



**CLEVELAND HEIGHTS - DOWN PAYMENT ASSISTANCE PROGRAM
LOAN APPLICATION**

ENTIRE APPLICATION MUST BE COMPLETED AND SIGNED WHERE REQUIRED

Amount of Down Payment Loan Requested \$ _____

Check one:

Single Family Home: \$10,000 Down Payment Assistance Loan

Two Family Home: \$10,000 Down Payment Assistance Loan

APPLICANT(S) INFORMATION:				
Last Name	First	Int.	Social Security Number	Date of Birth
Address			City	State Zip
Home Telephone		Cell Telephone		Email Address
Last Name	First	Int.	Social Security Number	Date of Birth
Address			City	State Zip
Home Telephone		Cell Telephone		Email Address

List all persons who will live in the home being purchased.

Full Name (First and Last) <small>(use back for additional household members)</small>	Age	Annual Income	Relationship	Ethnicity* <small>(See page 2 for demographic category)</small>
		\$	Applicant	
		\$	Joint Applicant	
		\$		
		\$		
		\$		
		\$		

**Demographic information is for statistical purposes and does not affect loan approval or denial.*

Please contact Sharra Thomas at 216-381-6100 ext. 13 for any questions or if there is a need for assistance to complete application
CH DP APPLICATION 2017

Borrower(s) Name(s): _____

DEMOGRAPHIC INFORMATION*

Add one of the categories listed below in the ethnicity column provided on page one (1) for each household member.

Ethnicity:

White	Black/African American
Asian	American Indian/Alaskan Native
Hawaiian National/Pacific Islander	American Indian & White
Asian & White	Black & White
American Indian & Black	Other Multi-Racial
Asian/Pacific Islander	

Female Headed Household (Yes/No)? _____

Hispanic/Latino (Yes/No)? _____

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PROPERTY INFORMATION

Address of home being purchased: _____
Street City Zip

Is this a single family home? _____ Will all buyer(s) live in the home? _____

Is the home occupied by the seller? _____ Is the home vacant now? _____

Was the home rented to or occupied by a tenant at any time in the past 90 days? _____

Purchase Price \$ _____ Number of Bedrooms _____

Have all violations been corrected? _____

ADDITIONAL REQUIRED INFORMATION:

Has any applicant or household member owned a home before? _____

Is any applicant delinquent on any federal, state, or Cleveland Heights income taxes? _____

Have the applicants completed both counseling and maintenance training? _____

If not, what date will these programs be taken? _____

LEGAL INFORMATION:

List the names of the persons who will be on the deed: _____

List names and addresses of spouses of any person above they are not legally divorced from:

Borrower(s) Name(s): _____

HOUSEHOLD INCOME CERTIFICATION

INCOME FROM EMPLOYMENT (List all employment of all household members expected in the next 12 months)		
Applicant's Current Employer	Employer's Address	Phone
Position	Annual Gross Pay	
Joint Applicant or Other Household Member Employer	Employer's Address	Phone
Position	Annual Gross Pay	
Other Household Member Employer	Employer's Address	Phone
Position	Annual Gross Pay	

OTHER INCOME (List amount expected for the next 12 months.)
*If you do not receive income from a source indicated, write the number 0 in the space.
If you receive income from a source not listed, use the other income space.
All income of all household members from all sources must be listed.*

Child Support \$ _____ Soc. Security \$ _____ VA Benefits \$ _____
Disability \$ _____ T.A.N.F. \$ _____ Other Public \$ _____
Alimony \$ _____ Div. /Int. \$ _____ Pension \$ _____
Other \$ _____ Description: _____
Use back for additional information.

Please indicate below how you heard about our program. Thank you.

Friend _____ Relative _____ Brochure _____
Neighbor _____ Internet _____ Agency (list name) _____
Advertisement _____ Lender _____ Other _____

Borrower(s) Name(s): _____

PROGRAM REQUIREMENTS: This application will not be processed until the following documents have been submitted to the Home Repair Resource Center:

1. Original City application completed and signed in ink by all borrowers.
2. Typed first mortgage application (must be signed by applicants).
3. Income verifications for two full years for all household members for all sources.
4. Proof of pre-purchase & home maintenance counseling by City approved agency.
5. Point of sale inspection report with list of violations (if applicable).
6. Re-inspection report showing violations have been corrected including paint repairs.
7. Appraisal (first 2 or 3 pages through signature page only).
8. First mortgage commitment letter, pre-approval or automated approval.
9. Preliminary HUD-1 settlement statement showing down payment loan amount.
10. Escrow agent's signed W-9 form.

Rate, origination fee, broker fee, and points of the first mortgage must not be excessive for the type of mortgage obtained by the buyer: conventional, VA, or FHA. No balloon payment or prepayment penalty allowed.

Prior to approval, City of Cleveland Heights must be given access to the property to conduct a housing inspection and visual paint inspection. Inspection reports are for the sole use of the City of Cleveland Heights and Home Repair Resource Center. Buyers are strongly encouraged to obtain a private housing inspection as may be indicated in your purchase agreement.

The Applicant and Joint Applicant understand and agree that they must pay at least 3.50% of the purchase price from their own funds and/or a bona fide gift towards the purchase of the home. If the final settlement statement would show less than 3.50% paid from these sources, Home Repair Resource Center cannot proceed with the Down payments Assistance Program.

Lender Certification: The lender has explained the above requirements to the applicant(s).

Lender's Authorized Signature

Date

By signing this application the Applicant(s) authorizes the Lender named to share copies of any necessary documents in their possession with the City of Cleveland Heights - Home Repair Resource Center in order to expedite the processing of this loan application. Also, the signature(s) below gives the City of Cleveland Heights – Home Repair Resource Center the authority to obtain credit report(s) and to verify all information contained in this application, by contacting any employer or other party named in the application.

***I/We have read and understand the pamphlet "Protect Your Family From Lead in Your Home."**

Available at the following internet link:

http://www.hud.gov/utilities/intercept.cfm?/offices/lead/library/enforcement/pyf_eng.pdf

Penalty For False Or Fraudulent Statement, U.S.C. Title 18, Sec. 1001 provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies ... or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years or both."

Applicant Certification: I (we) understand and agree to the above.

Applicant Signature

Date

Joint Applicant Signature

Date