70 West Hedding Street, 7<sup>th</sup> Floor San Jose, California 95110 (408) 299-5765 FAX (408) 299-6709



## Santa Clara County SCC40K Downpayment Assistance Loan Program

### **Checklist Form**

Applicants Last Name

Estimated Close of Escrow

#### <u>Submit the Following at least 30 Business Days Prior to Close of Escrow:</u>

1. Signed Sales Agreement/ Real Estate Purchase Contract

2. Preliminary Title Report of Property being purchased.

3. Three months of paycheck stubs, evidence of regular overtime and/or bonuses, child support and/or alimony payments, and any other miscellaneous income documentation, etc. (All documentation must be dated within six months prior to loan closing) Note: County staff may request additional income documentation or clarification, as needed.

- 4. SCC40K Loan Application; signed and notarized.
- 5. HOME Agreement by and between The County of Santa Clara and the applicant; signed.

6. Pre-Purchase Homebuyer Education Course-Certificate of Completion

7. Certified Uniform Residential Property Appraisal Report

8. Fannie Mae/Freddie Mac 1003 Loan Application (typed and signed)

9. Fannie Mae/Freddie Mac 1008/1077, Underwriting/Transmittal Summa	riting/Transmittal Summary
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10. Completed/Signed W-9 taxpayer ID Form for borrower. (Complete this form with the property address the borrower is purchasing, not their current address.)

	11. Three (3) years most recent filed federal tax returns to determine that the applicant(s) qualifies as a
irs	st-time homebuyer.

12. If client is a Section 8 Program Participant, evidence of Program Participation.

#### County of Santa Clara SCC40K Loan Application

This section must be signed by the Loan Officer and the Applicants. Applicant(s) signatures must be notarized.

Check and Complete:				
SCC40K Loan (\$40,000)         Brea            Other Amount \$	kdown of Funds: \$_	, § Down Pmt	S, \$ Closing Costs	Buy Down
		Sales Price 1st Loan A	\$ mount \$	
Applicant and	<b>Property Infor</b>	<u>mation</u>		
1. Applicant(s) Name(s) (to be shown on Deed of T	rust)			
2. Address to be purchased:				
3. Borrower(s) Current Annual Household Income o	ver coming 12 mont	hs		
3. Number of Persons in Borrower Household	_·			
<ul> <li>4. Household Type: Check:</li> <li>Single, non-elderly,</li> <li>Elderly,</li> <li>Single parent,</li> <li>Two parents;</li> <li>Other</li> </ul>				
<ul> <li>5. Borrower Ethnicity: (for head of household only)</li> <li>White or Caucasian,</li> <li>Black or African American,</li> <li>Asian,</li> <li>American Indian or Alaskan Native,</li> <li>Native Hawaiian or Pacific Islander,</li> <li>American Indian or Alaskan Native &amp; W</li> <li>Black or African American &amp; White</li> <li>American Indian or Alaskan Native &amp; Black</li> <li>Other Multi Racial</li> </ul>		ın		
6. Is Borrower currently receiving Section 8 Housing	Voucher Assistance	? Yes	NO	
7. Census Tract # of Property to be purchased:				
8. Is Property located in an <u>unincorporated</u> pocket of	of the County? Yes	NO		

9.	The Property is a:
	<ul> <li>Condominium,</li> <li>Townhome,</li> <li>Single family attached,</li> <li>Single family detached, or</li> <li>Other</li> </ul>
10.	Property contains how manybedrooms and bathrooms?
11.	The Property is:
	<ul> <li>New construction or</li> <li>Previously occupied (existing/resale)</li> </ul>
12.	Borrower Current Address
13.	Borrower(s) Phone and email:
14.	Borrower(s) Own Funds/Downpayment:

Continue to Page 4

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# **FINANCING INFORMATION**

<u>1st Loan Information:</u>	
Name of Funding Lender	
Loan Amount	
Initial Interest Rate	Min. Monthly Payment (PITI) \$
2nd Loan Information:	
Name of Lender	
Loan Amount	
Initial Interest Rate:	Min. Monthly Payment (PITI) \$
<u>3rd Loan Information: (if ap</u>	<u>plicable)</u>
Name of Lender/Source	
Loan Amount	
Initial Interest Rate	Min. Monthly Payment (PITI) \$
4th Loan Information: (if app	<u>plicable)</u>
Name of Lender/Source	
Loan Amount:	
Initial Interest Rate:	Min. Monthly Payment (PITI) \$
<u>5th Loan Information: (if app</u>	<u>plicable)</u>
Name of Lender/Source	
Loan Amount:	
Initial Interest Rate:	Min. Monthly Payment (PITI) \$
TOTAL Financing Excluding	County Loan:

#### **Additional Housing Expenses**

# (Do not leave any question blank! If the item is not applicable write "n/a.") All Amounts should be calculated as Monthly Payments:

1. Monthly Real Estate Taxes.
2. Monthly Homeowners/ Association Dues.
3. Monthly Hazard Insurance Premium.
4. Monthly Mortgage Insurance Premium.
5. Other (describe).
6. Other Revolving Debt.
7. Monthly Car Payment.
Sub-Total of Additional Housing Expenses: \$

<b>Fotal of <u>All</u> Monthly Housing Expenses:</b>	\$_	
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#### **First-time Homebuyer Certification**

I (We) understand that I (we) am (are) not eligible for an MCC from the County, under this program, if I (we) individually or together had an ownership interest in a principal residence within three years prior to \_\_\_\_\_\_ (date initial request for application was signed). I (We) also understand that I (we) cannot have an ownership interest in a principal residence between the date of application and closing. For this purpose, a principal residence includes a single-family residence, condominium, share in a housing cooperative, any manufactured home or mobile home (as defined under federal and state law), or

occupancy in a multifamily residence owned by me (us).

For this purpose, an ownership interest means ownership by any means, whether outright or partial, including property subject to mortgage or other security interest. An ownership interest also means a fee simple ownership interest, a joint ownership interest by joint tenancy in common, or tenant by the entirety, or a life estate interest. I (We) certify that I (we) have listed below all places of residence, whether owned or not, for a three-year period prior to \_\_\_\_\_\_ (date initial request for application was signed).

#### **Owner Occupied Certification**

I (We) understand that the property to be purchase with HOME and/or ADDI assistance will be used as our primary residence and not as a rental property. I (We) understand that I (We) must take ownership of the property within 36 months of signing the purchase agreement, or within 42 months of completion of the project.

Signature of Borrower #1

Signature of Borrower #3

Signature of Borrower #2

#### Lender or Brokers Certification

The undersigned has read the SCC40K Down Payment Assistance Program Manual provided by the County in its entirety and is submitting an application for a loan based on his/her understanding that the applicant(s) qualify for the SCC40K Program. The undersigned also hereby certifies that to the best of his/her knowledge and belief, each of the foregoing statements is true and correct and each of them is consistent with the information submitted by the applicant in connection with his/her application for a loan from all lenders in connection with this loan for the subject property. The undersigned certifies that no material misstatements appear in this loan application. The undersigned certifies that the Applicant(s) to the best of his/her knowledge qualifies as a first-time homebuyer under the Federal definition of a first-time homebuyer. The undersigned understands that each of these certifications is made under penalty of perjury and may be prosecuted to the fullest extent of the law.

#### Signature of Lender/ Broker

Dated

#### **Lender Broker Contact Information**

Printed Name of Lender/ Broker	

Company Name: \_\_\_\_\_\_

Company Address:	
Company Address.	

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### **Continue to Page 7 for Applicants Certifications**

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### Applicant(s) Certification: (Must be signed in the presence of a Notary Public)

The undersigned hereby certified that to the best of his/her knowledge and belief each of the foregoing statements is true and correct and each of them is consistent with the information submitted by the applicant in connection with his/her application for a loan from all lenders in connection with this loan for the subject property. The undersigned understands that these certifications are made under penalties of perjury and may be prosecuted to the fullest extent of the law.

Signature of Applicant	Social Security #	Date
Signature of Applicant	Social Security #	Date
<u>Certificate of Acknowledgement</u>	<u>t</u>	
STATE OF CALIFORNIA COUNTY OF SANTA CLARA	} SS	
On before me	·,	, a Notary Public, personally appeared
who proved to me on the basis of	satisfactory avidance to be t	he person(s) whose name(s) is/are

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signatures(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature	
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(Seal)

Name:

(typed or printed)