



City of Seal Beach

Bathroom Accessibility Grant Application

Thank you for your interest in the Seal Beach Bathroom Accessibility Grant Program. This program is designed to help qualifying Leisure World residents improve the safety and usability of their bathrooms.

Eligible improvements include:

- Bathtub cut-down for conversion to a walk-in shower
- Installation of a high-boy toilet
- Addition of grab bars as needed
- Alteration or creation of shower bench

This program assists:

- Residents of Leisure World
- Low- to moderate-income households
- Individuals with mobility, health, or accessibility needs

If you have questions, please call (909) 364-9000 or email monique@civicstone.com.

Prefer to apply online? Visit www.civicstone.com to complete the application digitally, submit documents, and sign electronically through DocuSign.

- **Note:** *While online submission is available, paper applications are still accepted for those more comfortable with printed forms.*

Program Steps (Overview)

1. **Apply:** Complete and submit this application with all required documentation.
2. **Eligibility Review:** We will review your application for completeness and verify household income and program eligibility.
3. **Doctor's Form** (if applicable): If your modification request involves a medical need (e.g., bathtub cut-down), your doctor must complete a short form. This helps us prioritize applicants fairly—those with the greatest needs are assisted first.
4. **Site Visit & Scope of Work:** Once approved, a contractor will visit your home to confirm your tub's material, outline the scope of work, and plan the construction timeline.
5. **Construction:** The approved work will be completed by a program contractor. Once finished, a city inspector will verify the project is done properly.
6. **No Cost to You:** This is a grant program provided by the City of Seal Beach. You will not be charged for eligible improvements approved under this program.

Section 1 - Household Information

Applicant's Name: _____ Age: _____ Sex: _____

Co-Applicant's Name: _____ Age: _____ Sex: _____

Address: _____ Unit#: _____ Mutual#: _____

Email Address: _____

Phone (home): _____ (cell) _____

Section 2 - Household Composition

Total number of people in household: _____

How many are disabled? _____

Is anyone living here other than the Applicant/Co-Applicant? Yes No

DEMOGRAPHICS

Do you consider your household Hispanic/Latino? Yes No

How do you identify? Please check all that apply

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

Head of Household is: Male Female

Section 3 - Income Information

The income amounts reported below should represent the combined monthly income from all household members. Please provide supporting documentation for each income source and each household member.

Examples of Income	Name of Income Source	Gross Monthly Amount
Employment / Wages		
Self-Employment / Rental		
Social Security / SSI / SSDI		
Pension / Retirement / Annuity		
Disability / Unemployment		
Public Assistance		
Other (gifts, alimony, etc)		
	Total Monthly Income	
	Total Annual Income (x12)	

*Need help understanding what counts as income or how to calculate it? See **Appendix A** at the end of this application.*

Section 4 - Assets

List all household assets and attach recent statements. For each asset, provide the institution name, last four digits of the account number, and current value.

Assets	Cash Value	Bank Name	Account # (Last 4 Digits)
Checking Account	\$		
	\$		
Savings	\$		
	\$		
Credit Union	\$		
Stocks/Bonds	\$		
401K/Retirement	\$		
Life Insurance	\$		
Other Property Ownership Equity	\$		
	\$		
		Total Household Asset Value	
		2% of Total Asset Value (multiply Total Asset Value by .02)	

Need help understanding what counts as an asset? See **Appendix A** at the end of this application.

Total Household Income	
Total Annual Income from Section 3	
2% of Total Assets Value from Section 4	
GRAND TOTAL HOUSEHOLD INCOME	

Maximum Income Allowed (80% Area Median Income - 2026 HUD Limits)	
1 Person Household	\$104,200
2 Person Household	\$119,100

Section 5 - Required Documentation

Please include all supporting documents for the Income and Asset declarations above. (Please feel free to cross out your social security numbers and all BUT the last 4 digits of your account numbers.) Below is a checklist of requirements as applicable.

