COUNTY OF FRESNO HOMEBUYER ASSISTANCE PROGRAM APPLICATION

(See Reverse for Instructions)

| | | | | Арр | LICAN | | ORMATION | | | | | | |
|---|---|--|---|------------------------------------|----------------------------|--|---|---------------|---|---------------------|--|----------|--|
| 1 | Name of | | | | | | Name of co- | | | | | | |
| | applicant: Mailing address Street: | | | | | | applicant: | City | | | | | |
| 3 | of applicant: | Street: | | | | | | City | | Σip | Zip: | | |
| | Address of Street: | | | | | | | City | City | | : | | |
| 4 | home being | | | | | | | | | | | | |
| | purchased: | | | | | | | | | | | | |
| 5 | Lender's Name: | | | | | | | | | | | | |
| | Contact | | | | | Phon | e | | Fax | | | | |
| 6 | Person: | | | | | | Number: | | | Number: | | | |
| 7 | Mortgage Bank: | | | | | | ess: | | City, Sta | City, State and Zip | | | |
| ' | Quarterit | | | | | | Dhana | | | | | | |
| 8 | Contact Person: | | | | | | Phone Number: | | | Fax Number: | | | |
| | | | | | | IGIBILI | | | Number | Number. | | | |
| | Will the applicant use the home Has applicant | | | | | | | | | heina | nurchase | d | |
| 0 | as his/her principal residence? | | | | Homebuyer Training Course? | | | | Is the home being purchased currently occupied by a tenant? (See | | | | |
| 9 | 10 | | | (attach | certific | ate) □Yes □No | | 11 | instructions | | erse.) | | |
| | Yes No | | | | | | | \vdash | | | ∐Yes | No | |
| | Was the home bu | Was the home built prior to | | | nonthly | y household income | | | Is applicant currently a resident of | | | ent of | |
| 12 | 1978? | | 13 | | | | | 14 | Public Housing? | | | | |
| | □Yes □No | | | \$ | | | | | ☐Yes ☐No | | | ∏No | |
| 15 | List all household mer | nbers who will live | | | | | | | 1 | | | | |
| - | In new home: | | elations | hip | Sex | Age | D.O.B. | | Social Secu | rity # | Elde | rly Y/ N | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | RACKI | | | | | | | 1 | |
| | Is applicant/co-a | pplicant | | _ | | | e head of house | hold? | Is A | pplicar | nt a Farm | Worker? | |
| 16 | handicapped? 17 | | | | | 18 (See reverse for | | | | | | | |
| | |]Yes ∏No | | | | | Yes | No | inst | ruction | s) 🗌 Ye | s 🗌 No | |
| 19 | RACE The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may not discriminate either on the basis of this information, or whether you choose to furnish it. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname. | | | | | | | | | | | | |
| A | visee ledies en Aleste N | letius | | | | | | | | | | | |
| | rican Indian or Alaska N | Nalive | | | | Asian and White Black or African American and White | | | | | | | |
| Asian Black or African American | | | | | | | | | | r Africar | American | | |
| Native Hawaiian or Other Pacific Islander | | | | | | American Indian or Alaska Native and Black or African American American Indian or Alaskan Native and White | | | | | | | |
| White | 9 | | Ot | Other | | | | | | | | | |
| 20 | | | | HISPAN | | LATI | NO ETHNIC | ЛТҮ | | | | | |
| _• | | | | | | | e category) | | | | | | |
| His | PANIC OR LATINO | | | (1100 | | | NOT HISPANIC / LAT | INO | | | | | |
| | | LE | | 's Calcu | | | AMOUNT OF H | | AN | | | IJ | |
| 21 | Sales price of ho | | | | | 1 | | _0/ | | | \$ | | |
| 22 | | | | | | | | | | | \$ | | |
| 23 | Total cost of purc | | | | \$ | | | | | | | | |
| 24 | Loan amount to be financed by primary lender: | | | | | | | | | | \$ | | |
| 25 | Borrower's contribution(minimum requirement 1.5% line 21) | | | | | | | | | \$ | | | |
| 26 | Add lines 24 and 25 | | | | | | | | | | \$ | | |
| 27 | Gap Assistance needed (subtract line 26 from line 23) | | | | | | | | | | | | |
| 28 | | | t line 2 | 26 from lir | ie 23) | | | | | | \$ | | |
| | Maximum allowal | needed (subtrac | | | , | us elig | ible closing cos | sts) | | | \$ \$ | | |
| 29 | Maximum allowal HAP amount (les | needed (subtrac ole HAP assista | nce (2 | | , | us elig | ible closing cos | sts) | | | | | |
| 29 | | needed (subtrac ole HAP assista | nce (2 28) | 0% of line | e 21 pl | | ible closing cos | | | | \$ | | |
| 29 30 | | needed (subtrac ole HAP assista ser of line 27 or he foregoing info nat applicant is e | nce (2 28) Le ormati | 0% of line NDER'S C | e 21 pl | ICATIC ents a | ON OF ELIGIBIL | ITY true a | | | \$ \$ pest of my | | |
| 30 | HAP amount (les I have reviewed t knowledge and th the amount show Name of | needed (subtrac ole HAP assista ser of line 27 or he foregoing info nat applicant is e | nce (2 28) Le ormati | 0% of line NDER'S C | e 21 pl | ICATIC ents ai from th | DN OF ELIGIBIL nd find they are ne County of Fr Signature of | ITY true a | | | \$ \$ pest of my | | |
| | HAP amount (les I have reviewed t knowledge and th the amount show | needed (subtrac ole HAP assista ser of line 27 or he foregoing info nat applicant is e | nce (2 28) Le ormati | NDER'S C On and at for assis | e 21 pl | ICATIC ents an from th 32 | DN OF ELIGIBIL nd find they are ne County of Fr Signature of Underwriter: | ITY true a | | | \$ \$ pest of my ance Prog | | |
| 30 | HAP amount (les I have reviewed t knowledge and th the amount show Name of Underwriter: | needed (subtrac ole HAP assista ser of line 27 or he foregoing inf nat applicant is e n on line 29. | nce (2 28) Le ormati eligible | NDER'S C on and at for assis | e 21 pl | ICATIC ents an from th 32 | DN OF ELIGIBIL nd find they are ne County of Fr Signature of | ITY true a | Homebuyer / | Assista | \$ \$ pest of my ance Prog | | |
| 30 31 | HAP amount (les I have reviewed t knowledge and th the amount show Name of Underwriter: | needed (subtrac ole HAP assista ser of line 27 or he foregoing info nat applicant is e | nce (2 28) Le ormati eligible | NDER'S C on and at of assis | e 21 pl | ICATIC ents an from th 32 | DN OF ELIGIBIL nd find they are ne County of Fr Signature of Underwriter: O APPROVAL | ITY true a | | Assista | \$ \$ pest of my ance Prog Date: | | |
| 30 | HAP amount (les I have reviewed t knowledge and th the amount show Name of Underwriter: | needed (subtrac ole HAP assista ser of line 27 or he foregoing inf nat applicant is e n on line 29. | nce (2 28) Le ormati eligible | NDER'S C on and at for assis | e 21 pl | ICATIC ents an from th 32 | DN OF ELIGIBIL nd find they are ne County of Fr Signature of Underwriter: | ITY true a | Homebuyer / | Assista | \$ \$ pest of my ance Prog | | |

