UPPER DARBY TOWNSHIP

100 Garrett Road Upper Darby, PA 19082

Edward Brown Mayor

Crandall O. Jones Chief Administrative Officer



Members of Council

Hafiz Tunis Jr., President – 7th Dist Marion Minick, Vice President – At Large Michelle Billups, Secretary – At Large

Meaghan R. Wagner – 1st Dist Jess Branas – 2nd Dist Brian Andruszko – 3rd Dist

Danyelle Blackwell – 4th Dist Myron McNeely – 5th Dist

David Bantoe – 6th Dist

Matt Silva – At Large Laura Wentz – At Large

Dear Purchaser (s),

Enclosed is your application for the Upper Darby Township First Time Homebuyer Program. Please submit your complete application and all documents to:

Upper Darby Township
Community & Economic Development
100 Garrett Rd
Upper Darby, PA 19082

Incomplete applications will not be processed. You must allow 3 weeks for processing. Any questions, please call 610-734-7716 or email comdev@upperdarby.org

Please note: Funding is limited and is available on a first-come, first-served basis.

Sincerely,

Scott Alberts

Program Manager, Community & Economic Development



HOUSING COUNSELING RESOURCES

All Buyers must receive a minimum of eight hours of pre-purchase homeownership education and counseling presented by a HUD-approved counseling agency. Counseling must occur within the 12 months prior to purchase. Among the topics covered are the dangers of predatory lending and sub-prime lending and how to identify these types of loans. Classroom counseling is preferred to online-only programs, but both are permitted. Buyer must provide a copy of their Housing Counseling Completion Certificate with their application.

The following local agencies are approved by HUD to provide housing counseling services. A certificate from any of these courses will meet the requirements of the Upper Darby Township program:

Affordable Housing Centers of Pennsylvania - Delaware County

20 S 69th St, Upper Darby, PA 19082-2528

https://www.ahcopa.org, 215-765-1221, info@ahcopa.org

Languages: English, Spanish

Clarifi

8600 W Chester Pike, Suite 308, Upper Darby, PA 19082-2629 https://www.clarifi.org, 800-989-2227, clarifi.eam@clarifi.org

Languages: English

Media Fellowship House

302 S Jackson St, Media, PA 19063-3714

https://mediafellowshiphouse.org, 610-565-0434, amy@mediafellowshiphouse.org

Languages: English

Chester Community Improvement Project

23 E 5th St, Chester, PA 19013-4401

https://www.cciphousing.org, 610-876-8663, adpyatt@comcast.net

Languages: English

Intercultural Family Services, Incorporated

4225 Chestnut St, Philadelphia, PA 19104-3014

https://www.ifsinc.org, 215-386-1298, ebony.gordon@ifsinc.org

Languages: Chinese Mandarin, English, Spanish

Southwest Cdc

6328 Paschall Ave, Philadelphia, PA 19142-2315

https://southwestcdc.org, 215-729-3948, lorraine@southwestcdc.org

Languages: English, French

Greater Philadelphia Community Alliance

1529 S 22nd St, Philadelphia, PA 19146-4501

https://GPCA-Phila.org, 215-336-5505, MichaelRapp@GPCA-Phila.Org

Languages: English, Spanish

Newfound Riseup Fund

1435 Walnut St, Suite 500, Philadelphia, PA 19102-3219

https://riseupfund.org, 267-876-5275, contact@riseupfund.org

Languages: English, Portuguese, Spanish

Unemployment Information Center

112 N Broad St, Philadelphia, PA 19102-1512

https://philaup.org, 215-557-0822, jkoleth@philaup.org

Languages: English, Spanish

Money Management International - Philadelphia

1 International Plz Ste 550, Philadelphia, PA 19113-1528

http://www.moneymanagement.org, 866-232-9080, counselinginfo@moneymanagement.org

Languages: English, Spanish

Urban League of Philadelphia

121 S Broad St Fl 10, Philadelphia, PA 19107-4565

http://urbanleaguephila.org, 215-985-3220

Languages: English

Other HUD-approved providers can be found by calling 800-569-4287 (202-708-1455 TTY) or by using HUD's online locator tool here:

https://answers.hud.gov/housingcounseling/s/?language=en US



CHECKLIST

ALL documents must have ORIGINAL SIGNATURES and be dated.

ENCLOSED FORMS – TO BE COMPLETED & RETURNED
Application
Loan Disclosure Statement
Notice to Seller and Seller's Agent
Certification by Lender
Tax Payment Acknowledgement
Calculation Sheet
Full Home Inspection Statement
Painted Surfaces Inspection Statement
Notice to Seller and Seller's Agent Regarding Painted Surfaces
Homeowner's Certification of Program Compliance
Lead Paint Pamphlet Acknowledgement of Receipt
DOCUMENTS TO BE PROVIDED BY APPLICANT
Copy of Government Issued Identification Card(s) (e.g. License or Passport)
Copy. of Permanent Alien Resident Card(s) (if applies)
Loan Estimate (prepared by Lender)
Copy of Buyer's Home Inspection Report
Copy of Use & Occupancy Permit
Copy of Sewer Lateral Certification
Copy of Fire Escape Certification (if applicable)
Copy of Agreement of Sale
Copy of Appraisal (from Lender)
Copy of Credit Report (for applicants)
Copy of Housing Counseling Completion Certificate
Home Insurance Declaration Page listing Upper Darby Township as Second Mortgagee (needed by the day of settlement)
Proof of Income: 2024 Federal Tax Return(s) (1040 Form), W-2 Forms, 1099's, Three Month's Paystubs, Verification of employment, Profit & Loss
Statement (if self-employed) for all household members. (Income of Full time
students is exempt but they must submit proof of class registration.) Copies of
all documents used to prepare tax returns, such as statements of earned income,
pensions, worker's compensation, welfare, unemployment, child support, dividend
income, interest income, rental income, Social Security, other income. Other
documentation as may be required.
Title Company Name and Address

RETURN ALL ITEMS ABOVE TO: Upper Darby Township, Community & Economic Development, 100 Garrett Rd, Upper Darby, PA 19082. For questions, call us at 610-734-7716 or email us at comdev@upperdarby.org



BORROWER(S)/GRANTEE(S) APPLICATION

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR ALL ADULTS OVER 18 RESIDING IN THE HOUSEHOLD.

