

# UNOFFICIAL COPY



Doc#: 0632650175 Fee: \$56.00  
Eugene "Gene" Moore  
Cook County Recorder of Deeds  
Date: 11/22/2006 11:51 AM Pg: 1 of 17

## HOME IMPROVEMENT GRANT AGREEMENT

**THIS AGREEMENT**, made the 16 day of  
October, 06, by and  
between  
Catherine Arnieri

(hereinafter  
"OWNER"), and the VILLAGE OF  
SKOKIE, (hereinafter "VILLAGE") an  
Illinois municipal corporation located at  
5127 Oakton Street, Skokie, Illinois. The  
VILLAGE and OWNER shall jointly be  
referred to as "Parties".

### WITNESSETH:

**WHEREAS**, the VILLAGE operates a Housing Improvements Program (hereinafter "Program") to financially assist low and moderate income Skokie homeowners with various home repairs in order to maintain the quality of their homes and reduce home energy consumption; and

**WHEREAS**, eligible home improvements for the Program include, but is not limited to, improvements which are visible to the public, improve the neighborhood, and are life/safety issues such as correcting basement flooding, most weatherization work, roof repairs or replacement, tuckpointing, exterior painting, furnace repair or replacement and major structural repairs; and

**WHEREAS**, normal home maintenance such as interior painting, carpeting, or kitchen remodeling or other decorating projects are not eligible home improvements under the Program; and

**WHEREAS**, OWNER of the property commonly known as 5225 Arcadia in Skokie, Illinois of which legal description is attached hereto, marked exhibit "1", submitted an application to the VILLAGE requesting to participate in the Program, a copy of which is attached hereto, marked Exhibit "2" and hereby made a part of this AGREEMENT; and

**WHEREAS**, the VILLAGE caused an inspection of the subject premises to verify the need for the requested work and provided the OWNER with an inspection report, a copy of which is attached hereto, marked Exhibit "3" and hereby made a part of this AGREEMENT; and

**WHEREAS**, the subject premises is a residential property improved with either a single-family home, condominium, townhouse, two-flat or cooperative located within the VILLAGE; and

**WHEREAS**, the VILLAGE has reviewed the aforesaid application and has determined that the OWNER's participation in the Program is in the VILLAGE'S best interest and is in accordance with the objectives of the Program;

**NOW, THEREFORE**, in consideration of the premises set forth above, and the mutual agreements hereinafter set forth below, it is hereby agreed:

1. **Representations.** The representations set forth in the foregoing recitals are material to this AGREEMENT and are hereby incorporated into and made part of this AGREEMENT as though they were fully set forth in their entirety in this Section 1.
2. **Definitions.** As used in this AGREEMENT, the following definitions shall apply:  
Inspection Report: A document prepared on behalf of the VILLAGE based on an examination of the Subject Premises which specifies home improvement work which is eligible for a Grant under the Program.

Project: All of the home improvement work covered under the Grant from the VILLAGE.

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Subject Premises: The property is commonly known as 5225 Arcadia, in Skokie, Illinois which is the **OWNER's** principal residence.

Work: The undertaking of labor by a contractor approved by the **VILLAGE** to accomplish the home improvements specified in Exhibit "3".

