

EQUITY LEAD SERVICE LINE REPLACEMENT PROGRAM

Please note: Due to availability of funding for this fiscal year, applications may be placed on hold until 2025.

Dear Applicant(s):

Thank you for your interest in the Department of Water Management's (DWM) Equity Lead Service Line Replacement Program. This is a program for single-family or two-flat (1-2 unit), owner-occupied properties located in Chicago. Eligible owners must also meet income requirements. If you do not qualify but you are still interested in replacing your lead service line, please visit www.leadSAFEchicago.org for information on the Homeowner-Initiated LSLR program.

The enclosed package includes the following documents:

- Part 1: Application & Signature Form and Tenant Certification Form
- Part 2: Supporting Documentation Checklist
- Program Summary Sheet, Income Limit Chart; and Frequently Asked Q & A Sheet.

Please complete Part 1 of the package (the Application) online at **www.leadSAFEchicago.org**, or email it to **lead.safe@cityofchicago.org**, or mail it to our office at:

City of Chicago Department of Water Management
Attn: Equity Lead Service Line Replacement Program
1000 E. Ohio St.
Chicago, IL 60611

Once Part 1 (the Application) has been reviewed, you will be contacted by DWM representatives to notify you to complete Part 2 (Supporting Documents). All items listed on the documentation checklist that apply to your household must be completed in full. Program assistance is limited to availability of funds. Priority will be given to homes with children and/or elevated lead levels in the water. If you have any questions or need assistance with your application, please call 312-744-1780. **Please call Melody Carvajal at 312-780-7746 if a Spanish speaker is preferred/Para Español llame a Melody Carvajal al 312-780-7746.**

Sincerely,

Randy Conner
Commissioner

EQUITY LEAD SERVICE LINE REPLACEMENT PROGRAM

Part 1. Application Form

Date: _____

I. Personal Information-*(required field)*

*1) Applicant's Name:				*2) Home Address: _____ Zip code _____ Apt. # _____		
*3) Last four (4) # of Social Security: XXX-XX-_____ _____	*4) Marital Status: Single: _____ Married: _____ Divorced: _____ Widowed: _____ Separated: _____	*5) Gender Male: _____ Female: _____ Non-binary: _____	*6) Veteran Status: Yes _____ No _____	*7) Applicant Status: Disabled? _____ Sr. Citizen? _____ (62 yrs. or older)	*8) Date of Birth ____/____/____ Ex. (MM/DD/YYYY)	*9a) Home Phone #: _____ *9b) Cell Phone #: _____ *9c) Email Address: _____
*10) Co-Applicant's Name				*11) Home Address (if different): _____ Zip code _____ Apt.# _____		
*12) Last four (4) # of Social Security: XXX-XX-_____ _____	*13) Marital Status: Single: _____ Married: _____ Divorced: _____ Widowed: _____ Separated: _____	*14) Gender Male: _____ Female: _____ Nonbinary: _____	*15) Veteran Status: Yes _____ No _____	*16) Applicant Status: Disabled? _____ Sr. Citizen? _____ (62 yrs. or older)	*17) Date of Birth: ____/____/____ Ex. (MM/DD/YYYY)	*18a) Home Phone #: _____ *18b) Cell Phone #: _____ *18c) Email Address: _____

II. Property Information

*19a) Property Type: _____ Single Family _____ Two-Flat _____ Other _____ *19b) Do you have renters? _____ Yes _____ No *19c) Do you operate a daycare in the property? _____ Yes _____ No	*20a) Basement: _____ Yes (finished) _____ Yes (unfinished) _____ No *20b) Water Meter: _____ Inside _____ Outside _____ None _____ Unknown	*21a) Year Purchased _____ *21b) Year Built _____	*22a) Water Service _____ Enters through the floor _____ Enters through the wall _____ Enters behind the wall *22b) Water Service enters: _____ Front of house _____ Back of house	*23) Type of Service Line _____ Lead _____ Lead & Steel _____ Lead & Copper
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III. Household Information-

ALL HOUSEHOLD MEMBERS INFORMATION MUST BE PROVIDED BELOW

24)* NAMES OF ALL HOUSEHOLD MEMBERS REQUIRED*(If add additional members provide on separate page)	25) Age*	26) Relationship to Applicant*	27) Monthly Gross Income*	28) Source of Income*
		Owner		
		Co-Owner		

29) Total Number of Household Members: _____ 30) Total Monthly Gross Income : _____

