



City of Rancho Cucamonga

Housing Rehabilitation Program
Program Application

June 2023

City of Rancho Cucamonga
Planning Department
10500 Civic Center Drive
Rancho Cucamonga, CA 91730

Application Process

Please review the General Qualifications and Conditions for Program Eligibility section of this application package and ensure that it is signed and that all sections of the program application are complete and accurate before your submittal. The application period will remain open until all funds have been awarded for the program year. Applicants that are not funded in the current year will be placed on a waiting list for the next year.

Applications may be submitted via the online submission portal by clicking on the link below and entering the login credentials provided. Please note that the username and password are case sensitive:

Portal: [Rancho Cucamonga Housing Rehabilitation Application Portal](#)
Username: Grantee@mdg-ldm.com
Password: Grants1!

Alternatively, applicants may print, complete, and mail or hand-deliver the hard-copy application and supporting documentation to:

City of Rancho Cucamonga
 Paige N. Eberle
 10500 Civic Center Drive
 Rancho Cucamonga, CA 91730

Submission of an application does not guarantee a grant award. Applications will be time-stamped and reviewed for completeness and compliance with program requirements on a first-come, first-qualified basis. Applicants may be required to submit additional documentation or detail. Applicants will have 14 calendar days to submit supplemental materials, as requested by the City. The City has partnered with MDG Associates, Inc., to assist in the implementation of the program. Upon submittal of the application, you will be contacted by their staff via mail and/or telephone to inform you as to the status of your application. Should you have any questions or need guidance regarding the application process, please contact MDG Associates, Inc. at (909) 476-9696 ext. 108, or via email at jrios@mdg-ldm.com.

Application Submittal Checklist

The checklist below assists applicants in ensuring that they are submitting a complete Housing Rehabilitation application package. Failure to submit the required documents will result in a delay in the review or result in the denial for participation in the program.

Application Submission Checklist	
1. The program Application Form, fully completed and signed where required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. The signed General Qualifications and Conditions form included in the packet?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Copy of three months of income documentation for all adults over the age of 18?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Copy of the most recent Federal Income Tax return for all adults over the age of 18?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Copy of latest quarter statement for accounts in Asset Accounts section of application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Copy of 3 months of the most recent savings and checking account statements	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Copy of the Grant Deed or Deed of Trust for the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Copy of the current property insurance declaration page?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Copy of the most recent Property Tax bill?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Copy of a recent utility bill that is not a trash or water bill?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Copy of a recent mortgage statement for the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Completed the Verification of Employment form of the application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Signed copy of confirmation of receipt – lead based paint brochure	<input type="checkbox"/> Yes <input type="checkbox"/> No
14. Copy of photo identification of all persons who are on title to the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No



GENERAL QUALIFICATIONS AND CONDITIONS FOR PROGRAM ELIGIBILITY

1. The intent of the Housing Rehabilitation Program (HRP) is to provide financial assistance to low- and moderate-income owner-occupants of residential single-family dwelling or mobile homes eligible for the preservation of decent, safe, and sanitary housing; to correct hazardous structural conditions; to make improvements considered necessary to eliminate blight; and, to correct building and health code violations by awarding grants or loans. All property to be repaired must be eligible residential property located within the city limits of the City of Rancho Cucamonga.

Emergency Repair Program (ERP) provides a grant of up to \$5,000 for the emergency home repairs. There is no limit to the number of times an applicant may apply, however an emergency condition must exist, per the Program Guidelines. In the event the applicant's emergency need exceeds the grant limit, the City also offers a Minor Home Repair Program (MHRP) and a Housing Rehabilitation Loan Program (HRLP).

Minor Home Repair Program (MHRP) provides a grant of up to \$15,000 for the minor home repairs. Applicants assisted under the Emergency Repair Program (ERP), shall only be eligible for the difference of \$15,000 and the expended amount under the ERP. There is a limit of one (1) MHRP grant per eligible homeowner every five (5) years. In the event the applicant's need exceeds the grant limit, the City also offers a Housing Rehabilitation Loan Program (HRLP).

Housing Rehab Loan Program (HRLP) provides a grant of up to \$15,000 and loan amount of no less than \$5,000 and no more than \$20,000 for a potential combined funding amount of \$35,000 for eligible improvements. Applicants assisted under the Emergency Repair Program (ERP), shall only be eligible for the difference of \$15,000 grant and the expended amount under the ERP. There is a limit of one (1) MHRP grant per eligible homeowner every five (5) years. Applicants under the HRLP are not allowed to apply for funding under the MHRP and will have to meet additional qualifications, deed restrictions and maintenance covenants.