3. Issuance of Grant. Pursuant to **OWNER's** participation in the Program, the **VILLAGE** agrees to provide **OWNER** with a grant in an amount not to exceed EIGHT THOUSAND AND NO/100 DOLLARS (\$8,000) ("Grant") to pay for materials and contractor's fees for the Project and related Work.
4. Documentation. **OWNER** represents that he or she is the legal title holder to Subject Premises. In further proof thereof **OWNER** has submitted to the **VILLAGE**:
  - a. Title policy or Letter of Opinion from Chicago Title and Trust Company; or
  - b. Torrens Certificate; or
  - c. if legal title is in a Trust, a letter of direction and certification as to the current beneficiary under such Trust Agreement. A copy of the submitted document(s) is/are attached hereto, marked Exhibit "4", collectively, and hereby made a part of this **AGREEMENT**.
5. Financial Eligibility. **OWNER** represents to the **VILLAGE** that **OWNER's** total annual household income does not exceed the very low income limits established by the Federal Government as specified in Exhibit "5" attached hereto and hereby made a part of this **AGREEMENT**. In further proof thereof **OWNER** has submitted the following documents to the **VILLAGE**:
  - a. **OWNER's** Form SSA-1099 Years 2004 and 2005.
6. Homeowner's Representation. The Grant shall be issued to **OWNER** by the **VILLAGE'S** reliance upon all information provided by the **OWNER** and all representations, exhibits, data and other materials submitted with and in support of **OWNER's** participation in the Program. Any misinformation or withholding of material information incident thereto shall, at the option of the **VILLAGE**, give rise to the **VILLAGE'S** right to terminate this **AGREEMENT** pursuant to Section 16 of this **AGREEMENT**.
7. Priority of Improvements. The work to be performed shall be conducted in the following priority, subject to the approval of the **VILLAGE**:
  - a. Work required to correct existing code violations;
  - b. Exterior home improvements;
  - c. All other home improvements.
8. Permits. **OWNER** is responsible for securing and paying for all necessary licenses and permits for the Project(s).
9. Multiple Bids. **OWNER** agrees to obtain at least three (3) bids from qualified contractors for each project and work item. **OWNER** shall be required to utilize the Contractor who has submitted the lowest bid, unless otherwise approved by the **VILLAGE**.
10. No Prior Agreements. **OWNER** has represented to the **VILLAGE** that no prior agreements have been entered into between the owner and any contractor for the project and work to be performed under this **AGREEMENT**.

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11. Contracts. **OWNER** must provide the **VILLAGE** with a copy of any and all contracts for the Project and Work to be completed. The contracts must be approved in writing by the **VILLAGE**. No modifications may be made to Village approved contracts without the prior written consent of the **VILLAGE**.
12. Completion of Work. Upon completion of the Project and Work, **OWNER** shall deliver to the **VILLAGE** a contractor's waiver of lien and a certificate executed by the contractor or subcontractor, stating that the Project and Work is final and complete and is in compliance with all applicable federal, state and local laws, rules and regulations.
13. Payment to Contractors. The Parties agree that payments to the contractors shall not occur until the **VILLAGE** has inspected the completed Project and Work and provides the **OWNER** with written approval for payment.
14. Additional Documents. **OWNER** shall supply the **VILLAGE** with such other materials, documents and papers which the **VILLAGE** may require, from time to time.
15. Homeowner Sale of Subject Property. If the **OWNER** sells the Subject Premises or any interest in it is sold or transferred, within 15 years after receipt of grant funds **OWNER** expressly agrees to pay the **VILLAGE** back for the entire Grant or a portion thereof based on the following schedule:

YEAR FROM RECEIPT OF GRANT FUNDS	PERCENTAGE OF GRANT OWED VILLAGE
0-5	100%
6	50%
7	45%
8	40%
9	35%
10	30%
11	25%
12	20%
13	15%
14	10%
15	5%

16. Termination. This Agreement may be terminated at the **VILLAGE'S** option by written notice to the **OWNER** upon the occurrence of any one or more of the following events:
- a. Construction of the Project has not commenced within ninety (90) days of the date of this **AGREEMENT**.

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- b. If any statement or representation made by **OWNER** in its application to the **VILLAGE** shall prove untrue in any material respect, or if the **OWNER** shall have withheld any material information incident thereto.

Delay in the exercise of the **VILLAGE'S** right to terminate shall not be construed as a waiver of any such right to terminate with regard to the occurrence of any specific event referred to above, and the **VILLAGE'S** failure to act as to any such event shall not be construed as a waiver of its rights with respect to any subsequent event of default.