FIRST	MIDDLE	LAST	(MAIDEN)
2. TELEPHONE:		E	mail:
DAY	EVENI	NG	
3. DATE OF BIRTH:			
4. PRESENT ADDRESS:			
7. How long at this address	?		
8. Currently:rent;li	ive with family or friends	s;homeowner	•
Did you own t	id ownership cease? he real estate with a spou	se from a previo	us marriage?
10. Marital status:ma	irried;separated;	divorced;s	single
11. Are you a U.S. citizen? (If no, you must provapplication.)	Yes;No vide documentation regar	ding your immig	ration status with this
12. Employer Name:			
Address:			
Your job title:			
How long employed? _			



13. #2 Employer Name (I	F APPLICABLE):		
Address:			
riow long employed?			
14. List dependents that	will live in the househole	d at least 50%	of the time:
NAME:	DATE OF BIRTH	RELAT	TIONSHIP
AD	DITIONAL ADULT LIV	ING IN THE	HOME
1. ADDITIONAL BORRO	WER/GRANTEE NAME:		
FIRST	MIDDLE	LAST	(MAIDEN)
2. TELEPHONE:			mail:
DAY	EVENIN	G	
3. DATE OF BIRTH:			
4. PRESENT ADDRESS:			
7. How long at this address	?		
		1	
8. Currently:rent;l			
9. Have you ever been an o	wner or co-owner of real e	state?	
Did you own t	id ownership cease?he real estate with a spouse	e from a previo	us marriage?
10. Marital status:m	arried;separated;	divorced;	_single
11. Are you a U.S. citizen?			
(If no, you must provapplication.)	vide documentation regardi	ng your immig	ration status with this