Loans are deferred and accrue zero percent (0%) interest. HRLP loans are due at the sooner of the expiration of their maturity date (see Loan Repayment Structure in this document), upon any sale of property, transfer of title, or a cash-out refinance. There is a limit of one HRLP loan and grant per eligible homeowner. Loans are not available to mobile home applicants.

CDBG funds will be used to pay for actual construction costs and eligible project soft costs. Actual amounts of the loans will be determined by the City approved construction costs associated with the HRLP improvements. All CDBG and HOME funded Grants are limited and subject to the availability of the program funds on an annual basis as provided by HUD and as budgeted by the City of Rancho Cucamonga City Council as part of the adopted Annual Action Plan.

The maximum allowable loan to value ratio for all indebtedness on the properties to be assisted is 95% of the pre-rehabilitation appraised value of the property, inclusive of all City liens. The maximum secured lien is \$20,000 and maximum total project cost is \$30,000.

2. In order to participate, GROSS household income may not exceed those listed in Table A below. Household GROSS income includes all income from all household members living in the property to be repaired.

TABLE A: 2023 CDBG Income Limits		
Household Size	50% of Area Median Income	80% of Area Median Income
1	\$32,650	\$52,200
2	\$37,300	\$59,650
3	\$41,950	\$67,100
4	\$46,600	\$74,550
5	\$50,350	\$80,550
6	\$54,100	\$86,500
7	\$57,800	\$92,450
8	\$61,550	\$98,450
<i>Effective June 15, 2023 for the Riverside-San Bernardino-Ontario, CA MSA</i>		

3. The City, as part of its role as construction lender, will prepare the description of work to be completed and will provide all necessary documentation to the homeowner to assist them in the procurement and contracting process to retain a qualified construction contractor to complete the required repairs. Contracts shall be awarded to the lowest of the bids from qualified contractors that are obtained by the homeowner (minimum of three bids required).
4. Subsequent to all required program approvals and the execution of a Grant and/or Loan Acceptance Agreement or an Improvement Agreement and other Grant documents as applicable, the homeowner will be authorized to contract through the City's prepared agreements with appropriately licensed (usually a general contractor [also referred to herein as a "B-licensed" contractor]) contractors who maintain a current license in good standing with the Contractors State License Board, may not be disbarred and be registered with the System for Award Management (SAM), who have the required general liability and workmen's compensation insurance coverage, and who will obtain or already have a City business license.
5. Rehabilitation work may not commence until all permits are issued and a Notice to Proceed is issued by the City of Rancho Cucamonga.
6. The City of Rancho Cucamonga will not be responsible for any personal funds advanced to the Contractor or any expenses incurred on your own. Side agreements entered into with the Contractor are prohibited.
7. All funds are disbursed through the City upon receipt of an invoice and proper documentation from the contractor, inspection, as well as written consent from the homeowner and the City. All funds disbursed are payable to the contractor for work performed, with a 10% retention amount withheld.
8. Program Grant proceeds may only be used for the costs of services and materials necessary to carry out the repair work. No direct payments shall be made to the homeowner.
9. Previously contracted or commenced work or materials purchased are not eligible for reimbursement or for the continuation of work underway. Do not sign any contractor provided agreements or contracts to perform work.

10. Eligible repairs may include work to be performed on the main residential unit and accessory structures (if allowed) on the property. Although the owner has the opportunity to request specific repairs in the program application, the City will establish the priority of repairs included in the Grant-funded work scope as determined by the regulatory requirements of the funding source and the Program Guidelines. Eligible items include but are not limited to the following:

- Correction of code violations;
- Correction of incipient violations of the uniform building code;
- Cost effective energy conservation measures (windows and doors);
- Removal of lead-based paint/asbestos hazards;
- Removal of barriers to the disabled;
- Removal of rodents and roaches (pest control)
- Removal of termites;
- Replace roofing;
- Replace water heaters;
- Repair/Replace heating;
- Repair/Replace plumbing;
- Repair/Replace screens;
- Repair/Replace electrical work;
- Repair/Replace windows;
- Repair/replace stucco;
- Install new smoke and carbon monoxide alarms;
- Install new dead bolt locks;
- Repair kitchen or bath cabinets;
- Installation of new insulation;
- Any items determined eligible by the Program Review Committee; and
- The elimination of specific conditions detrimental to public health and safety, as identified by the City.

11. Applicants must provide proof of ownership of the property to be repaired.

12. Applicants shall permit City of Rancho Cucamonga staff or its agents to conduct necessary property and repair work inspections. The applicant is advised that all portions of the property must be made accessible at the time of inspection, and that the owner must be present.

