



## Town of North Kingstown, Rhode Island

100 Fairway Drive  
North Kingstown, RI 02852-5762  
Phone: (401) 294-3331

Dear interested North Kingstown property owner:

The Town of North Kingstown is pleased to announce the availability of our Community Septic System Loan Program. This program will make low interest loans (1%) available to North Kingstown property owners for cesspool/septic system repair and/or replacement. Additionally, cognizant of the increased costs associated with innovative/alternative septic systems, we have increased our maximum allowable loan amount and terms.

In accordance with North Kingstown's approved Onsite Wastewater Management plan, eligible loan amounts range from \$1000 to \$25,000 with terms of 3, 5, 7, or ten years.

Please keep in mind and inform your chosen designer that it is the Town's policy that all systems **MUST** include an effluent filter designed to protect the leach field component from solids **AND** risers to grade to allow for ease of system access. There will be no exceptions allowed to this policy and failure to include these important system components at the design phase will delay your approval.

I have enclosed a copy of the loan application form. The completed form along with the required financial information should be mailed to:

**RI Housing & Mortgage Finance Corporation**  
**44 Washington Street**  
**Providence, RI 02903**

There is a \$300.00 loan origination fee due at closing to cover application processing costs. Any questions regarding the financial requirements of the program should be directed to RI Housing at 457-1119. Questions regarding North Kingstown's Wastewater Management Program should be directed to G. Tim Cranston of the North Kingstown Water Supply at 268-1522.

# Community Septic Loan Program

 For Office Use Only: Date received \_\_\_\_\_  mailed  faxed

Please complete and mail this application along with the items requested on back. If you have any questions, please call us at 401-457-1127.

Please tell us about your borrowing needs: Desired amount \$ _____ <input type="checkbox"/> Purpose: Repair/replace failed septic systems		
<b>APPLICANT</b>		
Applicant's Full Name		
Social Security Number _____-_____-_____	Date of Birth _____/_____/_____	
Home Address		
City _____	State _____	Zip _____
Phone Number With Area Code _____-_____ - _____-_____		
Employer _____ Position _____		
Employer Phone Number _____-_____ - _____-_____		
Years There _____ Monthly Gross Income \$ _____		
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced, widowed)		
<b>ABOUT YOUR PROPERTY</b>		
What is the address of the property you will be using as security for this loan?		
Is this your primary residence? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Home Type <input type="checkbox"/> Single Family: Style _____		
<input type="checkbox"/> 2-4 Family <input type="checkbox"/> Other _____		
Year Purchased _____ Original Purchase Price \$ _____		
Your Estimate of Property Value \$ _____ Year Built _____		
Annual Real Estate Tax Bill \$ _____ Assessed Value \$ _____		
Annual Property Insurance Premium \$ _____		
Monthly Mortgage Principal and Interest Payment \$ _____		
List all owner's full names _____		
<b>CURRENT DEBTS</b>		
Please tell where and to whom you currently owe money. Be sure to include all mortgages, other installment loans and credit cards.		
Creditor	Balance	Monthly Payment
1st Mortgage	\$ _____	\$ _____
2nd Mortgage/Equity Line	\$ _____	\$ _____
Auto Loan(s)	\$ _____	\$ _____
Other Debt Including Credit Card(s)	\$ _____	\$ _____
Alimony/Child Support/Separate Maintenance	\$ _____	\$ _____

## OTHER SOURCE(S) OF INCOME YOU WANT US TO CONSIDER

 If you are receiving pension or rental income include 2 years signed tax returns. Alimony, Child Support, or Separate Maintenance need not be revealed if you do not choose to have it considered for repaying this loan. Alimony, Child Support, or Separate Maintenance received under:  Court Order  Separation Agreement (include a copy of the agreement)

<b>APPLICANT</b>	Source _____ Amount \$ _____	<b>CO-APPLICANT</b>	Source _____ Amount \$ _____
	Source _____ Amount \$ _____		Source _____ Amount \$ _____

## INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan or grant in person. If you do not wish to furnish the information, please check the box below.

<b>APPLICANT</b>	<input type="checkbox"/> I do not wish to furnish this information	<b>CO-APPLICANT</b>	<input type="checkbox"/> I do not wish to furnish this information
<b>Ethnicity:</b>	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<b>Ethnicity:</b>	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Race:</b>	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<b>Race:</b>	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<b>Sex:</b>	<input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Sex:</b>	<input type="checkbox"/> Female <input type="checkbox"/> Male

**Certification:** Everything that I/we have stated in this application is true and complete to the best of my/our knowledge. You are authorized to check my/our credit and employment history and to answer questions about your credit experience with me/us.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Co-Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_



## North Kingstown Community Septic Loan Program

Offered by Rhode Island Housing in partnership with the Rhode Island Infrastructure Bank, the State Department of Environmental Management and the Town of North Kingstown.

The program goal is to safeguard public health, and protect and improve ground and surface water resources, by ensuring the proper functioning and maintenance of all septic systems in North Kingstown. The program makes low interest rate mortgages available to North Kingstown residents.

**Loan Terms:**  3 years  5 years  7 years  10 years

### PLEASE ATTACH THE FOLLOWING ITEMS TO YOUR APPLICATION

- a copy of 2 most recent pay stub(s) for each applicant
- a copy of each applicant's most recent signed tax return, along with last two years of W-2s (*Note: one tax return is acceptable in the case of joint returns*)
- a copy of the property deed with exhibit A
- a copy of most recent mortgage statement, real estate tax bill and homeowner's insurance
- a copy of social security and/or pension award letters (*or recent bank statement verifying receipt of social security and/or pension funds*)
- If self-employed or commissioned, provide copies of your completed federal tax returns from the last two years with all schedules attached

### LOAN TERMS

- Loan terms: 3, 5, 7 or 10 years
- 1% Fixed Rate
- Loan amounts of \$1,000 up to \$10,000 for Individual Sewage Disposal System (ISDS) repair and up to \$25,000 for ISDS/cesspool replacement
- No income restrictions
- 45% debt-to-income ratio
- Owner-occupied and non-owner-occupied one- to four-family properties qualify

### NO FEES

There is a \$300.00 loan origination fee to be paid by borrower at closing.

### PROGRAM REQUIREMENTS

- All work must be completed by a Rhode Island-licensed installer
- No current bankruptcies
- No current federal tax liens
- DEM Certificate of Conformance required prior to disbursement
- Access riser and hatches to surface level above tanks, protective filter (Zabel or equivalent) on tank discharge line to leachfield

### CONTACT US

Call us today at 401-457-1127 with questions or complete and mail this application to:

**Rhode Island Housing**  
44 Washington Street  
Providence, RI 02903-1721  
Attn: Community Lending

