

**CALHOME**

**FIRST TIME HOME BUYER PROGRAM APPLICATION**

1. **Applicant Name:** \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_  
Applicant SS#: \_\_\_\_\_

2. **Co-Applicant Name:** \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_  
Applicant SS#: \_\_\_\_\_

3. **Phone #:** ( ) \_\_\_\_\_ **Cell. #:** ( ) \_\_\_\_\_ **Work #:** ( ) \_\_\_\_\_

4. **Street Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

(if different from above)

5. Rent  Own  Buying  At current address since: Month \_\_\_\_\_ Yr \_\_\_\_\_ Monthly rent \$ \_\_\_\_\_

Name of landlord: \_\_\_\_\_ Address of landlord: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Have you ever owned other real estate property / trailer within the past (3) years? Yes  No

**Former address if less than three (3) years at present address:**

**A.** \_\_\_\_\_  
(Number & Street, City, State, Zip Code)

\_\_\_\_\_  
Name, Mailing Address and Phone Number of Landlord

Dates that you lived here? \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

**B.** \_\_\_\_\_  
(No & Street., City, State, Zip Code)

\_\_\_\_\_  
Name, Mailing Address and Phone Number of Landlord

Dates that you lived here? \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

6. Manner in which title will be held: \_\_\_\_\_

7. Please complete the following information for everyone occupying the property: (will occupy for FTHB Program)

Name	Gender (Male or Female)	Relation	Date of Birth	Social Security Number	Income Source (i.e. employment, social security, etc.)	Gross Annual Income

Total number of occupants: \_\_\_\_\_ Are you disabled: Yes  No

8. **Applicants Employer:** \_\_\_\_\_

Complete Address: \_\_\_\_\_ Telephone # \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Income: Hourly Rate: \$ \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Weeks Worked per Year: \_\_\_\_\_

Anticipated income within the next 12 months: \$ \_\_\_\_\_

**Co-Applicants Employer:** \_\_\_\_\_

Complete Address: \_\_\_\_\_ Telephone # \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Income: Hourly Rate: \$ \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Weeks Worked per Year: \_\_\_\_\_

Anticipated income within the next 12 months: \$ \_\_\_\_\_

10. If employed in current position for less than twelve (12) months, give past twelve (12) months employment history (A=Applicant, C=Co-Applicant);

A or C	Date of Employment (From-To)	Name and Address of Employer



11. Are you a Veteran? Yes  No

12. Do you have a checking or savings bank account? Yes  No

If yes, name and address of bank: \_\_\_\_\_

Checking Account #: \_\_\_\_\_ Acct. Balance: \$ \_\_\_\_\_

If yes, name and address of bank: \_\_\_\_\_

Checking Account #: \_\_\_\_\_ Acct. Balance: \$ \_\_\_\_\_

13. Life Insurance, Face Value of Policy: \$ \_\_\_\_\_ Cash Value: \_\_\_\_\_

Savings Accounts \_\_\_\_\_ Cash Value: \_\_\_\_\_

Bonds \_\_\_\_\_ Amount: \_\_\_\_\_

Other (specify): \_\_\_\_\_ Cash Value: \_\_\_\_\_

(i.e. collectable automobile with make, year & model)

14. Debts (do not include utilities or phone)

Name and Address of Creditor	Balance	Minimum Monthly Payment
1.		
2.		
3.		
4.		
TOTALS		

15. Have you ever filed for Bankruptcy? Yes  No  If yes when? \_\_\_\_\_ Where? \_\_\_\_\_

16. Have you ever had any suit, judgments or repossessions? Yes  No

If yes, explain why, where and when: \_\_\_\_\_

**CERTIFICATION / AUTHORIZATION FOR RELEASE OF INFORMATION:**

I certify that the information given in this form is true and accurate to the best of my knowledge. I certify that I have no additional income and that there are no persons living in or contributing to my household other than those described here. I understand that the information on this form is subject to verification. Also, I hereby give permission to NeighborWorks® HomeOwnership Center Sacramento Region to release the information on this application to the lender of my choice. It is my understanding that this information is to be used solely for the purpose of underwriting/approval of a CalHome loan application under the Down Payment Assistance Program.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Co-Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_



**Originating Lender & Escrow Company**

**Lender** \_\_\_\_\_

Address \_\_\_\_\_

Loan Officer \_\_\_\_\_ Loan Processor \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

e-mail: \_\_\_\_\_

**Title Company** \_\_\_\_\_

Address \_\_\_\_\_

Escrow Officer \_\_\_\_\_ Order \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

e-mail: \_\_\_\_\_



**NeighborWorks® Sacramento  
CalHome Mortgage Assistance  
PROGRAM DISCLOSURE  
PLEASE READ CAREFULLY**

This Program Disclosure and Information Authorization notice is intended to provide basic information about the NeighborWorks® Sacramento CalHome Mortgage Assistance Loan Program and the applicant(s) authorization for verification and sharing of information regarding a loan request. The loan program is intended to provide the necessary financial down payment assistance to enable you to purchase your first home. This disclosure is not a commitment for a loan. A full copy of the adopted program guidelines is available upon request.