12.	Employer Name:	
	Address:	
	Your job title:	žii
	How long employed?	
13.	#2 Employer Name (IF APPLICABLE):Address:	
	Your job title:	
	How long employed?	

~~~~ If there are more than two (2) adults living in the household, please make an additional copy of this page and complete for that individual.



#### CERTIFICATION OF DISCLOSURE OF INCOME AND ASSET SOURCES

Federal law and HUD regulations require that all applicants disclose all sources of income and assets. Failure to disclose all sources of income and assets constitutes fraud against the federal government which is punishable by law. As a certification, please check below all sources of income which you receive and assets which apply to you. You must disclose all sources including joint accounts or assets which are held for your benefit.

THE FOLLOWING INCOME SOURCES AND ASSETS APPLY TO ME (please check all that apply to you and provide documentation of each income source and asset):

|                 |                                                                                                                            | INCOME SOURCES                                                                                                             |           |
|-----------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-----------|
|                 | Income from Employment- No. of sou                                                                                         | rces(except Greenthumb, VISTA, RSVP, JTPA).                                                                                |           |
|                 | Unemployment Compensation Benefit                                                                                          | its (including disability, workman's comp., and severance pay).                                                            |           |
| 57              | Income from Veterans' Benefits.                                                                                            | to (morating allocatinty, working to comp., and severalize pay).                                                           |           |
|                 | Social Security Income.                                                                                                    |                                                                                                                            |           |
|                 | SSI Benefits.                                                                                                              |                                                                                                                            |           |
|                 | State Supplemental Payments (SSP).                                                                                         |                                                                                                                            |           |
|                 | Retirement Pension from Employer- N                                                                                        | of sources                                                                                                                 |           |
|                 | Income from I.R.A. or Annuity- No. of                                                                                      | courses                                                                                                                    |           |
| -               | Income from Self-Employment (included)                                                                                     |                                                                                                                            |           |
|                 | Income from Sell-Employment (include                                                                                       | ang under the table income)                                                                                                |           |
| 2               |                                                                                                                            | for:                                                                                                                       |           |
|                 | Alimony                                                                                                                    |                                                                                                                            |           |
|                 |                                                                                                                            | pperty(s). (DOES NOT INCLUDE RENT REBATES.)                                                                                |           |
|                 | Income from Public Assistance (TANF)                                                                                       |                                                                                                                            |           |
|                 | Income from Lottery Installment Paym                                                                                       | nents.                                                                                                                     |           |
|                 | Income from Business.                                                                                                      |                                                                                                                            |           |
|                 | Income from Military Pay.                                                                                                  |                                                                                                                            |           |
|                 | Income from Insurance Installment Pa                                                                                       | ayments (such as Death Benefits).                                                                                          |           |
|                 | Income from Regular Dividends.                                                                                             |                                                                                                                            |           |
|                 | Recurring Income or Gifts.                                                                                                 |                                                                                                                            |           |
|                 | Other sources of income not listed ab                                                                                      | ove. Specify:                                                                                                              |           |
|                 |                                                                                                                            |                                                                                                                            |           |
|                 |                                                                                                                            | ASSETS                                                                                                                     |           |
| Plea            | se check all of the following assets wi                                                                                    | hich you possess:                                                                                                          |           |
|                 | Certificates of Deposit- No. of CD'sBonds or Savings Bonds- No. of Bond Treasury Notes- No. of Notes Stocks- No. of Shares | ds                                                                                                                         |           |
|                 |                                                                                                                            |                                                                                                                            |           |
| -               | Trust Funds.                                                                                                               |                                                                                                                            |           |
|                 | Savings Accounts- No. of Accounts                                                                                          |                                                                                                                            |           |
|                 | Checking Accounts- No. of Accounts_                                                                                        |                                                                                                                            |           |
| -               | Money Market Accounts - No. of Acco                                                                                        |                                                                                                                            |           |
|                 | 401K, IRA or Annuity Accounts – No.                                                                                        |                                                                                                                            |           |
|                 | Life Insurance Policies – No. of policies                                                                                  | <del>2</del> 8                                                                                                             |           |