13. Applicants are advised that any illegal or non-complying conditions present on the property, including but not limited to: construction that lacks permits (such as illegal add-ons or accessory structures, garage conversions, patios, un-permitted interior alterations, window replacements, etc.) and conditions that lack compliance with planning requirements (such as over-height fencing, elimination of required yard areas, property maintenance concerns, etc.) will be reported to City Code Enforcement staff. Repair of these conditions with owner funds may be required prior to the provision of the any City assistance.

14. The City of Rancho Cucamonga reserves the right to deny requests in specific instances where the repairs to be completed do not conform to these or other program guidelines.

15. The City of Rancho Cucamonga determines the eligibility of the applicant to the program.

16. Lead-Based Paint. Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Prior to disturbance, remodeling or demolition activities, these materials should be properly sampled and/or abated by a certified, licensed Lead Professional.

17. Asbestos. Buildings constructed prior to 1980 are likely to contain Asbestos. Confirming that a material is an asbestos-containing requires sampling of the material by certified asbestos professionals, then analysis by a licensed asbestos analytical laboratory to determine if the samples are asbestos-containing. Any material that is “presumed” to contain asbestos must be treated as “asbestos-containing” and therefore, if considered an asbestos hazard must be properly abated by an asbestos abatement contractor prior to any building renovation or demolition activities.

18. The undersigned acknowledges that for those projects in which Federal funds are used to perform housing rehabilitation repairs, the City may be required to have the subject property inspected and tested for the presence of lead-based paint and/or asbestos hazards. The costs associated with the lead or asbestos testing typically range between \$300-\$1,000, depending on the severity (or lack thereof) of the presence of lead or asbestos. Should a lead or asbestos hazard be discovered, abatement or mitigation of the hazard will take priority over all other housing repairs. Please keep in mind that abatement or mitigation measures may be costly. Therefore, depending on the severity of the presence of lead and/or asbestos, if any, you may not be able to perform all the housing repairs indicated in your scope of work. Please note that all costs associated with the testing and/or abatement services will be included as part of the overall funding award for each project. No out-of-pocket expenses will be incurred.

19. After a property is inspected for the presence of lead-based paint, a report is prepared that describes any lead hazards in the home. **Federal Law (24 CFR part 35 and 40 CFR part 745) mandates that any report related to the presence of lead-based paint in your home must be provided to new lessees (tenants) and purchasers of your property before they become obligated under a lease or sales contract.** In other words, make sure that you keep a copy of any lead reports that you may obtain through this program and be sure to provide a copy to any potential renter or buyer in the future.

I/WE have read and understand the foregoing general qualifications and conditions for program eligibility. I/WE further understand that any misstatements, omissions, misrepresentations, deletions, falsifications, or other actions which result in MY/OUR not conforming to the requirements listed above in other contract documentation will subject MY/OUR application to immediate cancellation and cause any disbursed funds to become immediately due and payable and may cause further legal action if warranted.

Owner's Signature

Date

Owner's Signature

Date

PROGRAM APPLICATION

Instructions

All applicants must complete Part I of the application document (pages 5 -8). If you have not previously received a grant through the Housing Rehabilitation Program (HRP).

Please provide information for all owner(s)/occupant(s) of the property listed on title:

Address of Property		
Phone Number (Day)	Phone Number (Day)	email address:

Applicant		Spouse/Co-Applicant	
Name		Name	
SSN	Date of Birth	SSN	Date of Birth

Please provide the following demographic information for both ethnic and racial background. This information which will be strictly confidential and is requested for statistical reporting purposes only. Select the most appropriate category:

Ethnic Background: Hispanic Non-Hispanic

Racial Background:

- | | |
|--|---|
| <input type="checkbox"/> White
<input type="checkbox"/> Asian
<input type="checkbox"/> Native Hawaiian/Other Pacific Islander
<input type="checkbox"/> American Indian/Alaskan Native & White
<input type="checkbox"/> American Indian/Alaskan Native & African American | <input type="checkbox"/> Black/African American
<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Black/African American & White
<input type="checkbox"/> Asian & White
<input type="checkbox"/> Other |
|--|---|

Head of household: Male Female

Are any members of your household disabled? YES NO

Is this a single-female headed household? YES NO

Please answer the following questions:

Do you own the above listed property ? YES NO

How long have you owned the property? _____ Years

Are you a permanent full-time resident of this property? YES NO

Are the property taxes current on the above-listed property? YES NO

Are all financial obligations current for which the property is collateral? YES NO

Are there any current or pending liens against the above-listed property? YES NO

Have you previously received Housing Rehabilitation Program financial assistance from the City? YES NO

If yes, please describe the assistance received and the date of receipt: _____

Employment and Income

APPLICANT		SPOUSE/CO-APPLICANT	
Current Employer		Current Employer	
Employer Address		Employer Address	
Business Phone		Business Phone	
Position		Position	
Length of Time Currently Employed	Current Annual Gross Income	Length of Time Currently Employed	Current Annual Gross Income
List and Explain any Additional Sources of Income within the Household			

Household Gross Income Information

Complete the following for all persons residing at the address of the property to be repaired (attach additional sheets if necessary).