- Copy of your most recent Federal Tax Returns, signed, including all schedules but not worksheets (or 3 years if self-employed).
- Copy of your last 2 paycheck stubs showing year-to-date income totals or current Profit and Loss Statement if self employed. If you are not working, provide a statement indicating the nature and anticipated duration
- Copy of your Annual Social Security Award Letter or other benefit statements.
- All pages of banking statements (2 months, checking & savings)
- Investment/retirement statements (stocks, bonds, etc if applicable)
- Other: Any documents to support stated income and investments
- Proof of property ownership (Grant Deed, Title, or Mortgage Statement)
- Doctor's Assessment form (to be used for prioritizing received applications)

Section 6 - Other Assistance Received

Have you received or been approved for any insurance proceeds, FEMA assistance, SBA assistance, grant funds, charitable assistance, or other financial assistance for the repairs or improvements requested in this application?

- No
- Yes

Section 7 - Applicant Certification

The information provided in this application will be used to determine eligibility for the City of Seal Beach's CDBG Housing Rehabilitation Grant Program and to administer the program. Information may be reviewed by the City, County, HUD, auditors, or other entities as required for program administration, monitoring, compliance, or as otherwise required by law. All application materials become the property of the City and will not be returned.

By signing below, I/We acknowledge that:

- We are the owner-occupants of the property identified in this application.
- The information provided is true, correct, and complete to the best of our knowledge.
- We understand that eligibility is subject to verification and that additional documentation may be requested.
- We understand that providing false, incomplete, or misleading information may result in denial or termination of assistance and may carry legal consequences.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Mail or Deliver Your Application To:

City of Seal Beach

c/o CivicStone, Inc.

4195 Chino Hills Parkway #267

Chino Hills, CA 91709

Phone: (909) 364-9000 | Fax: (909) 333-4030

Email: monique@civicstone.com

FOR OFFICE USE ONLY

Reviewed By: _____ Date: _____

Approved Denied - Reason _____

Appendix A: Clarifying Income & Asset Information

What Counts as Income? Include all income sources for both the applicant and co-applicant. These should reflect the gross monthly amounts received by each household member. Examples include:

- Wages from employment – Include gross earnings before taxes. Also include any regular pay, special pay, or allowances received by a member of the Armed Forces.
- Self-employment or rental income – If you or your co-applicant operate a business, work independently, or earn income from rental of property (real or personal), report the net monthly income after expenses.
- Social Security benefits – Include the gross amount (before deductions for Medicare) received monthly through Social Security Retirement, SSI, or SSDI.
- Pensions, annuities, or retirement distributions – Include any regular monthly payments received from pensions, annuities, IRAs, or retirement accounts, as well as insurance payments or death benefits.
- Unemployment, disability, or worker’s compensation – Report the gross monthly amount received from any of these sources.
- Public assistance – Include monthly cash assistance and other recurring public benefits. Do not include CalFresh (food assistance) benefits.
- Other income – Include regular contributions from others outside your household, such as gifts, alimony, or child support.

What Counts as Assets? Include the current value of all assets held by any household member. This includes but is not limited to:

- Checking and savings accounts
- Money Market Accounts
- Certificates of deposit (CDs)
- Investment accounts (stocks, bonds, mutual funds, etc.)
- Cryptocurrency wallets or digital assets

- Trust funds (if accessible)
- Cash value of life insurance policies
- Equity in any property you own, other than your current Seal Beach residence
- Retirement accounts (IRA, 401(k), etc.)

How HUD Treats Assets: HUD does *not* count the total value of your assets as income. Instead, it assumes your assets earn approximately 2% annually. For example:

- \$50,000 in total assets = \$1,000 in additional calculated income
- \$100,000 in total assets = \$2,000 in calculated income

Only the **interest or imputed income** from these assets is included in your income total.

- **Note:** If you are unsure whether something counts, include it and we will help you determine eligibility.