|                 | Other Investments. Please specify: _                                                                                       | <u> </u>                                                                                                                   |           |
|                 | Land and/or Home/Business Property                                                                                         |                                                                                                                            |           |
|                 | Other assets not listed above. Specif                                                                                      | y:                                                                                                                         |           |
|                 |                                                                                                                            |                                                                                                                            |           |
| l cer<br>failui | ify with my signature below that I have cle<br>to provide correct information constitut                                    | hecked and disclosed all sources of income and assets which apply to me.<br>les fraud and is punishable under federal law. | I realize |
|                 |                                                                                                                            |                                                                                                                            |           |
| Date            |                                                                                                                            | Borrower/Grantee's Signature                                                                                               |           |
|                 |                                                                                                                            | vanishin ambuku daritimkine mAdilibi ningtofffeen Arboli ♥ inap Adiffady da                                                |           |
|                 |                                                                                                                            |                                                                                                                            |           |
| Date            |                                                                                                                            | Borrower/Grantee's Signature                                                                                               |           |



## **GROSS INCOME INFORMATION**

| GROSS MONTHLY INCOME: BORROWER/GRANTEE                                                                                                                                           | BORROWER/GRANTEE                                                            | ADDITIONAL                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------|
| MONTHLY SALARY/ WAGES FROM FULL TIME EMPLOYMENT                                                                                                                                  |                                                                             |                                                                   |
| MONTHLY SALARY/WAGES FROM PART TIME EMPLOYMENT                                                                                                                                   |                                                                             |                                                                   |
| MONTHLY BONUS                                                                                                                                                                    |                                                                             |                                                                   |
| MONTHLY PENSION                                                                                                                                                                  |                                                                             |                                                                   |
| MONTHLY SOCIAL SECURITY                                                                                                                                                          |                                                                             |                                                                   |
| MONTHLY ALIMONY RECEIVED                                                                                                                                                         |                                                                             |                                                                   |
| MONTHLY CHILD SUPPORT RECEIVED                                                                                                                                                   |                                                                             |                                                                   |
| MONTHLY DIVIDENDS                                                                                                                                                                |                                                                             |                                                                   |
| MONTHLY INTEREST                                                                                                                                                                 |                                                                             |                                                                   |
| OTHER MONTHLY INCOME: (PLEASE SPECIFY)                                                                                                                                           |                                                                             |                                                                   |
| MONTHLY TOTAL: YOU MUST LIST ALL OF YOUR ASSETS (D                                                                                                                               | o not leave blank. Fill in zero if no                                       | asset exists):                                                    |
| Checking Account(s) Total Balance:                                                                                                                                               | Saving Account(s) Total Balance:                                            | Money Market Account(s)Total Balance:                             |
| Stocks and Bonds (non-retirement) Description:                                                                                                                                   |                                                                             |                                                                   |
| Total Balance ALL ASSESTS:  Copies of most recent statements from income including but not limited to pension this application in order for this application.                    | all assets, accounts, pay stubs, do<br>ons, SSI, child support, and alimony | cumentation of all sources of payments must be provided with      |
| FIRST TIME HO<br>I/ We hereby certify that I/we am/are<br>last three years. I verify that the staten<br>that false statements herein are made s<br>falsification to authorities. | nents made in this affidavit are tr                                         | /we have not owned a home within the ue and correct. I understand |
| Borrower/Grantee's Signature                                                                                                                                                     |                                                                             | Date                                                              |
| Borrower/Grantee's Signature                                                                                                                                                     |                                                                             | Date                                                              |



# Self Identification Form BORROW/GRANTEE HEAD OF HOUSEHOLD

The Redevelopment Authority of the County of Cumberland collects demographic information to understand the public utilization and impact of the program in Cumberland County.

## The information collected on this form does not impact your application in any way.

| 1. | What is your gender?  a. Male  b. Female  c. Prefer not to answer. | 4. Do you have a disabling condition?  a. Yes  b. No  c. Prefer not to answer. |
|----|--------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 2. | Race of Head of Household:  a. White  b. Asian                     | 5. Veteran Status? a. I am a veteran.                                          |
|    | c. Native Hawaiian/Other Pacific Islander                          | b. I am not a veteran                                                          |
|    | d. Black/African American                                          | c. I chose not to identify my veteran status.                                  |
|    | e. American Indian/Alaska Native<br>f. Two or More                 | d. Prefer not to answer.                                                       |
|    | g. Other/Unknown                                                   |                                                                                |
|    | h. Prefer not to answer.                                           |                                                                                |
| 3. | Ethnicity of Head of Household:                                    | Do you identify as an immigrant, refugee or "New American"?                    |