Applicant Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No		Annual Gross Income
Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship to Applicant	Annual Gross Income
Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship to Applicant	Annual Gross Income
Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship to Applicant	Annual Gross Income
Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship to Applicant	Annual Gross Income
Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship to Applicant	Annual Gross Income
Name	Age	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Relationship to Applicant	Annual Gross Income
Enter Household Size: _____ persons		Enter Total Annual Gross Household Income: \$ _____		

Please list All Applicable Savings and Checking Account Information for Each Account Held

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Please list All Other Asset Accounts and their respective values

Account Category	Current Cash Value
Stocks/Bond/Other Investment Accounts	\$
Life Insurance Net Cash Value	\$
Net Worth of Business	\$
Other Assets (list) _____	\$
Other Assets (list) _____	\$

RELEASE OF INFORMATION

I/we, _____, the undersigned hereby authorize

_____ ,
to release without liability to the City of Rancho Cucamonga or its agents, any and all information they may request.

Information Covered

I understand that, depending on program policies and requirements, previous or current information regarding my household or me may be needed. Verification and inquiries that may be requested include, but are not limited to:

- | | |
|---------------------------------|--------------------------------|
| Identity and Marital Status | Employment, Income, and Assets |
| Medical or Child Care Allowance | Credit and Criminal Activity |
| Residences and Rental Activity | |

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for, and continued participation in the Housing Rehabilitation Program.

Groups Or Individuals That May Be Asked

The groups or individuals that may be asked to release information (depending on program requirements) include, but are not limited to:

- | | |
|-------------------------------|--|
| Previous Landlords | Welfare Agencies |
| Courts and Post Offices | State Unemployment Agencies |
| Schools and Colleges | Social Security Administration |
| Law Enforcement Agencies | Medical and Child Care Providers |
| Support and Alimony Providers | Banks and other Financial Institutions |
| Veterans Administration | Retirement Systems |
| Utility Companies | Credit Providers and Credit Bureaus |
| Credit Rating Agencies | Real Estate Appraisers |
| Home Inspection Report | Internal Revenue Service |

Conditions

I agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization will be retained by the Agency and remain in effect for one year from the date signed. I understand I have a right to review my file and correct any information that I can prove is incorrect.

Signature (Applicant)

(Print Name)

Date

Signature (Co-Applicant)

(Print Name)

Date

Request For Verification of Employment

Applicant: Complete and/or confirm items 1 through 8 and sign on item 8A. The City will forward the completed form to the employer named in item 1.

Employer: Complete either parts II and IV or parts III and IV. Return form directly to the office identified in item 2 of Part 1.

Part I - Request

1. TO: (Name and Address of Employer)	2. FROM: This item must be completed before sending to employer City of Rancho Cucamonga c/o Community Development Department 10500 Civic Center Drive Rancho Cucamonga, CA 91730		
3. I certify that this <i>verification</i> has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party. _____ (Signature of lender)	4. TITLE OF LENDER OFFICIAL City of Rancho Cucamonga	5. DATE	6. PROGRAM CDBG Program
7. NAME AND ADDRESS OF APPLICANT	I have applied for a locally funded loan for an affordable housing property, and stated that I am or was employed by you. My signature in the block below authorizes verification of my employment information. 8. TAXPAYER IDENTIFICATION NO. OR SOCIAL SECURITY NO. 8A. SIGNATURE OF APPLICANT		