Note: Application must include all household members and if 18 years or older must include a valid photo identification and source of income to participate in the program

IV. Results of Water Testing Data (to be filled in by DWM)

31) Notes from Follow-up Sequential Investigation	32) Initial Lead Kit Results	33) Follow-up Sequential Results
<p>a. LSL Length (ft.): _____</p> <p>b. Material of LSL at Entry to Home: _____</p> <p>c. Other notes: _____</p>	<p>a. Date of Sampling: _____</p> <p>Lead Results (ppb):</p> <p>b. 1st Liter: _____</p> <p>c. 2/3 min: _____</p> <p>d. 5 min: _____</p>	<p>a. Date of Sampling: _____</p> <p>Lead Results (ppb):</p> <p>b. 1st Liter: _____</p> <p>c. 2nd Liter: _____</p> <p>d. 3rd Liter: _____</p> <p>e. 4th Liter: _____</p> <p>f. 5th Liter: _____</p> <p>g. 6th Liter: _____</p> <p>h. 7th Liter: _____</p> <p>i. 8th Liter: _____</p> <p>j. 9th Liter: _____</p> <p>k. 10th Liter: _____</p> <p>l. 3 Min.: _____</p> <p>m. 5 Min.: _____</p>

Additional Comments: _____

REPRESENTATIONS AND WARRANTIES

The information contained within this Application is in support of assistance from the City of Chicago's **Department of Water Management (DWM)**. You acknowledge and understand that you are authorizing the release of the requested information to the City, and further acknowledge and understand that the City is relying on your information in deciding to award City assistance in the form of a grant. You represent, warrant and certify that the information provided on financial condition and household size is true, correct and complete. You agree to notify the DWM immediately and in writing of any change in name, address employment and of any material change (1) in any of the information contained in this statement, or (2) in the financial condition of any of the undersigned. In the absence of written notice, this should be considered as a continuing statement and substantially correct. You hereby authorize the City to make all inquiries necessary to verify the accuracy of the information provided. As long as any assistance is provided by the City in connection with this program or any guarantee of the undersigned to the City is outstanding, you may be asked to supply an updated financial statement. The personal financial statement and any other financial or other information you provide shall be the City's property, subject to all applicable federal, State, and local laws, including local ordinances and regulations, for the purposes set forth in the City's Equity Lead Service Line Replacement Program. You have received a copy of the Program summary sheet and supporting documents outlining the **Equity Lead Service Line Replacement Program**. Please note that completion of an application is not a guarantee of service. DWM reserves the right to cancel this application when necessary. **NOTE: DWM shall cancel this application where the applicant provides any false, misleading, untruthful, incorrect or incomplete. The City of Chicago may also use the information provided in this application and collected during construction to notify you of additional free programs offered by the City. If you do not want your information shared with City of Chicago Departments for the purpose of establishing program eligibility, please check this box** ☐

34a) Applicant Signature (required)*

Date

34b) Co-Applicant Signature (required)*

Date

35) Please answer the following two questions. This information is being compiled for statistical purposes only and will not be used to make funding or eligibility decisions. Please check the following which most describes you:

- ☐ White
- ☐ Black/African American
- ☐ Asian
- ☐ Native Hawaiian/Other Pacific Islander
- ☐ American Indian/Alaskan Native
- ☐ Black/African American and White
- ☐ American Indian/Alaskan Native and White
- ☐ American Indian/Alaskan Native and Black/African American
- ☐ Asian and White
- ☐ Other/Multiracial
- ☐ I choose not to answer this question

36) ☐ Please check the following which most describes you:

- ☐ I am of Hispanic Origin
- ☐ I am not of Hispanic Origin
- ☐ I choose not to answer this question

EQUITY LEAD SERVICE LINE REPLACEMENT PROGRAM SUMMARY

Overview

The Equity Lead Service Line Replacement Program is a new program that provides a new copper water service line to low-moderate income qualifying, owner-occupied residential building of 1-2 units. The program is limited to the replacement of a lead water service line with a copper water service line (*assistance limited to funding availability*). The program is limited to the replacement of a lead service line with a copper service line of the same size (or upgraded to 1" if the current service size is ¾") and basic restoration of the property.

Applicants who complete their application in full, meet the income threshold, and meet the lead concentration threshold will be put on a waiting list if qualifying properties exceed the available funding for a given year.