|    | a. Hispanic                                                        | a. Immigrant                                                                   |
|    | b. Non-Hispanic                                                    | b. Refugee<br>c. New American                                                  |
|    | b. Non hispanic                                                    | d. No                                                                          |
|    |                                                                    | e. Prefer not to answer.                                                       |
|    |                                                                    |                                                                                |
|    |                                                                    |                                                                                |
|    |                                                                    |                                                                                |
|    |                                                                    |                                                                                |





#### LOAN DISCLOSURE STATEMENT

| purchase of a single family home located at , with the                           |                                                                                     |   |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---|
| Township That Time Homeodyer Frogram to fund a portion of downpayment cost requi | Township First Time Homebuyer Program to fund a portion of downpayment cost require | r |

- 1. The Upper Darby Township loan is offered as a 0% interest loan. A total of 20% of the loan will be forgiven each year until the loan is fully forgiven after the five year Period of Affordability. The Period of Affordability begins upon loan closing.
- 2. It is undersood that, as a condition of receipt of the loan, the Borrower will occupy the home as their primary residence on a full time permanent basis.
- 3. An annually pro-rated portion of the assistance will become due and payable to Upper Darby Township upon any sale or transfer of the property, change in owner-occupancy status, default of first mortgage, or failure to remain current with all obligations and taxes to Upper Darby Township or other government agencies during the period of affordability.
- 4. The loan will be evidenced by a mortgage and secured as a second mortgage lien, to be executed at closing and recorded against the home. No application fee will be charged to obtain this loan.
- 5. Eligibility for the Upper Darby Township loan is based on the gross annual income of all adult Borrower household members, as defined by Upper Darby Township program requirements. Borrower's eligibility for the loan is subject to final review and approval of a complete application with all required documents for compliance with all requirements of the program.
- 6. To receive the Upper Darby Township loan, a visual paint inspection must be completed by Upper Darby Township. All paint surfaces must be intact (no peeling or chipping of paint or connect caulking) on the day of the inspection.

- The Upper Darby Township loan application will not be processed until the primary mortgage application has been completed and a mortgage commitment and lenders certification have been received.
- 8. The Borrower understands that, if the property does not pass the visual paint inspection, the property will not be eligible under the program. Corrections to the paint surfaces must be done prior to the inspection being requested.
- 9. The Borrower will be required to carry homeowners and, if applicable, floor insurance and private mortgage insurance (PMI) for the term of the Upper Darby Township loan sufficient to cover all outsdtanding liens, and provide a certificate naming Upper Darby Township as an additional lien holder. Evidence of insurance must be provided at closing and annually thereafter.
- 10. The Borrower(s) hereby waive any Privacy Act privileges and authorize the Lender to share financial information with Upper Darby Township. It is understood that Upper Darby Township will not release any such information received to others. Such information shall be used solely to verify eligibility requirements under this First Time Homebuyer Program.

It is essential that the Borrower and all other parties to this transaction be aware of all requirements for receipt of the Upper Darby Township loan. Your signature below will serve as confirmation that you are aware of these requirements. You are required to share this disclosure with your Agent and the Sellers.

| Borrower's Signature | Date |  |
|----------------------|------|--|
|                      |      |  |
| Borrower's Signature | Date |  |



## NOTICE TO SELLER AND SELLER'S AGENT

| Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Dear Seller,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| The following Buyer(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <ol> <li>Because this is a voluntary sale, by which you are willingly selling the residence to the Buyer, the Buyer cannot acquire this property if you and the Buyer(s) fail to reach an amicable sales agreement.</li> <li>The Buyer does not have the right of eminent domain (eminent domain is the power of the government to take property for public use).</li> <li>The Buyer's offers will be based on and may not exceed Fair Market Value as will be determined by an appraisal to be obtained by the Lender/Upper Darby Township.</li> <li>Because this is a voluntary sale, you are not entitled to any benefits under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.</li> </ol> |
| Further, in order to comply with certain Federal Regulations (49 CFR Part 24), the Buyer must request that you disclose whether you were renting your property to anyone at the time you signed the Agreement of Sale. Please complete the lines below to indicate whether there are or have been tenants on your property (please check all that apply):                                                                                                                                                                                                                                                                                                                                                                                       |
| I was renting all or part of my residence at the time I signed the Agreement of Sale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| I was not renting all or part of my residence at the time I signed the Agreement of Sale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| I have rented all or part of my residence since I signed the Agreement of Sale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| I have <i>not</i> rented any part of my residence since I signed the Agreement of Sale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

\_\_ The property is being rented by the Buyer.

Finally, after you have read this letter, you have the option not to continue with this method of financing. This decision is yours to make voluntarily.

You should have received two (2) copies of this letter. Please keep one for your records, and please sign the other copy on the applicable line below and return to the Buyer immediately, as the Buyer's loan application cannot be considered until they provide a copy of the signed notice to Upper Darby Township for review.

# <u>To Accept</u> IMPORTANT – READ BEFORE SIGNING

I/we certify that I/we, as sellers of a house to be assisted by a grant under Upper Darby Township's First Time Homebuyer Program, that the above statements are true, accurate, and complete to the best of my/our knowledge and belief, in order to support a request for Federal financial assistance. I/we understand that any false statements made knowingly and willfully may subject us to criminal penalties under Section 1001 of Title 18 of the United States Code.

I/we have read this letter, understand its contents, have answered the questions related to tenants on the property, and wish to proceed with the sale the Buyer(s).

| Seller's Signature                                             | Date                                            |
|----------------------------------------------------------------|-------------------------------------------------|
| Seller's Signature                                             | Date                                            |
|                                                                | To Decline                                      |
| e read this letter, understand its o                           | contents, but no longer wish to proceed with th |
| e read this letter, understand its coing.                      | contents, but no longer wish to proceed with th |
| re read this letter, understand its coing.  Seller's Signature | Date                                            |



## **CERTIFICATION BY LENDER**

| On behalf of                                         | (hereinafter called L                        | ender)  |
|------------------------------------------------------|----------------------------------------------|---------|
| I hereby certify to Upper Darby Township in the      | matter of a mortgage loan to be made to      |         |
|                                                      | _ (hereinafter called Borrowers), for the pu | ırchase |
| of a residence located at                            |                                              | ,       |
| under the Upper Darby Township First Time Ho         | mebuyer Program, a Federal funded progra     | am,     |
| that we are willing to lend \$                       | which is% of the pur                         | chase   |
| price. We certify that this amount is the maximum    | m amount which we will approve.              |         |
| I further certify that I am authorized by my empl    | oyer, the Lender, to make this certification |         |
| I certify that the above statement is true, accurate | e and complete to the best of my knowledge   | e and   |
| belief. I understand that any false statements m     | ade knowingly and willfully may subject t    | he      |
