

HOMEBUYERS CLUB GRANT APPLICATION Organization: _Scott County CDA_____ Client ID: _____

Instructions: Please fill out *completely*. Incomplete application cannot be reviewed. If you need additional space, please feel free to use the back side or make additional copies as necessary.

Borrower	Co-Borrower
Name:	Name:
(Please print) First MI Last	(Please print) First MI Last
Address:	Address:
City: State: _	City: State: _
Zip: County:	Zip: County:
Phone:	Phone:
Alt. Phone:	Alt. Phone:
Email:	Email:
	Relationship to Buyer:
	Attended Homebuyers Club? ☐ Yes ☐ No
	Included in the mortgage? ☐ Yes ☐ No
How did you hear about the Homebuyers	Club Grant?
	☐ Newspaper ☐ Internet
☐ Someone who took a workshop ☐	
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2. Which Homebuyers Club session did you at	ttend?
3. Have Applicant or Co-Applicant <i>ever</i> owner of the second of the se	ed a home?
4. Have you experienced a home foreclosure	e, deed-in-lieu, or a short sale? ☐ Yes. ☐ No.
If yes, complete below:	
Date of foreclosure/deed-in-lieu/short sale	e:
Property address:	
Reason for hardship:	
Steps taken to overcome hardship:	

Property Information:

5.	Purchase Property Address:					
6.	Purchase Property Description:					
[]	Type of Property: ☐ Single Family ☐ Townhome/Condominium ☐ Mobile Home		Multiplex 2-4 Units Other:			
8.	Purchase Price:					
9.	Amount Financed:		Interest Rate:			
]]]	Type of Financing: ☐ City or County ☐ Conventional ☐ FHA ☐ FHA (203K) ☐ Habitat for Humanity		Minnesota Housing Finance Agency Rural Development Veteran's Administration Other:			
11.	Closing Date: You must inform the CDA immediately if this do	ate changes.				
12.	Receiving financial assistance from any other so If yes, please describe:					
13.	3. Lender Contact (name, company, email, phone):					
14.	Realtor Contact (name, company, email, phone)	:				
15.	5. Title Company Name <i>and</i> Address:					
	sehold Information (complete for all house	_				
16.	16. Please describe your financial goals for the next three to five years and how you plan to achieve these goals:					
17.	Are you currently, or have you in the past, particle etc.)?	cipated in a SCCDA	A housing program (Section 8, Public Housing,			
[Yes, I currently participate in:					
[Yes, I participated in the past, in:					
[\square No, I have never participated in other SCCDA	housing programs	5.			

18. Number of Household Members 18	+: Under 1	8:	
19. Household Income: Please include in	ncome for all individuals from all sources (<i>Emp.</i>	oyment, Benefits, ch	nild support, etc.)
Name (person receiving income)	Source of income (Name of employer/job title, employment start date, type of benefit, etc)	Gross Monthly Income (before taxes)	Net Monthly Income (after taxes)
		Gross Annual Income	Net Annual Income
	Total household income	2	
☐ Yes. ☐ No. To complete your application, please atta ☐ A Good Faith Estimate ☐ A signed Purchase Agreement ☐ Proof of Income ☐ Proof of Homebuyer Counseling (
By signing below: I understand that this application will not I understand that SCCDA grants are award I agree that all information provided her i I agree to notify the Scott County CDA im I agree to provide the SCCDA with a signe	ded on a first-come, first-serve basis. s accurate and truthful. mediately in writing if any information include	ed here changes.	
Applicant Signature:		Date:	
Co-Applicant Signature:		Date:	



Homebuyers Club Grant Eligibility Certification

Please review the Scott County Community Development (SCCDA) grant eligibility criteria and sign below to certify that you meet all grant requirments.

All parties on the loan are first-time homebuyers (as defined by current lending practices). This includes all I have not received a SCCDA first-time homebuyer grant in the past.

I will occupy the home as my primary residence.

I have completed the SCCDA Homebuyers Club (or will complete before closing on my loan).

I have successfully completed Pre-Purchase/Homebuyer Counseling (or will complete before closing on my loan).

I am able to qualify for my mortgage prior to applying the benefit of the Homebuyers Club Grant.

My household income is at or below the applicable SCCDA grant income limit.

My home purchase price is at or below the applicable SCCDA home purchase price limit.

I am purchasing a home in Scott County, Minnesota.

My loan is fully-amortizing and a fixed-rate.

I will contribute a minimum of \$1000 of my own money to this transaction.

Buyer Certification

Applicant Signature:	Date:
Co-Applicant Signature:	Date:
Lender Certification	
To the best of my knowledge, this homebuyer meets al	l Scott County Community Development Agency (SCCDA) grant
eligibility criteria.	
Lender Name, Lender Company:	
Lender Signature:	Date:
Authorization to Release Information	
SCCDA, its employees, agents, or assigns (hereinafter	local agency, organization, business, or individual to release to collectively referred to as SCCDA) to release/exchange any my participation in SCCDA's Homebuyers Club Grant program. I ration.
Applicant Signature:	Date:
Co-Applicant Signature:	Date:

By signing below, I certify that I meet all Scott County Community Development Agency (SCCDA) grant eligibility criteria.