THE COUNTY WILL CHECK ITS FILES TO DETERMINE IF THE BORROWER(S) OWES ANY MONEY TO THE COUNTY. IF SO, THE COUNTY WILL REQUIRE REPAYMENT OF THIS DEBT PRIOR TO RELEASING LOAN APPROVAL.

- 1. Type or print legibly the applicant's name as it is to appear on Promissory Note.
- 2. Enter co-applicant's name as it is to appear on Promissory Note.
- 3. Enter mailing address where applicant(s) is currently residing.
- 4. Enter address of home being purchased.
- 5. Enter Lender's name.
- 6. Enter contact person's name, phone number and fax number.
- 7. Enter Mortgage Bank name and address.
- 8. Enter Bank contact person's name, phone number and fax number.
- 9. In order to be eligible for HAP, the home must be primary residence for all applicants. No co-signers allowed.
- 10. If the home being purchased is located within the incorporated limits of a Fresno County city, enter the city's name. Telephone the County Office at 262-4292 prior to submitting this application to ensure that this city is presently participating in the HAP Program.
- 11. If property is not owner occupied, the Seller must certify (**Form 209, Voluntary Arm's Length Agreement)** property has been vacant for three (3) months or more prior to buyer 's selection of home. If property is currently occupied by a tenant, the Seller certifies tenant received a written notice prior to occupying the residence of the possibility that tenant will be asked to move if property is sold and that relocation assistance will not be provided. The Seller will provide the County with a copy of this written notice.
- HAP application package for ANY home built prior to 1978 must include: 1) verification that applicant has received the "Protect Your Family From Lead in Your Home Pamphlet, (#EPA 747-K-001 April 2001, <u>AND</u> <u>2</u>) a Compliance Inspection Report (HUD Form 92051) signed by a certified person indicating that all conditions have been satisfied is required.
- 13. Monthly income is gross annual income divided by twelve. Annual income is the anticipated total income from all sources received by each person living in the household. It includes, but is not limited to the full amount, before any payroll deductions, of wages, salaries, overtime pay, commissions, fees, tips, and bonuses. It includes interest, dividends, and net income from operation of a business.
- 14. Indicate whether applicant is currently a resident of public housing.
- 15. List all people who will live in residence.
- 16. If either applicant or co-applicant is handicapped, please check "yes". Otherwise, check "no".
- If applicant is female, and head of household please check "yes". If applicant is male, please check "no".
 Is Applicant a Farm worker? <u>Farmworker</u> means a farm employee of an owner, tenant, labor contractor, or other operator raising or harvesting agricultural commodities; or a worker in the employ of a farm operator, handling planting, drying, packing, grading, storing, delivering to storage or market, or carrying to market agricultural or aquacultural commodities produced by the operator, including the timber industry.
- 19. Enter Race of Head of Household.
- 20. Enter Ethnicity of Head of Household.
- 21. Enter the sales price of property.
- 22. Enter the total for all closing costs including prepaid expenses.
- 23. Enter the sum of lines 21 and 22.
- 24. Enter the loan amount to be financed by primary lender.
- 25. Enter borrower's contribution.
- 26. Enter the sum of lines 24 and 25.
- 27. Subtract line 26 from line 23 and enter answer.
- 28. Enter the sum of line 21 (20% of sales price) plus line 22 (closing costs).
- 29. Enter the lesser of line 27 or line 28.
- 30. This is the certification made by the underwriter when he or she signs on line 32.
- 31. Enter the name of the underwriter.
- 32. The underwriter certifies by signing and dating application here.