| Lender and myself to criminal penalties under        | Section 1001 of Title 18 of the United Stat  | tes     |
| Code.                                                |                                              |         |
| Name and Title                                       | Date                                         |         |
| Name of Lending Insitution                           | _                                            |         |
| Address of Lending Institution                       |                                              |         |



## TAX PAYMENT ACKNOWLEDGEMENT

I/We the undersigned, acknowledge that, in order to remain in compliance with the First Time Homebuyer Program, all of our obligations and taxes to Upper Darby Township and other local, county, state, and federal government agencies must be paid on time and remain current throughout the 5 (five) year mortgage agreement. Failure to comply with this policy will constitute a breach of contract and require immediate repayment of the First Time Homebuyer Grant Funds due at the time of the breach.

| Borrower's Signature | Date |  |
|----------------------|------|--|
| Borrower's Signature | Date |  |



## **CALCULATION SHEET**

Assistance up to \$20,000.00 may be provided The calculation for the amount of assistance will be done as follows:

| Property Sale Price:                                            |  |
|-----------------------------------------------------------------|--|
| PLUS Estimated Closing Costs:                                   |  |
| MINUS Mortgage Amount:                                          |  |
| MINUS minimum \$1,000 from Buyer:                               |  |
| MINUS any other payments or assistance:                         |  |
| Net amount of Upper Darby Township assistance (up to \$20,000): |  |



#### FULL HOME INSPECTION STATEMENT

I/We the undersigned, understand that, in order to receive assistance under the above program,
I/we must hire an ASHI or NHIA certified inspection company for a full home inspection. We
must present a copy of the paid receipt for the inspection, which shows the full name, address, and
phone number of the inspection service to Upper Darby Township.

Upper Darby Township's involvement in this agreement does not evaluate or imply warranty on any existing systems or condition, including, but not limited to, heating systems, roofing, electrical, etc. or any current or future code related issues other than the code requirements under the current Use & Occupancy (U&O) regulations.

| Borrower's Signature | Date |
|----------------------|------|
| Borrower's Signature | Date |
| Agent's Signature    | Date |



## PAINTED SURFACES INSPECTION STATEMENT

I/We the undersigned understand that, if there is any chipped, peeling, cracking or chalking paint **ANYWHERE** on the exterior or interior of the property, it must be repaired in order for the house to pass the visual inspection that will be conducted by Upper Darby Township's lead-based paint consultant. All corrections to painted surfaces must be made prior to that inspection, as any defective paint surfaces found by the inspector will make the property ineligible for inclusion under the program. **There will be no second inspection.** 

| Borrower's Signature | Date |  |
|----------------------|------|--|
| Borrower's Signature | Date |  |
| Agent's Signature    | Date |  |



#### NOTICE TO SELLER AND SELLER'S AGENT REGARDING PAINTED SURFACES

I/We the undersigned understand that, if there is any chipped, peeling, cracking or chalking paint **ANYWHERE** on the exterior or interior of the property, it must be repaired in order for the house to pass the visual inspection that will be conducted by Upper Darby Township's lead-based paint consultant. All corrections to painted surfaces must be made prior to that inspection, as any defective paint surfaces found by the inspector will make the property ineligible for inclusion under the program. **There will be no second inspection.** 

| Seller's Signature | Date |
|--------------------|------|
| Seller's Signature | Date |
| Agent's Signature  | Date |



#### HOMEOWNER'S CERTIFICATION OF PROGRAM COMPLIANCE

I/We, the undersigned homebuyer ("Buyer") of the single-family home, located at the above-listed address (the "Project"), having been allocated certain funds by Upper Darby Township, PA, for the purpose of purchasing the Project, does hereby certify under penalty of perjury the following:

- 1. That the above referenced property is intended to be, and will remain for the duration of the affordability period, the primary residence of the person(s) listed above;
- 2. That the above referenced property will not be vacant during the affordability period;
- 3. That the above referenced property will not be used as a rental housing unit.

If at any time during the affordability period, the Upper Darby Township First Time Homebuyer Program determines noncompliance with any of the above, the total amount of assistance provided to the Buyer shall be immediately due and payable. Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction. Violators will be referred to the appropriate authorities for criminal prosecution and the total amount of assistance provided to the Buyer shall be immediately due and payable.

Please note that failure to complete this form in its entirety or to provide any required enclosures will result in noncompliance with program requirements. In addition, any individual other than an owner or general partner of the property is not permitted to sign this form unless documentation to support signature authority is attached.

| Homebuyer Name(s) |      |  |
|-------------------|------|--|
| Property Address  |      |  |
| Signature         | Date |  |
| Signature         | Date |  |



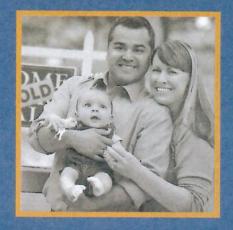
## LEAD PAMPHLET RECEIPT ACKNOWLEDGEMENT

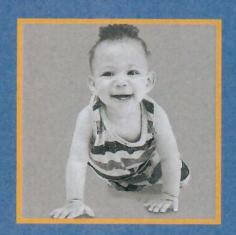
I/We, the undersigned have received a copy of the pamphlet entitled *Protect Your Family From Lead in Your Home* informing me of the potential risk of lead hazard exposure.

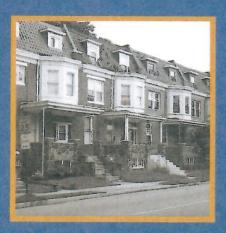
| Homebuyer Name(s) |      |
|-------------------|------|
| Property Address  |      |
| Signature         | Date |
| Signature         | Date |

Return this form to Upper Darby Township with your Application and keep the attached pamphlet for future reference.

Protect Your Family From Lead in Your Home is the last document included in the application package.







# Protect Your Family From Lead in Your Home



United States Environmental Protection Agency



United States Consumer Product Safety Commission



United States
Department of Housing
and Urban Development

# Are You Planning to Buy or Rent a Home Built Before 1978?

Did you know that many homes built before 1978 have lead-based paint? Lead from paint, chips, and dust can pose serious health hazards.

#### Read this entire brochure to learn:

- How lead gets into the body
- How lead affects health
- What you can do to protect your family
- · Where to go for more information

## Before renting or buying a pre-1978 home or apartment, federal law requires:

- Sellers must disclose known information on lead-based paint or leadbased paint hazards before selling a house.
- Real estate sales contracts must include a specific warning statement about lead-based paint. Buyers have up to 10 days to check for lead.
- Landlords must disclose known information on lead-based paint or lead-based paint hazards before leases take effect. Leases must include a specific warning statement about lead-based paint.

## If undertaking renovations, repairs, or painting (RRP) projects in your pre-1978 home or apartment:

 Read EPA's pamphlet, The Lead-Safe Certified Guide to Renovate Right, to learn about the lead-safe work practices that contractors are required to follow when working in your home (see page 12).



# Simple Steps to Protect Your Family from Lead Hazards

#### If you think your home has lead-based paint:

- Don't try to remove lead-based paint yourself.
- Always keep painted surfaces in good condition to minimize deterioration.
- Get your home checked for lead hazards. Find a certified inspector or risk assessor at epa.gov/lead.
- Talk to your landlord about fixing surfaces with peeling or chipping paint.
- Regularly clean floors, window sills, and other surfaces.
- Take precautions to avoid exposure to lead dust when remodeling.
- When renovating, repairing, or painting, hire only EPA- or stateapproved Lead-Safe certified renovation firms.
- Before buying, renting, or renovating your home, have it checked for lead-based paint.
- Consult your health care provider about testing your children for lead. Your pediatrician can check for lead with a simple blood test.
- Wash children's hands, bottles, pacifiers, and toys often.
- Make sure children eat healthy, low-fat foods high in iron, calcium, and vitamin C.
- Remove shoes or wipe soil off shoes before entering your house.

## **Lead Gets into the Body in Many Ways**

## Adults and children can get lead into their bodies if they:

- Breathe in lead dust (especially during activities such as renovations, repairs, or painting that disturb painted surfaces).
- Swallow lead dust that has settled on food, food preparation surfaces, and other places.
- Eat paint chips or soil that contains lead.

## Lead is especially dangerous to children under the age of 6.

- At this age, children's brains and nervous systems are more sensitive to the damaging effects of lead.
- Children's growing bodies absorb more lead.
- Babies and young children often put their hands and other objects in their mouths. These objects can have lead dust on them.



## Women of childbearing age should know that lead is dangerous to a developing fetus.

 Women with a high lead level in their system before or during pregnancy risk exposing the fetus to lead through the placenta during fetal development.

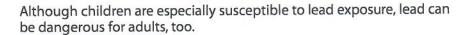
## Health Effects of Lead

**Lead affects the body in many ways.** It is important to know that even exposure to low levels of lead can severely harm children.

#### In children, exposure to lead can cause:

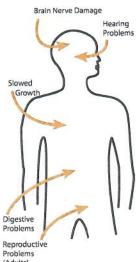
- Nervous system and kidney damage
- Learning disabilities, attention-deficit disorder, and decreased intelligence