**General Information**

In applying for a NeighborWorks® Sacramento CalHome loan, as with any loan, you will be asked to sign loan documents. When you have signed those documents and the loan is made, you will be bound by the terms of those loan documents, particularly the Promissory Note and Deed of Trust. You should become familiar with and understand the provisions of the loan described in this notice.

**Eligibility Criteria**

You are eligible for a NeighborWorks® Sacramento CalHome Mortgage Assistance loan if you meet the following requirements:

1. You will occupy your home as your primary residence.
2. You will hold fee simple title to your home.
3. The applicant's gross income does not exceed 80% of Sacramento County median income for the number of persons in the household.
4. You are an eligible first time home buyer, having not owned a primary residence during the three years prior to applying for assistance under the NeighborWorks® Sacramento's CalHome Mortgage Assistance Program.
5. You will be required to pay one percent (1%) of the Purchase Price from your own funds. Your one percent (1%) investment cannot be borrowed or gifted.
6. You have attended a Homebuyer Education course at NeighborWorks® Sacramento facility and can provide the Certificate of Completion. Online courses are not allowed.
7. FICO Credit score must be at least 640. All open collections to be paid prior to closing.
8. Your housing expenses will not fall below 28% or exceed 38% of your gross income and your total combined debts cannot 45% of your gross income.
9. First mortgage must be a 30-year fixed mortgage and the lender is required to collect and manage impound accounts for payment of taxes, assessments and hazard and/or floor insurance for the term of the first mortgage loan.
9. Subject property must be located in eligible areas which are defined as "qualified census tracts" in the City and County of Sacramento.
10. The maximum allowable sales price of the assisted unit cannot exceed \$275,000, the current median sales price for a single family home in Sacramento County.

**Loan Amount**

Loan amount available to eligible applicants will be no less than \$5,000 and no more than \$30,000, depending on applicant’s need and the amount of CalHome funds that are available.

**Interest Rate**

The interest rate is 3% simple interest calculated on an annual basis.

**Loan Terms and Monthly Payments**

The loan payments are deferred for 30 years. See section on Loan Terms for repayment triggers

**Lien Position**

Loan must be in Second Position, behind an amortizing 1<sup>st</sup> mortgage loan. Any junior liens must be deferred.

**Use of Funds**

Funds may be used for down payment and a maximum of 3% is allowed for non-recurring closing costs. Interest rate buy downs are not allowed.

**Collateral for Loan**

A Deed of Trust recorded against your home will secure the loan advanced to you. The lien will be recorded in second position, junior and subordinate to the first mortgage to be recorded concurrently. The lien will remain until such time as all sums due are paid in full.

**Disclosure of Loan Information**

Initials:  
\_\_\_\_\_  
/\_\_\_\_\_  
\_\_\_\_\_

I/We understand that I/we are applying for two separate loans that the approval and processing of the two loans must be coordinated in order to receive assistance under the Program, and that authorization for a NeighborWorks® Sacramento CalHome Mortgage Assistance loan is dependent on the availability of sufficient program funds. I/We hereby authorize the first mortgage lender and NeighborWorks® Sacramento to assist with administration of the Program to share information in my/our loan applications with each other.

**Information Authorization**

Initials:  
\_\_\_\_\_  
/\_\_\_\_\_  
\_\_\_\_\_

I/We hereby authorize NeighborWorks® Sacramento to verify any information necessary in connection with the NeighborWorks® Sacramento’s CalHome loan application and the first lender loan application, including but not limited to the following: Credit information, including bankruptcies; Employment record; bank accounts; criminal history; mortgage/rental history; tax information including tax returns; family/marital status including divorce, child support, etc. Authorization is further granted to NeighborWorks® Sacramento to use a Photocopy of my/our signature(s) below, to obtain information regarding any of the aforementioned items.

**Loan Restrictions**

Loan shall be become due and payable upon sale or transfer of the property, when the property ceases to be owner occupied, or upon the loan maturity date. If at any time the residence is used as a

rental unit, the note and deed of trust are in default and the NeighborWorks® Sacramento will demand full payment of principle and interest and may begin foreclosure procedures. This restriction is part of the recorded Deed of Trust. The property will be restricted for use by owner occupants only during the 30 year term of the loan. If the Promissory Note is paid in full at any time during the loan, the owner occupancy restriction will be lifted as part of removing the Deed of Trust from title on the property.