17. The Village Not a Joint Venturer. The **VILLAGE** by executing this **AGREEMENT** or any action taken pursuant hereto or contemplated hereby shall not be deemed to be a partner or joint venturer with **OWNER** or Contractor or any other parties. **OWNER** indemnifies and holds the **VILLAGE** harmless from any and all liabilities, damages, claims, demands, costs and expenses resulting from such a construction of the Parties and their relationship. Any inspection of the Subject Premises or any analysis of the Project made by the **VILLAGE** is intended solely for the benefit of the **VILLAGE** and shall not be deemed to create or form the basis of any warranty, representation, covenant, implied promise or liability to the **OWNER** or its employees or agents, any guest or invitee upon the Subject Premises or any other person.
18. Indemnification. The **OWNER** hereby agrees and covenants to forever hold harmless and indemnify the **VILLAGE** its officers, employees and agents, and to save them from and indemnify for all costs, claims, suits, demands, and actions arising during the term of this **AGREEMENT** directly or indirectly from or because of or in any way connected with this **AGREEMENT** that may be made by **OWNER**, its guests, invitees, or any other person, firm, corporation or organization, for property damage or injury. The provisions of this Section 18 shall survive the expiration or termination of this **AGREEMENT**.
19. Recording of AGREEMENT. A copy of this **AGREEMENT** shall be recorded against the Subject Premises at the office of the Cook County Recorder of Deeds.
20. Multiple Homeowners. If more than one person has an ownership in the Subject Premises, each person is fully and personally obligated to keep all of the promises made in this **AGREEMENT**, including the promise to pay the full amount owed.
21. Notices. All notices required or to be given pursuant hereto shall be in writing and either delivered personally or by a nationally recognized "over-night" courier service or mailed by United States certified or registered mail, postage prepaid, addressed to Seller and Purchaser as follows:

If to **VILLAGE**: Village of Skokie  
5127 Oakton Street  
Skokie, IL 60077  
Attention: Village Clerk

With copies to: Village Manager  
5127 Oakton Street  
Skokie, IL 60077

Corporation Counsel  
5127 Oakton Street  
Skokie, IL 60077

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If to **OWNER**:

Catherine Arnieri  
5225 Arcadia  
Skokie, IL 60077

Notices shall be deemed effective and properly delivered and received when and if either;

- a. personally delivered;
- b. delivered by Federal Express or other overnight courier; or
- c. deposited in the U.S. Mail, by registered or certified mail, return receipt requested, postage prepaid.

Either Party may change the names and addresses of the persons to whom notices or copies hereof shall be delivered, by written notice to the **VILLAGE** or **OWNER** or Seller, as the case may be, in the manner herein provided for the service of notice.

- 22. Entire Binding Understanding; No Oral Modification. All prior understandings and agreements between the Parties are merged into this **AGREEMENT**.
- 23. Performance. Time is of the essence in this **AGREEMENT**.
- 24. Severability. Each provision of this **AGREEMENT** is severable from all other provisions of this **AGREEMENT** and, if one or more of the provisions of this **AGREEMENT** shall be declared invalid, the remaining provisions of this **AGREEMENT** shall nevertheless remain in full force and effect.
- 25. Headings. The headings or titles of the Sections or Paragraphs in this **AGREEMENT** are for convenience only, are not a part of this **AGREEMENT**, and shall not be used as an aid in the construction of any provisions hereof.
- 26. Due Authority. Each Party signing this **AGREEMENT** represents and warrants that they have full right and authority to enter into and perform this **AGREEMENT** in accordance with the terms hereof.

**VILLAGE OF SKOKIE,**

**OWNER,**

By: *Albert J. Rigoni*

By: *Catherine Arnieri*

Albert J. Rigoni  
Its Village Manager

Subscribed and sworn to before me

this 10<sup>th</sup> day of Nov, 2006

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*Mary Mc Beath*



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# PROPERTY INSIGHT, LLC.

Exhibit 1

A California Limited Liability Company  
400 S JEFFERSON, CHICAGO, IL 60607

## TRACT INDEX SEARCH

Order No.: 1404 S9630997 SS

Additional Tax Numbers:

### Legal Description:

LOT 33 (EXCEPT THE WEST 9 FEET THEREOF) AND LOT 34 (EXCEPT THE EAST 14 FEET THEREOF) IN BLOCK 6 IN SUFFIELD TERRACE A SUBDIVISION OF PART OF LOT 10 IN SCHOOL TRUSTEE'S SUBDIVISION OF SECTION 16 TOWNSHIP 41, NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