- Speech, language, and behavior problems
- Poor muscle coordination
- · Decreased muscle and bone growth
- Hearing damage

While low-lead exposure is most common, exposure to high amounts of lead can have devastating effects on children, including seizures, unconsciousness, and in some cases, death.



#### In adults, exposure to lead can cause:

- · Harm to a developing fetus
- Increased chance of high blood pressure during pregnancy
- Fertility problems (in men and women)
- High blood pressure
- Digestive problems
- Nerve disorders
- Memory and concentration problems
- · Muscle and joint pain



## **Check Your Family for Lead**

Get your children and home tested if you think your home has lead.

Children's blood lead levels tend to increase rapidly from 6 to 12 months of age, and tend to peak at 18 to 24 months of age.

Consult your doctor for advice on testing your children. A simple blood test can detect lead. Blood lead tests are usually recommended for:

- Children at ages 1 and 2
- Children or other family members who have been exposed to high levels of lead
- Children who should be tested under your state or local health screening plan

Your doctor can explain what the test results mean and if more testing will be needed.

#### Where Lead-Based Paint Is Found

In general, the older your home or childcare facility, the more likely it has lead-based paint.<sup>1</sup>

Many homes, including private, federally-assisted, federally-owned housing, and childcare facilities built before 1978 have lead-based paint. In 1978, the federal government banned consumer uses of lead-containing paint.<sup>2</sup>

Learn how to determine if paint is lead-based paint on page 7.

#### Lead can be found:

- In homes and childcare facilities in the city, country, or suburbs,
- In private and public single-family homes and apartments,
- · On surfaces inside and outside of the house, and
- In soil around a home. (Soil can pick up lead from exterior paint or other sources, such as past use of leaded gas in cars.)

Learn more about where lead is found at epa.gov/lead.

<sup>&</sup>lt;sup>1</sup> "Lead-based paint" is currently defined by the federal government as paint with lead levels greater than or equal to 1.0 milligram per square centimeter (mg/cm²), or more than 0.5% by weight.

<sup>&</sup>lt;sup>2</sup> "Lead-containing paint" is currently defined by the federal government as lead in new dried paint in excess of 90 parts per million (ppm) by weight.

# Identifying Lead-Based Paint and Lead-Based Paint Hazards

**Deteriorated lead-based paint (peeling, chipping, chalking, cracking, or damaged paint)** is a hazard and needs immediate attention. **Lead-based paint** may also be a hazard when found on surfaces that children can chew or that get a lot of wear and tear, such as:

- On windows and window sills
- Doors and door frames
- Stairs, railings, banisters, and porches

**Lead-based paint is usually not a hazard if it is in good condition** and if it is not on an impact or friction surface like a window.

**Lead dust** can form when lead-based paint is scraped, sanded, or heated. Lead dust also forms when painted surfaces containing lead bump or rub together. Lead paint chips and dust can get on surfaces and objects that people touch. Settled lead dust can reenter the air when the home is vacuumed or swept, or when people walk through it. EPA currently defines the following levels of lead in dust as hazardous:

- 10 micrograms per square foot (µg/ft²) and higher for floors, including carpeted floors
- 100 μg/ft² and higher for interior window sills

**Lead in soil** can be a hazard when children play in bare soil or when people bring soil into the house on their shoes. EPA currently defines the following levels of lead in soil as hazardous:

- 400 parts per million (ppm) and higher in play areas of bare soil
- 1,200 ppm (average) and higher in bare soil in the remainder of the yard

Remember, lead from paint chips—which you can see—and lead dust—which you may not be able to see—both can be hazards.

The only way to find out if paint, dust, or soil lead hazards exist is to test for them. The next page describes how to do this.

## **Checking Your Home for Lead**

You can get your home tested for lead in several different ways:

- A lead-based paint inspection tells you if your home has leadbased paint and where it is located. It won't tell you whether your home currently has lead hazards. A trained and certified testing professional, called a lead-based paint inspector, will conduct a paint inspection using methods, such as:
  - Portable x-ray fluorescence (XRF) machine
  - Lab tests of paint samples
- A risk assessment tells you if your home currently has any lead hazards from lead in paint, dust, or soil. It also tells you what actions to take to address any hazards. A trained and certified testing professional, called a risk assessor, will:
  - Sample paint that is deteriorated on doors, windows, floors, stairs, and walls
  - Sample dust near painted surfaces and sample bare soil in the yard
  - Get lab tests of paint, dust, and soil samples
- A combination inspection and risk assessment tells you if your home has any lead-based paint and if your home has any lead hazards, and where both are located.

Be sure to read the report provided to you after your inspection or risk assessment is completed, and ask questions about anything you do not understand.

## Checking Your Home for Lead, continued

In preparing for renovation, repair, or painting work in a pre-1978 home, Lead-Safe Certified renovators (see page 12) may:

- Take paint chip samples to determine if lead-based paint is
  present in the area planned for renovation and send them to an
  EPA-recognized lead lab for analysis. In housing receiving federal
  assistance, the person collecting these samples must be a certified
  lead-based paint inspector or risk assessor
- Use EPA-recognized tests kits to determine if lead-based paint is absent (but not in housing receiving federal assistance)
- Presume that lead-based paint is present and use lead-safe work practices

There are state and federal programs in place to ensure that testing is done safely, reliably, and effectively. Contact your state or local agency for more information, visit epa.gov/lead, or call **1-800-424-LEAD** (5323) for a list of contacts in your area.<sup>3</sup>

<sup>&</sup>lt;sup>3</sup> Hearing- or speech-challenged individuals may access this number through TTY by calling the Federal Relay Service at 1-800-877-8339.

## What You Can Do Now to Protect Your Family

## If you suspect that your house has lead-based paint hazards, you can take some immediate steps to reduce your family's risk:

- If you rent, notify your landlord of peeling or chipping paint.
- Keep painted surfaces clean and free of dust. Clean floors, window frames, window sills, and other surfaces weekly. Use a mop or sponge with warm water and a general all-purpose cleaner. (Remember: never mix ammonia and bleach products together because they can form a dangerous gas.)
- · Carefully clean up paint chips immediately without creating dust.
- Thoroughly rinse sponges and mop heads often during cleaning of dirty or dusty areas, and again afterward.
- Wash your hands and your children's hands often, especially before they eat and before nap time and bed time.
- Keep play areas clean. Wash bottles, pacifiers, toys, and stuffed animals regularly.
- Keep children from chewing window sills or other painted surfaces, or eating soil.
- When renovating, repairing, or painting, hire only EPA- or stateapproved Lead-Safe Certified renovation firms (see page 12).
- Clean or remove shoes before entering your home to avoid tracking in lead from soil.
- Make sure children eat nutritious, low-fat meals high in iron, and calcium, such as spinach and dairy products. Children with good diets absorb less lead.

## **Reducing Lead Hazards**

Disturbing lead-based paint or removing lead improperly can increase the hazard to your family by spreading even more lead dust around the house.

 In addition to day-to-day cleaning and good nutrition, you can temporarily reduce lead-based paint hazards by taking actions, such as repairing damaged painted surfaces and planting grass to cover leadcontaminated soil. These actions are not permanent solutions and will need ongoing attention.



- You can minimize exposure to lead when renovating, repairing, or painting by hiring an EPA- or statecertified renovator who is trained in the use of lead-safe work practices. If you are a do-it-yourselfer, learn how to use lead-safe work practices in your home.
- To remove lead hazards permanently, you should hire a certified lead abatement contractor. Abatement (or permanent hazard elimination) methods include removing, sealing, or enclosing lead-based paint with special materials. Just painting over the hazard with regular paint is not permanent control.

## Always use a certified contractor who is trained to address lead hazards safely.

- Hire a Lead-Safe Certified firm (see page 12) to perform renovation, repair, or painting (RRP) projects that disturb painted surfaces.
- To correct lead hazards permanently, hire a certified lead abatement contractor. This will ensure your contractor knows how to work safely and has the proper equipment to clean up thoroughly.

Certified contractors will employ qualified workers and follow strict safety rules as set by their state or by the federal government.

## Reducing Lead Hazards, continued

If your home has had lead abatement work done or if the housing is receiving federal assistance, once the work is completed, dust cleanup activities must be conducted until clearance testing indicates that lead dust levels are below the following levels:

- 10 micrograms per square foot (µg/ft²) for floors, including carpeted
- 100 μg/ft² for interior windows sills
- 400 µg/ft² for window troughs

Abatements are designed to permanently eliminate lead-based paint hazards. However, lead dust can be reintroduced into an abated area.

- Use a HEPA vacuum on all furniture and other items returned to the area, to reduce the potential for reintroducing lead dust.
- Regularly clean floors, window sills, troughs, and other hard surfaces with a damp cloth or sponge and a general all-purpose cleaner.