**Property Requirements**

Properties eligible under this program are 1-4 units, Single Family Residence, HUD-approved Condos and PUD. Manufactured homes must be on permanent foundations. Landlord training is required for 2-4 unit properties. The subject property must meet the Housing Quality Standards (HQS) and have a clear Termite and Home Inspection completed prior to loan approval. If property is pre-1978, the home inspection must include a Lead-Based paint assessment. Any health & safety or section-1 items noted must be repaired.

**Loan Repayments**

NeighborWorks® Sacramento will maintain a financial record-keeping system to track payments and file statements on payment status. Payments from borrowers interested in prepaying their loans, as well as full demand payments, will be made to:

**NeighborWorks® Sacramento**  
**Attn: Loan Servicing**  
2400 Alhambra Blvd, Sacramento, CA 95817  
Toll Free (888) 355-5356 or (916) 452-5356 Ext.1214

NeighborWorks® Sacramento will answer any questions in connection with the loan. You can contact them at: **NeighborWorks® HomeOwnership Center Sacramento Region**

2400 Alhambra Blvd, Sacramento, CA. 95817  
Toll Free (888) 355-5356 or (916) 452-5356 Ext.1219

This Disclosure is intended for information purposes and authorization only. Important information relating specifically to your loan will be contained in the loan documents, which you are responsible for reading and understanding.

**I/ We acknowledge that I/ We have read the above information included in this Program Disclosure and Information Authorization document concerning the CalHome Loan Program for NeighborWorks® Sacramento; that I/ We authorize the verification of any information necessary in connection with the NeighborWorks® Sacramento’s CalHome loan application; that I/ We have received a copy of this Program Disclosure and Information Authorization document.**

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date



**Certification of Zero Income**

**Directions:** Enter the name of the household member - age 18 and older and NOT enrolled in school full time - that does not earn or receive any type of income. Enter in the source of funds that the household member will use to pay for housing expenses and other necessities. Print this form out, and have the household member, borrower, and co-borrower (as applicable) sign it. Include this form with the Case Submission package.

Household Member's Name: \_\_\_\_\_

Relationship to Borrower: \_\_\_\_\_

Certifications:

1. I hereby certify that I do not receive income from any of the following sources:
  - a. Wages from employment (including commissions, tips, bonuses, fees, etc.)
  - b. Income from operation of a business
  - c. Rental income from real or personal property
  - d. Interest or dividends from assets
  - e. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits
  - f. Unemployment or disability payments
  - g. Public assistance payments
  - h. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household
  - i. Sales from self-employed resources (Avon, MaryKay, Shaklee, etc.)
  - j. Any other source not named above.
2. I currently have no income of any kind and there is no imminent change expected in my financial status or employment status during the next 12 months.
3. I will be using the following sources of funds to pay for housing and other necessities:

\_\_\_\_\_  
HOUSEHOLD MEMBER'S NAME

\_\_\_\_\_  
Date

\_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-borrower's Signature

\_\_\_\_\_  
Date





## Information Release Authorization

**To whom it may concern:**

I / we, the undersigned borrower(s) have applied through NeighborWorks®HomeOwnership Center Sacramento Region for a 2<sup>nd</sup> mortgage under a State/ Federal program. You are hereby authorized to release to NeighborWorks®HomeOwnership Center Sacramento Region, or its agents, any information necessary for the purpose of processing my/our loan application. Such information includes but is not limited to:

- Income: history, dates, title, income, hours, etc. from employment and non-employment sources
- Mortgage Loans: loan balances, dates of loans, payment amount and history, etc.
- Rent History: payment amount and history, etc.
- Other: any related matters of credit.

**Privacy Act Notice Statement:** The Department of Housing and Urban Development (HUD) requires the collection of the information derived from this form to determine an applicant’s eligibility in a HOME/CDBG/ HPG Program and the amount of assistance necessary using HOME/CDBG/HPG funds. This information will be used to establish level of benefit on the HOME/CDBG/HPG Program; to protect the Government’s financial interest; and to verify the accuracy of the information furnished. It may be released to the appropriate Federal, State and local agencies when relevant, as well as to civil, criminal, or regulatory investigators, and to prosecutors. Failure to provide any information may result in a delay or rejection of your eligibility approval. The Department is authorized to ask for this information by the National Affordable Housing Act of 1990.

### IMPORTANT

**Authorization:** I / we authorize the below-named CalHome/HOME/CDBG/HPG loan recipient and HUD to obtain information about me and my household that is pertinent to eligibility for participation in the CalHome/HOME/CDBG/HPG Program.

I / we acknowledge that:

- (1) A photographic, carbon or facsimile copy of this authorization (being a valid copy of the signatures of the undersigned) may be deemed to be the equivalent of and used as a duplicate original.
- (2) I have the right to review the file and the information received using this form with a person of my choice to accompany me.
- (3) I have the right to copy information from this file and to request correction of information I believe inaccurate.
- (4) All adult household members will sign this form and cooperate with the owner in this process.

**Your prompt reply will help expedite this real estate transaction.**

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Social Security Number

