Resale Application

Development: _____

Maximum Income Limits:

1 Person - $ 2 Person - $
3 Person - $ 4 Person - $
5 Person - $ 6 Person

Households cannot have more than $75,000 in assets.

Applicant General Information

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Telephone Number ( ) _____

Work Telephone Number ( ) _____

Number of persons in household _____

Email address: _____ Date: _____

Household Information

Please list ALL household members, regardless of age, who will occupy the affordable home:

Name	Date of Birth	Relationship

Is there a Real Estate Agent representing in this transaction? YES NO
If YES, provide full contact information, including email address and phone number:_____

_____

First-Time Homebuyers
Have you owned a home or joint interest in a home in the past three years from the date of this application? YES NO

If YES, please explain:

_____

_____

Optional Section: Please check off the appropriate race category for each household member. This information will be used only in accordance with New England Fund guidelines to ensure affirmative marketing requirements.

	Head of Household	Co-Applicant	Dependent(s)
Native American/Alaskan Native			
Asian/Pacific Islander			
African American			
Hispanic/Latino			
Cape Verdean			
White/Non-Minority			
Other			

Employment Status

Applicant's Name: _____
Occupation: _____
Present Employer
Contact Information: _____
_____
_____
_____

Date of Hire: _____
Name & Title of Supervisor: _____
Annual Gross Salary: _____

Co-Applicant's Name: _____
Occupation: _____
Present Employer
Contact Information: _____
_____
_____
_____

Date of Hire: _____
Name & Title of Supervisor: _____
Annual Gross Salary: _____

If other adult household members are employed, please attach a separate sheet with their current employment information.

Income Information

Please complete the following information for all persons receiving income in the household at the time of applicant. Household income includes gross wages, retirement income (if drawing on it for income), business income, veteran s benefits, alimony/child support, unemployment compensation, social security, pension/disability income, supplemental second income and dividend income.

In addition to completing the following, please attach all income documentation including:

- Five most recent pay stubs
- Social security statements (if applies)
- Pension documentation
- Entire Federal Tax Returns for the last 3 years
- W2s for all household member for the most recent year
- Last 3 month bank or asset statements[i]

Applicant

Salary: $_____
Interest & Dividends $_____
Alimony/Child Support $_____
Other Income & Source $_____
TOTAL INCOME: $_____

Co-Applicant

Salary: $_____
Interest & Dividends $_____
Alimony/Child Support $_____
Other Income & Source $_____
TOTAL INCOME: $_____

If there are other adult household members who are earning income, please attach a separate sheet with their current income information.

Asset Information

Please complete the following Asset Information for all household members. Assets include liquid assets, such as cash in checking or savings accounts, stocks, bonds and other forms of capital investments, excluding equity accounts in homeownership programs or state assisted public housing escrow accounts.

In addition to completing the following, **please attach all asset documentation such as bank statements, brokerage statements, etc.**

Applicant

Name on Account: _____
Bank Name: _____
Bank Address: _____
Savings Acct#/Amount: _____
Balance: _____
Checking Acct#/Amount: _____
Balance: _____
Other Accounts: _____
_____

Gift amounts to be
received for down payment: $_____

Source: _____

Co-Applicant

Name on Account: _____
Bank Name: _____
Bank Address: _____
Savings Acct#/Amount: _____
Balance: _____
Checking Acct#/Amount: _____
Balance: _____
Other Accounts: _____
_____

Gift amounts to be
received for down payment: $_____

Source: _____

If there are other adult household members who have assets, please attach a separate sheet with their current asset information.

Applicant Signature Co-Applicant Signature Date

Disclosure Form

Development:_____

Please check and fill in the following items that apply to you

1. I/We certify that our household size is _____ (# of) persons.
2. I/We certify that our annual household income is _____. Income from all family members has been included.
3. I/We certify that my/our total liquid assets do not exceed ($75,000)the asset limit.
4. I/We have not individually or jointly owned a single family home, condominium, or co-op as a principal residency within the past three years, unless I/we qualify for the exception for displaced homemakers.
5. The household size listed on the application form includes only and all the people who will be living in the residence.
6. I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that perjury will result in dis-qualification from further consideration.
7. I/We understand that by submitting this application it does not guarantee that I/we will be able to purchase this property. I/We understand that all application data will be verified and additional financial information will be required and reviewed in detail prior to purchasing the unit.

)

8. I/We understand that it is my/our obligation to secure the necessary mortgage for the purchase of the home and that all expenses, including closing costs and down payments, are my/our responsibility.
9. I/We further authorize CHAPA to verify any and all income and assets and other financial information, to verify any and all household, resident location and workplace information. I/we direct any employer, landlord or financial institution to release any information to CHAPA, as the project s monitoring agency, for the purpose of determining income eligibility for Development.
10. I/We have completed an application and have reviewed and understand the process that will be used to sell the available affordable homes at Development.

Applicant Signature Date

Co-Applicant Signature Date

Deed Rider Signature of Understanding

Development: _____-

Deed Rider

Affordability and Resale Restrictions

I/We have read the resale restrictions for _____and agree to the restrictions. I/We also understand that, if selected to purchase this unit, a full copy of the Deed Rider will be provided or I can obtain a copy a the registry of deeds.

_____

Applicant Date

_____

Co-Applicant Date

_____

Attachments: Complete Application Checklist
Disclosure Form
Deed Rider
Deed Rider Signature of Understanding

Application Checklist

Your application is not considered COMPLETE without the following documents. Incomplete applications will not be reviewed.

Completed and signed application

All income documentation including 5 most recent pay stubs, entire federal tax returns- for the last three (3) years, W2s from the most recent year, and any additional income documentation (such as social security or pension income)

Last three months of all asset information including checking and savings account bank statements, evidence of the value of CDs, brokerage statements, etc.

A bank pre-approval letter indicating your household qualifies for a mortgage sufficient enough to purchase a home at this development

Signed Disclosure Form

Signed Signature of Understanding for the Deed Rider

Proof of student status for dependent household members over age of 18 and full-time students.

Please submit complete applications to:

Attention: Mary DiDomenico
ERA Key Realty
16 E Main
Milford, MA 01757
508-478-7777 - Cell 508-395-0463

Incomplete Applications WILL NOT BE PROCESSED and the next received application will be processed. All documents must be mailed to the address above.