Please see page 9 for more information on steps you can take to protect your home after the abatement. For help in locating certified lead abatement professionals in your area, call your state or local agency (see pages 15 and 16), epa.gov/lead, or call 1-800-424-LEAD.

## Renovating, Repairing or Painting a Home with Lead-Based Paint

If you hire a contractor to conduct renovation, repair, or painting (RRP) projects in your pre-1978 home or childcare facility (such as pre-school and kindergarten), your contractor must:

- Be a Lead-Safe Certified firm approved by EPA or an EPA-authorized state program
- Use qualified trained individuals (Lead-Safe Certified renovators) who follow specific lead-safe work practices to prevent lead contamination
- Provide a copy of EPA's lead hazard information document, The Lead-Safe Certified Guide to Renovate Right



# RRP contractors working in pre-1978 homes and childcare facilities must follow lead-safe work practices that:

- Contain the work area. The area must be contained so that dust and debris do not escape from the work area. Warning signs must be put up, and plastic or other impermeable material and tape must be used.
- Avoid renovation methods that generate large amounts of lead-contaminated dust. Some methods generate so much leadcontaminated dust that their use is prohibited. They are:
  - Open-flame burning or torching
  - Sanding, grinding, planing, needle gunning, or blasting with power tools and equipment not equipped with a shroud and HEPA vacuum attachment
  - Using a heat gun at temperatures greater than 1100°F
- Clean up thoroughly. The work area should be cleaned up daily.
   When all the work is done, the area must be cleaned up using special cleaning methods.
- Dispose of waste properly. Collect and seal waste in a heavy duty bag or sheeting. When transported, ensure that waste is contained to prevent release of dust and debris.

To learn more about EPA's requirements for RRP projects, visit epa.gov/getleadsafe, or read *The Lead-Safe Certified Guide to Renovate Right*.

## Other Sources of Lead

## Lead in Drinking Water

The most common sources of lead in drinking water are lead pipes, faucets, and fixtures.

Lead pipes are more likely to be found in older cities and homes built before 1986.

You can't smell or taste lead in drinking water.

To find out for certain if you have lead in drinking water, have your water tested.

Remember older homes with a private well can also have plumbing materials that contain lead.

# Important Steps You Can Take to Reduce Lead in Drinking Water

- Use only cold water for drinking, cooking and making baby formula.
   Remember, boiling water does not remove lead from water.
- Before drinking, flush your home's pipes by running the tap, taking a shower, doing laundry, or doing a load of dishes.
- Regularly clean your faucet's screen (also known as an aerator).
- If you use a filter certified to remove lead, don't forget to read the
  directions to learn when to change the cartridge. Using a filter after it
  has expired can make it less effective at removing lead.

Contact your water company to determine if the pipe that connects your home to the water main (called a service line) is made from lead. Your area's water company can also provide information about the lead levels in your system's drinking water.

For more information about lead in drinking water, please contact EPA's Safe Drinking Water Hotline at 1-800-426-4791. If you have other questions about lead poisoning prevention, call 1-800 424-LEAD.\*

Call your local health department or water company to find out about testing your water, or visit epa.gov/safewater for EPA's lead in drinking water information. Some states or utilities offer programs to pay for water testing for residents. Contact your state or local water company to learn more.

<sup>\*</sup> Hearing- or speech-challenged individuals may access this number through TTY by calling the Federal Relay Service at 1-800-877-8339.

## Other Sources of Lead, continued

- Lead smelters or other industries that release lead into the air.
- Your job. If you work with lead, you could bring it home on your body or clothes. Shower and change clothes before coming home. Launder your work clothes separately from the rest of your family's clothes.
- Hobbies that use lead, such as making pottery or stained glass, or refinishing furniture. Call your local health department for information about hobbies that may use lead.
- Old toys and furniture may have been painted with lead-containing paint. Older toys and other children's products may have parts that contain lead.<sup>4</sup>
- Food and liquids cooked or stored in lead crystal or lead-glazed pottery or porcelain may contain lead.
- Folk remedies, such as "greta" and "azarcon," used to treat an upset stomach.

In 1978, the federal government banned toys, other children's products, and furniture with lead-containing paint. In 2008, the federal government banned lead in most children's products. The federal government currently bans lead in excess of 100 ppm by weight in most children's products.

## For More Information

## The National Lead Information Center

Learn how to protect children from lead poisoning and get other information about lead hazards on the Web at epa.gov/lead and hud.gov/lead, or call 1-800-424-LEAD (5323).

## **EPA's Safe Drinking Water Hotline**

For information about lead in drinking water, call 1-800-426-4791, or visit epa.gov/safewater for information about lead in drinking water.

## Consumer Product Safety Commission (CPSC) Hotline

For information on lead in toys and other consumer products, or to report an unsafe consumer product or a product-related injury, call 1-800-638-2772, or visit CPSC's website at cpsc.gov or saferproducts.gov.

## State and Local Health and Environmental Agencies

Some states, tribes, and cities have their own rules related to leadbased paint. Check with your local agency to see which laws apply to you. Most agencies can also provide information on finding a lead abatement firm in your area, and on possible sources of financial aid for reducing lead hazards. Receive up-to-date address and phone information for your state or local contacts on the Web at epa.gov/lead, or contact the National Lead Information Center at 1-800-424-LEAD.

Hearing- or speech-challenged individuals may access any of the phone numbers in this brochure through TTY by calling the tollfree Federal Relay Service at 1-800-877-8339.

## U. S. Environmental Protection Agency (EPA) Regional Offices

The mission of EPA is to protect human health and the environment. Your Regional EPA Office can provide further information regarding regulations and lead protection programs.

**Region 1** (Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, Vermont)

Regional Lead Contact U.S. EPA Region 1 5 Post Office Square, Suite 100, OES 05-4 Boston, MA 02109-3912 (888) 372-7341

**Region 2** (New Jersey, New York, Puerto Rico, Virgin Islands)

Regional Lead Contact U.S. EPA Region 2 2890 Woodbridge Avenue Building 205, Mail Stop 225 Edison, NJ 08837-3679 (732) 906-6809

Region 3 (Delaware, Maryland, Pennsylvania, Virginia, DC, West Virginia)

Regional Lead Contact U.S. EPA Region 3 1650 Arch Street Philadelphia, PA 19103 (215) 814-2088

**Region 4** (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)

Regional Lead Contact U.S. EPA Region 4 AFC Tower, 12th Floor, Air, Pesticides & Toxics 61 Forsyth Street, SW Atlanta, GA 30303 (404) 562-8998

**Region 5** (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)

Regional Lead Contact U.S. EPA Region 5 (LL-17J) 77 West Jackson Boulevard Chicago, IL 60604-3666 (312) 353-3808 **Region 6** (Arkansas, Louisiana, New Mexico, Oklahoma, Texas, and 66 Tribes)

Regional Lead Contact U.S. EPA Region 6 1445 Ross Avenue, 12th Floor Dallas, TX 75202-2733 (214) 665-2704

Region 7 (Iowa, Kansas, Missouri, Nebraska)

Regional Lead Contact U.S. EPA Region 7 11201 Renner Blvd. Lenexa, KS 66219 (800) 223-0425

**Region 8** (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)

Regional Lead Contact U.S. EPA Region 8 1595 Wynkoop St. Denver, CO 80202 (303) 312-6966

**Region 9** (Arizona, California, Hawaii, Nevada)

Regional Lead Contact U.S. EPA Region 9 (CMD-4-2) 75 Hawthorne Street San Francisco, CA 94105 (415) 947-4280

**Region 10** (Alaska, Idaho, Oregon, Washington)

Regional Lead Contact U.S. EPA Region 10 (20-C04) Air and Toxics Enforcement Section 1200 Sixth Avenue, Suite 155 Seattle, WA 98101 (206) 553-1200

# **Consumer Product Safety Commission (CPSC)**

The CPSC protects the public against unreasonable risk of injury from consumer products through education, safety standards activities, and enforcement. Contact CPSC for further information regarding consumer product safety and regulations.

#### CPSC

4330 East West Highway Bethesda, MD 20814-4421 1-800-638-2772 cpsc.gov or saferproducts.gov

# U.S. Department of Housing and Urban Development (HUD)

HUD's mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. Contact to Office of Lead Hazard Control and Healthy Homes for further information regarding the Lead Safe Housing Rule, which protects families in pre-1978 assisted housing, and for the lead hazard control and research grant programs.

#### HUD

451 Seventh Street, SW, Room 8236 Washington, DC 20410-3000 (202) 402-7698 hud.gov/lead

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U. S. EPA Washington DC 20460 U. S. CPSC Bethesda MD 20814

U. S. HUD Washington DC 20410

EPA-747-K-12-001 March 2021

## **IMPORTANT!**

## Lead From Paint, Dust, and Soil in and Around Your Home Can Be Dangerous if Not Managed Properly

- Children under 6 years old are most at risk for lead poisoning in your home.
- Lead exposure can harm young children and babies even before they are born.
- Homes, schools, and child care facilities built before 1978 are likely to contain lead-based paint.
- Even children who seem healthy may have dangerous levels of lead in their bodies.
- Disturbing surfaces with lead-based paint or removing lead-based paint improperly can increase the danger to your family.
- People can get lead into their bodies by breathing or swallowing lead dust, or by eating soil or paint chips containing lead.
- People have many options for reducing lead hazards.
   Generally, lead-based paint that is in good condition is not a hazard (see page 10).