

Goodhue County, Minnesota

CARES Act Funding Application Document for New Housing Permit Reimbursement

Within Goodhue County's CARES Act Funding Disbursement Program, the County allocated \$550,000 for New Housing Permit Reimbursement within the County. The Goodhue County Building Department is accepting applications from permit holders for this program. Completed applications can be emailed to Molly.Strauss@co.goodhue.mn.us for consideration. The program is administered by the Finance and Taxpayer Services Department. Additional information is available on-line at <https://co.goodhue.mn.us/649/Finance-Taxpayer-Services>. Below are the CARES Act Funds Disbursement Program guidelines and the application process.

New Housing Permit Reimbursement Program Application Guidelines

This program is designed to encourage new housing starts within Goodhue County by reimbursing permit fees for new housing starts within Goodhue County. Components of the Reimbursement Program include:



- The New Housing Permit Reimbursement Program can apply to single-family housing units, multi-family housing units, or apartment buildings.
- The Program will reimburse a permit holder or designee for the building permit fee(s). Cities will not be directly reimbursed for a new housing start. State surcharges will not be reimbursed.
- Eligibility for the Program is good for new housing permits issued from August 4, 2020 until the funds run out, which could go into 2021.
- Once a permit is paid for and issued, the permit holder can apply to the Reimbursement Program.
- Housing construction must begin immediately and keep on a timely schedule. Should the project not be completed within a year or on-time, the permit holder agrees to pay back the grant amount received.

Application Process

- The attached application needs to be filled out in full and submitted with receipts to: Michele.Engberg@co.goodhue.mn.us. Applications and program information are also available on-line at <https://co.goodhue.mn.us/649/Finance-Taxpayer-Services>.
- Disbursement of funds will be based on the cost of the permit(s) and the availability of funds.
- The County Board has final authority as to how the funds are distributed.
- The County will be using the *Minnesota Management and Budget COVID-19 Response* (<https://mn.gov/covid19/>) for reference and guidance.
- Applicants may not double-dip on COVID funds. Receiving funds from DEED, another local, State or Federal agency, insurance, or some other funding will prohibit participation in this program funding.
- Applicants can expect to receive reimbursement within 30 days of application submittal.

Ineligible Expenses:

- Permit fees for building other than new housing units as described above.
- Permit fees for remodeling or expansion projects to an existing home.
- Fees for other separate permits related to new housing permits.





Goodhue County

CARES Act Funding Application Form for Reimbursement of New Housing Permit

The CARES Act Funding Application Form must be submitted for consideration of disbursement of the funds. Submit by email to Molly.Strauss@co.goodhue.mn.us.

Name of Applicant	Phone Number
Name and Title of Business	Email Address

Background Information

1. What City or Township is this housing being built in? _____
2. What is the address of the project? (Please submit a separate application for each project/address.)

3. When is this project expected to be completed? _____
4. What type of housing is this? Single-family, multiplex, apartments? _____
5. How many housing units are in this project? _____
6. Will you be living at this address? _____
7. Have you applied for this program before for a different housing unit? _____

Application Information:

1. What was the cost of the permit? _____
2. Submit a copy of the housing permit and payment receipt(s) with the application.
3. If the permit qualifies for reimbursement, what is the **name** and **address** of the person who should receive the reimbursement check?

*Sign below and submit to molly.strauss@co.goodhue.mn.us. Reimbursement should be received within 30 days.

I certify that I have read and agree to all the program stipulations as outlined above.

Signature of Applicant

Print Name

Date