Property of Cook County Clerk's Office

**UNOFFICIAL COPY** Exhibit 2**HOME IMPROVEMENTS PROGRAM  
APPLICATION****RECEIVED**

JUL 13 2006

BUILDING DIVISION  
VILLAGE OF SKOKIE

<b>SECTION 1 - Applicant Information</b>	
Name	CATHERINE ARNIERI
Address	5225 W. ARCADIA
Home Phone	341-966-1512
Work Telephone	
Unit Type:	<input checked="" type="checkbox"/> Single-family Detached <input type="checkbox"/> Townhouse <input type="checkbox"/> Condominium/Cooperative <input type="checkbox"/> Two-flat
Occupancy:	<input checked="" type="checkbox"/> Own & Occupy Unit <input type="checkbox"/> Rent & Occupy Unit <input type="checkbox"/> Do Not Occupy Unit
Number of Persons in the Household	Household Income
	5000.00 YEARLY
<b>SECTION 2 - Forms to be Submitted</b>	
This application cannot be processed until all of the documents and information listed below are provided. Since all applications will be processed on a first-come first-serve basis, it is extremely important that the applicant provide the documents and information as quickly as possible.	
Federal Income Tax Form 1040/1040A for all persons over 17 years old who contributed to the household income for the last two years with all forms and schedules.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Village Inspection Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Three bids from contractors for improvement work specified in the inspection report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Proof of home ownership	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Amount of grant of loan request	\$
<b>SECTION 3 - Statement of Applicant Understanding</b>	
As an applicant for the Village of Skokie Home Improvement Program, I understand that:	
The Village will give me a maximum grant amount of \$8,000 to complete eligible home improvement work if I am certified as a very low-income applicant and funds are available	Initials: CA
Approval of my application by the Village as a low-income applicant does not assure that I will be eligible for a loan from a lending institution participating in the program.	Initials: CA
The Village will only subsidize the interest rate on a home improvement loan made to me by a local lending institution participating in this program and that I am totally responsible, as the applicant, for repaying the loan to the lending institution. The Village will not in anyway insure the repayment of my loan.	Initials: CA
The Village will fully subsidize the interest on a four-year loan of up to \$8,000 if I am certified as a low-income participant.	Initials: CA
It is my responsibility to hire a contractor to complete the improvement work for which the grant or loan is approved.	Initials: CA

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### SECTION 3 – Statement of Applicant Understanding (Continued)

I consent to and authorize the Village to enter the improved property for the sole purpose of determining that the improvements contracted for have been completed. The Village's inspection of work will be to certify completion only. No determination will be made by the Village as to the quality or adequacy of material or workmanship.

Initials: CA

The Village will in no way warrant or guarantee any of the work performed and it is my responsibility to determine the acceptability of all material used and work performed by the contractor.

Initials: CA

The Village has no responsibility or liability for damages or injury of any kind occurring as a result of my participation in this program.

Initials: CA

### SECTION 4 – Income Disclosure

Total household income for the last tax year

\$ 5000.00

Total ADJUSTED GROSS INCOME as listed in the applicant's Form 1040/1040A

\$

List each household member over 17 years old who contributed to the household income last year.

Name	Income
Person A	\$
Person B	\$
Person C	\$
TOTAL	\$

### SECTION 5 – Source of Income and Assets

For each person listed in Section 4 (A, B, C), please provide the following information

		Person A	Person B	Person C
<i>Employment</i>	Name of company			
	Address of company, city, state, zip code			
	Telephone			
<i>Public Assistance (ADC, General Assistance, etc.)</i>	Public Aid case number			
	Caseworker name			
	Address of office, city, state, zip code			
	Telephone			
<i>Social Security (Survivor's Benefits, SSI, Retirement, Disability, etc.)</i>	Social Security number			
	Address of office, city, state, zip code			

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SECTION 5 - Source of Income and Assets (Continued)				
		Person A	Person B	Person C
<i>Pension</i>	Name of company			
	Address of office, city, state, zip code			
<i>Other Income Not Covered Above</i>	Source			
	Address of office, city, state, zip code			
	Telephone			
<i>Bank Account</i>	Name of bank			
	Account number			
	Present balance	\$	\$	\$
	Annual interest rate	%	%	%
<i>Bank Account</i>	Name of bank			
	Account number			
	Present balance	\$	\$	\$
	Annual interest rate	%	%	%
<i>Bank Account</i>	Name of bank			
	Account number			
	Present balance	\$	\$	\$
	Annual interest rate	%	%	%
<i>Stocks, Bonds, or Other Securities</i>	Name of security			
	Present value			
	Annual dividend or interest paid	\$	\$	\$
<i>Stocks, Bonds, or Other Securities</i>	Name of security			
	Present value			
	Annual dividend or interest paid	\$	\$	\$
<i>Stocks, Bonds, or Other Securities</i>	Name of security			
	Present value			
	Annual dividend or interest paid	\$	\$	\$
<i>Do you own any interest in any real estate other than your home?</i>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Percent interest __%	Percent interest __%	Percent interest __%

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## SECTION 6 - Affidavit of Income and Signature (Notary Required)

I (We) hereby state that I have read, understand and consent to all of the above conditions and that the information provided is true, complete, and correct to the best of my knowledge and that I have not knowingly made any false statements concerning this application.