Part II - Verification of Present Employment/Income

EMPLOYMENT DATA	PAY DATA														
9. APPLICANT'S DATE OF EMPLOYMENT	12A. BASE PAY (Current) OR OTHER INCOME \$ _____ <input type="checkbox"/> Annual \$ _____ <input type="checkbox"/> Hourly \$ _____ <input type="checkbox"/> Monthly \$ _____ <input type="checkbox"/> Weekly \$ _____ <input type="checkbox"/> Other (Specify)			For Military Personnel Only											
10. PRESENT POSITION				Type	Monthly Amount										
11. PROBABILITY OF CONTINUED EMPLOYMENT	12B. EARNINGS <table style="width:100%; border-collapse: collapse;"> <tr> <th style="width:15%;">Type</th> <th style="width:25%;">Year to Date as Of _____</th> <th style="width:25%;">Past Year</th> <th style="width:15%;"></th> <th style="width:10%;"></th> </tr> <tr> <td>BASE PAY</td> <td>\$ _____</td> <td>\$ _____</td> <td></td> <td>\$ _____</td> </tr> </table>			Type	Year to Date as Of _____	Past Year			BASE PAY	\$ _____	\$ _____		\$ _____	RATIONS	\$ _____
Type	Year to Date as Of _____	Past Year													
BASE PAY	\$ _____	\$ _____		\$ _____											
13. IF OVERTIME OR BONUS IS APPLICABLE, IS ITS CONTINUANCE LIKELY? OVERTIME <input type="checkbox"/> Yes <input type="checkbox"/> No BONUS <input type="checkbox"/> Yes <input type="checkbox"/> No	OVERTIME	\$ _____	\$ _____	FLIGHT OR HAZARD	\$ _____										
	COMMISSIONS	\$ _____	\$ _____	CLOTHING	\$ _____										
	BONUS	\$ _____	\$ _____	QUARTERS	\$ _____										
				PRO PAY	\$ _____										
				OVERSEAS OR COMBAT	\$ _____										
14. REMARKS (If paid hourly, please indicate average hours worked each week during current and past year)															
a. Number of hours worked per week	b. Anticipated increase or decrease in salary in next twelve months	c. Anticipated overtime hours to be worked in the next 12 months	d. If seasonal employment, anticipated number of weeks in the next 12 months												
e. Anticipated bonus in next twelve months \$ _____															

Part III - Verification of Previous Employment

15. DATES OF EMPLOYMENT	16. SALARY/WAGE AT TERMINATION PER <input type="checkbox"/> YEAR <input type="checkbox"/> MONTH <input type="checkbox"/> WEEK			
	BASE PAY	OVERTIME	COMMISSIONS	BONUS
	\$ _____	\$ _____	\$ _____	\$ _____
17. REASONS FOR LEAVING	18. POSITION HELD			

PART IV

Federal statutes provide severe civil and criminal penalties for any person who knowingly makes false or fraudulent statements or representations to a government agency or officer with the intention of influencing any action by such agency or officer.

19. SIGNATURE	Printed Name	Phone Number
20. TITLE OF EMPLOYER REPRESENTATIVE	21. DATE	

Application Submittal Checklist

In order to evaluate your application for eligibility in our program, our office requires the submission of the following documents:

1. **Copy of Grant Deed or Deed of Trust**
This document will verify that you are the owner of the property and confirm how title is held.
2. **Copy of A Recent Utility Bill**
This document is needed to verify residency and may NOT be a water or trash bill. Submission must reflect owner name and address.
3. **Copy of Property Insurance Documentation**
Please provide photocopies of your current Property Insurance Declaration page.
4. **General Qualifications and Conditions Form**
Included in this packet. Please read, sign, and return this document.
5. **Program Application**
Included in this packet. Please fill out all information requested.
6. **Copy of Income Tax Forms for Prior Year**
*Submit a complete copy, inclusive of all attachments, forms and schedules of the most recent federal income tax return for all adults over the age of 18. Please ensure that the submission is **signed** by all taxpayers. If self-employed, please provide the last two years of your complete federal tax returns.*
7. **Copy of Recent Property Tax Bill**
8. **COPY OF RECENT MORTGAGE STATEMENT (If Applicable)**
9. **Copy of Income Verification Documentation**
This includes the most recent three months consecutive payroll stubs, social security and/or SSI award letter, AFDC checks, pension and retirement award letter and checks, alimony and child support payments, or other income documentation from all other income sources, for all members of the household over the age of 18.
10. **Copy of Asset Verification Documentation**
This includes the most recent three months of statements for all bank accounts, investment accounts, or other asset holdings for all members of the household.
11. **A Verification of Employment Form**
On the Request for Verification of Employment form, Complete and provide one form for each working household member over the age of 18:
 - Section number "1" with the name and address of the employer,
 - Section number "8" with the Social Security number,
 - Section 8A with the signature of the person for which employment is being verified,
 - Leave all other portions of the form blank.
12. **Signed Confirmation of Receipt of Lead Based Paint Brochure**
Sign the section of the application form requiring acknowledgement of receipt of the Lead-Based Paint brochure. If you did not receive the form, contact the City to ensure you get a copy.
13. **Copy of Photo Identification**
Provide photo identification (i.e., driver's license or CA I.D.) for every person who is on title to the property.

When submitting documentation - DO NOT SEND ORIGINALS - please provide photocopies.