of income received.**

Upon review of your file, additional documentation may be requested. If you have any questions, please contact the organization/financial institution you are submitting this application to.