I (We) authorize the Village of Skokie to check all of the above information, including financial information and references.

I (We), Catherine Quieri, being duly sworn, on oath, deposes and states that my (our) total gross household income for the last tax year was \$ \_\_\_\_\_, and that my (our) total income for this year will not exceed \$ 12,000.00 based on a current monthly income of \$ 522.00.

Subscribed and sworn before me this 29 day of July, 2006

Catherine Quieri  
Person A's Signature

Person B's Signature

Person C's Signature



Mary McBeath  
NOTARY PUBLIC 7/29/06

\* Applicant says THIS AMOUNT INCLUDES A ONE TIME GIFT OF \$8,000. -

[Signature]  
11/15/06

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Exhibit 3

PREPARED 10/16/06, 14:21:55  
 PROGRAM CE200L  
 VILLAGE OF SKOKIE

PAGE 1

CASE HISTORY REPORT  
 CASE NUMBER 01-00001881

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DATE ESTBL 10/15/01 STATUS ACTIVE TENANT NBR 9/23/03

INSPECTOR CARL CELESTINO TENANT NAME ACTIVE

GRANT-LOAN PROGRAM  
 10-16-307-081-0000  
 5225 ARCADIA ST  
 SKOKIE IL 60077

CASE DATA:

CITATION NUMBER #1.....  
 DATE/TIME OF VIOLATION #1.....  
 CITATION NUMBER #2.....  
 DATE/TIME OF VIOLATION #2.....  
 CITATION NUMBER #3.....  
 DATE/TIME OF VIOLATION #3.....  
 TYPE OF USE.....  
 GRANT OR LOAN.....  
 MISCELLANEOUS.....

NARRATIVE: COMPLETE HIP INSPECTION

9/25/03

847-966-1512

OWNER

NOTICE NAMES: ARNIERI, CATHERINE

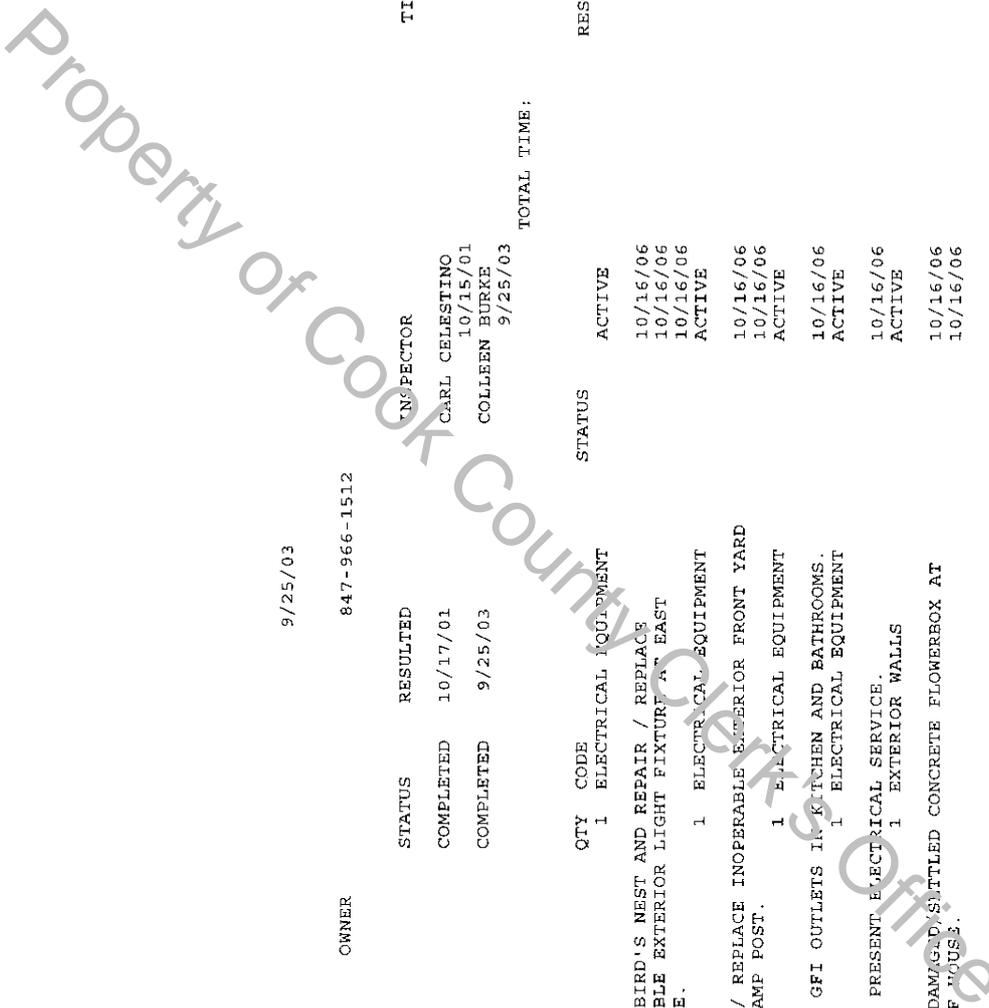
HISTORY:

SCHEDULED ACTION	STATUS	RESULTED	INSPECTOR	TIME
10/17/01 INSPECTION	COMPLETED	10/17/01	CARL CELESTINO	10/15/01
RQST TEXT: 2:30				
9/25/03 INSPECTION	COMPLETED	9/25/03	COLLEEN BURKE	9/25/03
RQST TEXT: 11:00				

VIOLATIONS:

DATE	DESCRIPTION	QTY	CODE	STATUS	RESOLVED
9/25/03	605.1 LOCATION: NARRATIVE: REMOVE BIRD'S NEST AND REPAIR / REPLACE INOPERABLE EXTERIOR LIGHT FIXTURE AT EAST ENTRANCE.	1	ELECTRICAL EQUIPMENT	ACTIVE	10/16/06
9/25/03	605.1 LOCATION: NARRATIVE: REPAIR / REPLACE INOPERABLE EXTERIOR FRONT YARD LIGHT/LAMP POST.	1	ELECTRICAL EQUIPMENT	ACTIVE	10/16/06
9/25/03	605.1 LOCATION: NARRATIVE: INSTALL GFI OUTLETS IN KITCHEN AND BATHROOMS.	1	ELECTRICAL EQUIPMENT	ACTIVE	10/16/06
9/25/03	605.1 LOCATION: NARRATIVE: UPGRADE PRESENT ELECTRICAL SERVICE.	1	ELECTRICAL EQUIPMENT	ACTIVE	10/16/06
9/25/03	304.6 LOCATION: NARRATIVE: REPAIR DAMAGED/SUTTLED CONCRETE FLOWERBOX AT FRONT OF HOUSE.	1	EXTERIOR WALLS	ACTIVE	10/16/06

TOTAL TIME:



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PREPARED 10/16/06, 14:21:55 CASE HISTORY REPORT PAGE 2  
 PROGRAM CE200L CASE NUMBER 01-00001881