Lead Requirements

Applicants must complete a free lead test of their water. Call 311 or register at www.LeadSafeChicago.org for a free water lead test kit (available free to all Chicago residents). Collect the water samples according to the directions and call 312-742-2406 or go to www.chicagowaterquality.org to schedule a time for DWM representatives to pick the kit up from your home.

Income Requirements

Household members gross income earnings (including rental income, earnings for minors and any other source of income) that totals 80% or less of the Area Median Income (AMI) are eligible to participate in the program. If the property is jointly owned, the total gross income of all owners shall be included and may not exceed 80% of AMI.

Current Gross (before deductions) Income Limits (2021)**

Household size	80 % Area Median Income (AMI)
1 person	\$52,200
2 persons	\$59,650
3 persons	\$67,100
4 persons	\$74,550
5 persons	\$80,550
6 persons	\$86,500
7 persons	\$92,450
8 persons	\$98,450

**Income limits are based on the Chicago-Naperville-Joliet, IL HUD Metro FMR Area (HMFA). Effective until superseded. Subject to annual adjustment by HUD

Applicant(s)/Property Requirements

An eligible owner-occupied property must be located in the City of Chicago, in habitable condition, a 1-2 property unit, have a lead service line, and not in risk of foreclosure. Licensed exempt daycares (1-2 property unit) under this category will be reviewed on a case-by-case basis.

NOTE: Condominiums and commercial properties (apartment plus business or commercial units) do not qualify for the program.

EQUITY LEAD SERVICE LINE REPLACEMENT (E-LSLR) PROGRAM

Tenant Self Certification of Annual Income Form

(complete with Part 1 of package, if applicable)

Date: _____

Landlord Name(s): _____

Property Address: _____

Number of building units: _____

Chicago, Illinois 606 _____

Tenant unit number/floor: _____

INSTRUCTIONS: The two (2) page certification form must be completed by tenant(s) only. Please complete each section below:

1. Primary Tenant(s) Household Information

*All household members information must be Provided below, if applicable:

Full Names of all household members required*: (if additional members please provide a separate page)	Age*	Relationship to Head of household Tenant	Disabled Person (Yes or No)	Annual Gross Income*	Source of Income* (All sources, i.e., wages, social security, Pension, etc.)
		Head of Household Tenant			
		Co-Head of Household Tenant			

2. Total number of Household Members: _____

3. Total Annual Gross Income: _____

4. Contact Information:

Phone number(s):	Address(es):	City/State:
1.		
2.		

WARNING: The information provided on this form is subject to verification by the City of Chicago at any time, and Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony and assistance can be terminated for knowingly and willingly making a false or fraudulent statement to a department of the United States Government.

Date: _____

Landlord Name(s): _____

Property Address: _____

Chicago, Illinois 606_____

5. Certification of Information:

I/we certify that this information is complete and accurate. I/we agree to provide if requested, any/all income documents to the Housing and Urban Development (HUD) Grantee/Program Administrator.

Signature (Head of Household):	Print Name:	Date:
Signature (Co-Head of Household):	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:

***Please attach another copy of this page if additional signature lines are required.**

E-LSLR Part 2. Supporting Document Checklist

Group A: Identification Information

- ☐ Copy of **State Identification** or **Driver's License** for all adults in household 18 yrs. or older
- ☐ Copy of **Birth Certificate(s)** or **School Records** for any household member under 18 yrs.

Group B: Property Information

- ☐ Copy of current **Property Deed** (must be recorded with Cook County Deeds office)
 - ☐ Copy of **State Identification** or **Driver's License** of co-owner not residing on the property
 - ☐ Copy of **Divorce Decree or Legal Separation Agreement** (if listed on property deed and does not reside within the dwelling)
 - ☐ Copy of **Death Certificate** (if deceased is listed on property deed)
- ☐ Copy of current **Cook County Real Estate Tax Bill**
- ☐ Copy of a current **Utility Bill**
- ☐ Copy of current **Building Code Violations** (if applicable)

Group C: Income Information

- ☐ Copy of signed **Most Recent Two Years of Federal Tax Returns** including all schedule exhibits and addendums – for all household members where applicable (federal taxes must be signed and dated or proof of online filing)

If a portion of the property is rented:

- ☐ **Tenant Certification Form**, if applicable (Note: tenant to complete, sign, and date)
- ☐ Copy of current **Lease** or three (3) current **Rent Receipts** from all renters

If there are no Tax Returns for one or all household members -or- the income situation has changed since the returns were filed, the following applicable documents must be presented for every household member that is 18 years of age or older:

