# Cleveland Heights - Down Payment Assistance Loan Application

ENTIRE APPLICATION MUST BE COMPLETED AND SIGNED WHERE REQUIRED

## 1. DPA

Amount of Down Payment Loan Requested $ _____

Check one:

___ Single Family Home: $30,000 Down Payment Assistance Loan

___ Two Family Home: $50,000 Down Payment Assistance Loan

## 2. Applicant Information

| | |
|---|---|
| Primary Applicant | Full name: _____ |
| Primary Applicant DOB | _____ |
| Primary Applicant Phone / Email | Phone: _____ Email: _____ |
| Co-Applicant | Full name: _____ |
| Co-Applicant DOB | _____ |
| Co Applicant Phone / Email | Phone: _____ Email: _____ |
| Home Address | _____ |
| City / State / ZIP | _____ |
| Housing Status | ☐ Homeowner ☐ Renter ☐ Living with family/other ☐ Other |
| Household Size | _____ total household members |
| Language / Accessibility | Preferred language: _____ Accommodation needed? ☐ Yes ☐ No |

## 3. Household Members

List everyone who lives in your household, including yourself. Add a page if additional space is needed. Common sources: employment/wages; Social Security/SSI; pension/retirement; unemployment; self-employment; rental income; child support/alimony; other income.

| Name | Age | Annual Income? | Relationship | Ethnicity* (See page 2 for demographic category) |
|---|---|---|---|---|
| | | $ | Applicant | |
| | | $ | Joint Applicant | |
| | | $ | | |
| | | $ | | |
| | | $ | | |
| | | $ | | |

Borrower(s) Name(s): _____

## 4. Demographic Information

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

Ethnicity:

White
Asian
Hawaiian National/Pacific Islander
American Indian
Black/African American
Alaskan Native

Female Headed Household (Yes/No)? _____

Hispanic/Latino (Yes/No)? _____

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

## 5. Property Information

Address of home being purchased: _____

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 $ _____

Have all violations been corrected? _____

Number of Bedrooms _____

## 6. 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 Home Buyer Education? _____

If not, what date will this program be taken? _____

## 7. 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): _____

## 8. Household Income Information

List all employment of all household members, 18 years or old, expected in the next 12 months. Add a page if additional space is needed

| Name | Current Employer or source of income | Employee Phone | Position | Annual Gross Pay | Start Date |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |

## 8. Other Income Information - (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.

| Income | Monthly $ | Income | Monthly $ |
|---|---|---|---|
| Child Support | $ | Other Public | $ |
| Soc. Security | $ | Alimony | $ |
| VA Benefits | $ | Div. /Int. | $ |
| Disability | $ | Pension | $ |
| T.A.N.F. | $ | Other: _____ | $ |

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

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

I have read and understood the Down Payment Assistance Fact Sheet and the Frequent Asked Questions.

_____ _____
Applicant Signature Date

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 HRRC 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) and Visual Paint Inspection
6. Re-inspection report showing violations have been corrected including paint repairs.
7. Appraisal
8. First mortgage commitment letter
9. Loan Estimate document showing down payment loan amount
10. Escrow agent's signed W-9 form.
11. Bank Statements
12. Copy of state ID, birth certificate, or government issue ID.

## Signatures

**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: https://portalapps.hud.gov/CORVID/HUDLBPAdvisor/info/documents/A-1%20-%20protect%20your%20family%20from%20lead%20pamphlet.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