PROPERTY INDEX NUMBER  
 ADDRESS  
 GRANT-LOAN PROGRAM  
 10-16-307-081-0000  
 5225 ARCADIA ST  
 SKOKIE IL 60077

DATE	DESCRIPTION	QTY	CODE	TENANT NAME	TENANT NBR	STATUS
9/25/03	305.3 LOCATION: NARRATIVE: CORRECT BASEMENT SEEPAGE PROBLEMS.	1	INTERIOR SURFACES			RESOLVED
9/25/03	504.1 LOCATION: NARRATIVE: REPAIR TOILET, SHOWER AND BASIN IN BASEMENT. REPLACE WATER DAMAGED WOOD PANELING AND FLOOR TILE.	1	PLUMBING GENERAL			ACTIVE
9/25/03	304.10 LOCATION: NARRATIVE: INSTALL HANDRAILS BETWEEN KITCHEN AND MIDLANDING AT WEST ENTRANCE.	1	STAIRWAYS, DECKS, PORCHES			ACTIVE
9/26/03	304.13 LOCATION: NARRATIVE: REPLACE ALL ORIGINAL WINDOWS.	1	WINDOW AND DOOR FRAMES			ACTIVE
9/26/03	504.1 LOCATION: NARRATIVE: INCREASE WATER PRESSURE FOR FIRST FLOOR SHOWER.	1	PLUMBING GENERAL			ACTIVE
9/26/03	304.12 LOCATION: NARRATIVE: INSTALL GRIP-BARS/HANDRAILS IN FIRST FLOOR BATHUB AREA.	1	HANDRAILS AND GUARDS			ACTIVE
9/26/03	305.3 LOCATION: NARRATIVE: REPLACE WATER DAMAGED WALLS AND MISSING TILES IN FIRST FLOOR BATHROOM.	1	INTERIOR SURFACES			ACTIVE
9/26/03	304.1 LOCATION: NARRATIVE: SECURE FALLING SOFFIT/EAVE AT SOUTHEAST CORNER OF HOUSE.	1	GENERAL EXTERIOR			ACTIVE
9/26/03	504.1 LOCATION: NARRATIVE: CORRECT ALL LEAKING FAUCETS.	1	PLUMBING GENERAL			ACTIVE
9/26/03	605.1 LOCATION: NARRATIVE: REPAIR / REPLACE INOPERABLE CEILING FIXTURE AND/OR SWITCH IN SOUTHEAST BEDROOM.	1	ELECTRICAL EQUIPMENT			ACTIVE
9/26/03	605.1 LOCATION: NARRATIVE: REPAIR / REPLACE INOPERABLE CEILING FIXTURE IN NORTHEAST BED ROOM	1	ELECTRICAL EQUIPMENT			ACTIVE
9/26/03	605.1 LOCATION: NARRATIVE: REPAIR / REPLACE INOPERABLE CEILING FIXTURE AND SWITCH AT MIDLANDING OF WEST ENTRANCE.	1	ELECTRICAL EQUIPMENT			ACTIVE



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CASE HISTORY REPORT  
 CASE NUMBER 01-00001881

PREPARED 10/16/06, 14:21:55  
 PROGRAM CE200L  
 VILLAGE OF SKOKIE

-----  
 CASE TYPE  
 Property Index Number  
 ADDRESS  
 DATE ESTBL  
 STATUS  
 TENANT NBR  
 STATUS DATE  
 -----

INSPECTOR  
 TENANT NAME  
 STATUS  
 TENANT NBR

10/15/01  
 ACTIVE  
 9/23/03

CARL CELESTINO

IL 60077

VIOLATIONS:	DATE	DESCRIPTION	QTY	CODE	STATUS	STATUS
	9/26/03	304.2 LOCATION: NARRATIVE: SCRAPE AND PAINT CEILING AT MIDLANDING OF WEST ENTRANCE.	1	EXTERIOR PAINTING	ACTIVE	RESOLVED
	9/26/03	304.15 LOCATION: NARRATIVE: REPLACE DETERIORATED WEST ENTRANCE DOOR WITH EXTERIOR GRADE DOOR.	1	DOORS	ACTIVE	RESOLVED
	9/29/03	504.1 LOCATION: NARRATIVE: REPLACE SUMP PUMP IN BASEMENT.	1	PLUMBING GENERAL	ACTIVE	RESOLVED

Property of Cook County Clerk's Office



# UNOFFICIAL COPY Exhibit 4 PROPERTY INSIGHT, LLC.

A California Limited Liability Company  
400 S JEFFERSON, CHICAGO, IL 60607

(312) 223-2582

## TRACT INDEX SEARCH

VILLAGE OF SKOKIE  
5127 OAKTON  
SKOKIE, ILLINOIS 60077  
ATTN: TERRY OLIVE

Order No.: 1404 S9630997 SS  
Cover Date: SEPTEMBER 25, 2006  
Ref: 5225 ARCADIA

WEP/EU

Legal Description of Land Searched: (See Attached)

Permanent Tax Number (P.I.N.):  
10-16-307-081-0000

Street Address of Land Search (as furnished by Applicant):  
5225 ARCADIA  
SKOKIE, ILLINOIS

Grantee(s) in last recorded conveyance:  
CATHERINE S. ARNIERI

In accordance with the application, a search of tract indices discloses the following items.