- ☐ Copies of all income documentation from each household member (check which applies)
 - ☐ Copy of three (3) current/recent **Pay Stubs**
 - ☐ Copy of current year **Social Security Statement** or award letter
 - ☐ Copy of current year **Disability Statement** or award letter
 - ☐ Copy of current **Pension and Annuity Statements**
 - ☐ Copy of current **Dividends and Capital Gains Statements**
 - ☐ Copy of current **Unemployment Benefit Statement** (online printouts not accepted)
 - ☐ Copy of **DHS Public Cash Assistance Letter** (exclude SNAP/Link benefits)
 - ☐ Copy of current **Profit and Loss Statement on Self Employed Business** (must be notarized and signed and include Individual Taxpayer Identification Number)
 - ☐ Proof of **Child Support and Alimony** (if applicable)



E-LSLR FAQ

Frequently Asked Questions and Answers Sheet

Q. What type of residential properties qualifies for the E-LSLR program?

A. A Chicago property that is owner-occupied and has one (1) to two (2) residential units is an eligible property type. Licensed-exempt daycares under this category will be reviewed on a case-by-case basis. Condominiums and Commercial (apartment plus business or commercial units) do not qualify for this program.

Q. If I own a Chicago residential property and it is not my primary residency, can I participate in the program?

A. No. Only owner-occupied Chicago residential properties (1 to 2 units) can participate.

Q. What is the Income Qualification?

A. The total gross household income cannot exceed HUD's 80% AMI (Area Median Income) requirement (see attached program summary) to qualify.

Q. Does all the household members' income need to be included in the qualification process?

A. Yes. Every household member that receives income would need to provide their gross income to determine the total household gross income.

Q. What does the gross income mean?

A. It means the income you receive before any deductions (taxes, medical, insurance, etc.,) have been taken out of the earnings (net).

Q. If I've received service in the past/previous year under the E-LSLR program, could I apply again for another service?

A. Yes. The applicant can apply if they move to a different property that meets the criteria of the Program. A new application and approval for the second property will be required. The applicant will need to provide proof of sale of the previous residence.

Q. Does my water need to have elevated lead for me to be eligible?

A. No. Starting in 2022, elevated lead levels are no longer a pre-requisite for eligibility. You only need to submit water samples for free lead testing prior to the work being done on your home, but elevated lead is not a requirement to participate. Lead testing results and the presence of children living in the home may be used to prioritize the locations of replacements.

Q. If I just bought my Chicago home six (6) months ago, could I apply?

A. Yes. There is no minimum time period that you must have lived in the property to qualify.

Q. Do I need to be present when an inspector comes out to my home to do a site inspection?

A. Yes. Our preference is that the owner is present between the business hours of 7:30am – 3:00pm. Monday thru Friday.

Q. How long will it take for my application to get approved after I submit it?

A. When the assigned DWM staff has received all required documents, a status letter will be mailed out within two (2) weeks.

Q. What are the next steps after my application has been established as income eligible?

A. Your contact information will be sent to the plumbing crew (either DWM staff or contractors hired by DWM) for them to contact you by phone and/or email to set-up an appointment for a site inspection.

Q. How long after the application is approved and a site inspection is completed, will it take for my lead service line to be replaced?

A. Replacements are performed on a first-come/first-served basis. Scheduling is controlled by the plumbing crew (either DWM staff or contractors hired by DWM). After the site inspection is completed, homeowners can contact the contractor directly to get an estimate date on when the work/repair will start.



- Q.** Can I get the repairs done by a contractor of my choice and have the City of Chicago reimburse me for the cost?
- A.** No. DWM has contracted with vendors (contractors) who have met the City of Chicago's vendor requirement through the City's procurement process. They will be the assigned contractor.
- Q.** Who should I call if I have questions regarding my application status or documents?
- A.** You can call DWM at (312) 744-1780 or email lead.safe@cityofchicago.org.
- Q.** Who should I call if I have problems with the service line **AFTER** the work has been completed?
- A.** For any service-related issues, the homeowner should contact the assigned plumbing crew directly. The contractor's contact information can be found on the contract documents left at the time they did the work.
- Q.** Is there a warranty on the work completed by the contractor under the program?
- A.** Yes. There is a one (1) year warranty on the work starting from the Quality Control inspection date.
- Q.** Will I have to pay back the grant funds if work is completed under the program?
- A.** No. Even if you sell the property or have a change in income, there is no obligation to pay back any portion of the grant funds.