DOCUMENT/CASE NO.:	88488204
GRANTOR:	FAUSTO S. ARNIERI (DIV NT REMRD)
GRANTEE:	CATHERINE S. ARNIERI
INSTRUMENT:	QUIT CLAIM DEED
DATE:	10/12/1988
RECORDED:	10/24/1988
REMARKS:	

DOCUMENT/CASE NO.:	0503406086
GRANTOR:	CATHERINE C. ARNIERI (SINGLE)
GRANTEE:	JPMORGAN CHASE BK NA
INSTRUMENT:	MORTGAGE
DATE:	01/13/2005
RECORDED:	02/03/2005
REMARKS:	\$37,098.00

PROPERTY INSIGHT

By: *E. Arneri*

SEE ATTACHED FOR TERMS AND CONDITIONS OF SEARCH AND EXPLANATION OF ABBREVIATIONS  
This is not a title insurance policy, guarantee, or opinion of title and should not be relied upon as such.

**UNOFFICIAL COPY** Exhibit 5**VILLAGE OF SKOKIE****HOUSING IMPROVEMENTS PROGRAM****INCOME LIMITS**

<u>No. of Persons in Household</u>	<b>GRANT</b>	<b>LOAN</b>
	<u>Very Low-Income</u>	Zero (0) Percent Interest <u>Low-Income</u>
1	\$26,400	\$40,650
2	\$30,150	\$46,400
3	\$33,950	\$52,220
4	\$37,770	\$58,000
5	\$40,700	\$62,650
6	\$43,750	\$67,300
7	\$46,750	\$71,900
8	\$49,750	\$76,550

**NOTE:** HOUSEHOLD INCOME IS THE TOTAL INCOME OF ALL HOUSEHOLD MEMBERS EIGHTEEN (18) YEARS OR OLDER WHO CONTRIBUTE TO THE HOUSEHOLD.

**SOURCE:** HUD SECTION 8 PROGRAM INCOME LIMITS FOR THE CHICAGO, SMSA, EFFECTIVE FY05

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Exhibit 6

**Notice 703**  
(Rev. September 2004)



Property of Clerk's Office

CU1217561-11A71217925

**FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT**

**2004** • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.  
• SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name CATHERINE M ARNIERI		Box 2. Beneficiary's Social Security Number 320-26-4275	
Box 3. Benefits Paid in 2004 \$4,255.20	Box 4. Benefits Repaid to SSA in 2004 NONE	Box 5. Net Benefits for 2004 (Box 3 minus Box 4) \$4,255.20	
DESCRIPTION OF AMOUNT IN BOX 3 Paid by check or direct deposit \$3,456.00 Medicare premiums deducted from your benefit \$799.20 Total Additions \$4,255.20 Benefits for 2004 \$4,255.20		DESCRIPTION OF AMOUNT IN BOX 4 NONE	

**UNOFFICIAL COPY**

**FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT**

**2005** • PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.  
 • SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name <b>CATHERINE M ARNIERI</b>		Box 2. Beneficiary's Social Security Number <b>320-28-4215</b>	
Box 3. Benefits Paid in 2005 <b>\$4,370.40</b>	Box 4. Benefits Repaid to SSA in 2005 <b>NONE</b>	Box 5. Net Benefits for 2005 (Box 3 minus Box 4) <b>\$4,370.40</b>	
DESCRIPTION OF AMOUNT IN BOX 3		DESCRIPTION OF AMOUNT IN BOX 4	
Paid by check or direct deposit Medicare premiums deducted from your benefit Total Additions Benefits for 2005		NONE	
<b>\$3,456.00</b> <b>\$914.40</b> <b>\$4,370.40</b> <b>\$4,370.40</b>			
Box 6. Voluntary Federal Income Tax Withheld <b>NONE</b>		Box 7. Address <b>CATHERINE M ARNIERI</b> <b>5225 ARCADIA ST</b> <b>SKOKIE IL 60077-1530</b>	
Box 8. Claim Number (Use this number if you need to contact SSA.) <b>338-28-3336B6</b>			

Form SSA-1099-SM (1-2006)

DO NOT RETURN THIS FORM TO SSA OR IRS

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