

## Home Buyer Program Application

Please complete this application with the information for all household members that intend to occupy the residence in the next 12 months. All adult household members must disclose their personal information, including income and asset sources, as well as sign and date all applicable documents and forms even if they are not going to be on the loan or listed as owners of the.

### A. Household, Application, & Drawing Confirmation

1. What is your household's Application ID Number? \_\_\_\_\_
2. Which Opportunity Drawing ID are you applying for? Drawing Index # \_\_\_\_\_
3. What is the property Address you are applying for? \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
4. Please list all household members that intend to occupy the residence you are trying to purchase (including yourself).

4A. Print Full Name	4B. Relationship to the Primary Applicant (spouse, son, daughter, etc.)	4C. Birth Date	4D. Total Gross Annual Income	4E. Is this person a current household member?
Applicant 1:	SELF (Primary Applicant)		\$	yes
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	
			Total: \$ _____	

5. TOTAL GROSS ANNUAL HOUSEHOLD INCOME \$ \_\_\_\_\_  
Include: All gross (before taxes and deductions) wages, self-employment, social security benefits, child support, alimony, unemployment benefits, sales, gifts, cash jobs, etc. received by all people living in the household
6. TOTAL HOUSEHOLD SIZE \_\_\_\_\_  
Include every person that is part of your household and will be living in the home you want to purchase including yourself.
7. TOTAL HOUSEHOLD'S ASSETS \$ \_\_\_\_\_ please don't leave blank  
Include all the following: checking, savings, 401k, retirement, pension, CalPERS, gifts, cash, stock, investments, all other types, etc.
8. Do you expect **any changes to your household income** in the next 12 months?    **8A.**  **NO**
- 8B.**  **YES** – If yes, please describe: \_\_\_\_\_

9. Do you expect **any changes to your household size** in the next 12 months?

9A.  NO

9B.  YES - if yes, please describe: \_\_\_\_\_

**Please list the applicants and co-applicants that will be listed as owners on title of the home:**

**Applicant 1**

10A. Applicants Full Name \_\_\_\_\_ 10B. Occupation \_\_\_\_\_

10C. Date of Birth \_\_\_\_\_ 10D. Marital Status \_\_\_\_\_

10E. Applicant's Phone \_\_\_\_\_ 10F. Applicant's Work number \_\_\_\_\_

10G. Applicant Email: \_\_\_\_\_ Re-enter Email: \_\_\_\_\_

10H. Physical Address \_\_\_\_\_ 10I. City \_\_\_\_\_ 10J. State \_\_\_\_\_ 10K. Zip \_\_\_\_\_

**Applicant 2**

11A. Applicants Full Name \_\_\_\_\_ 11B. Occupation \_\_\_\_\_

11C. Date of Birth \_\_\_\_\_ 11D. Marital Status \_\_\_\_\_

11E. Applicant's Phone \_\_\_\_\_ 11F. Applicant's Work number \_\_\_\_\_

11G. Applicant Email: \_\_\_\_\_ Re-enter Email: \_\_\_\_\_

11H. Physical Address \_\_\_\_\_ 11I. City \_\_\_\_\_ 11J. State \_\_\_\_\_ 11K. Zip \_\_\_\_\_

**Applicant 3**

12A. Applicants Full Name \_\_\_\_\_ 12B. Occupation \_\_\_\_\_

12C. Date of Birth \_\_\_\_\_ 12D. Marital Status \_\_\_\_\_

12E. Applicant's Phone \_\_\_\_\_ 12F. Applicant's Work number \_\_\_\_\_

12G. Applicant Email: \_\_\_\_\_ Re-enter Email: \_\_\_\_\_

12H. Physical Address \_\_\_\_\_ 12I. City \_\_\_\_\_ 12J. State \_\_\_\_\_ 12K. Zip \_\_\_\_\_

**Applicant 4**

13A. Applicants Full Name \_\_\_\_\_ 13B. Occupation \_\_\_\_\_

13C. Date of Birth \_\_\_\_\_ 13D. Marital Status \_\_\_\_\_

13E. Applicant's Phone \_\_\_\_\_ 13F. Applicant's Work number \_\_\_\_\_

13G. Applicant Email: \_\_\_\_\_ Re-enter Email: \_\_\_\_\_

13H. Physical Address \_\_\_\_\_ 13I. City \_\_\_\_\_ 13J. State \_\_\_\_\_ 13K. Zip \_\_\_\_\_

**Please answer the following questions:**

14. Do all the applicants that will be listed as owners have a First Time Home Buyer Certificate issued by a HUD-Approved Agency?

14A.  YES 14B.  NO – If not, List the date you registered to complete the class here: \_\_\_\_\_

15. How much rent do you pay per month? \$ \_\_\_\_\_

16. Does your rent amount include any utilities? 16A.  No 16B.  YES, these: \_\_\_\_\_

17. Do you or any member of your household **currently own** a home 17A.  NO

17B.  YES - If yes, please provide the name(s) of the owner(s) & full address of the home:  
\_\_\_\_\_

18. Have you or any member of your household **owned a home** or real estate in the last three (3) years? 18A.  NO

18B.  YES - If yes, please provide the name(s) of the owner(s) & full address of the home:  
\_\_\_\_\_

19. Do you and all the household members listed on this application intend to occupy the home as your primary residence?

19A.  YES    19B.  NO

20. In the last 4 years, has anyone in your household sold, had a short sale, or had a foreclosure of a home? (Check one) 20A.  NO

20B.  YES - If yes, please provide the name(s) of the owner(s), date of the sale/short sale/foreclosure, and property address:

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**Please answer the following questions:**

21. Do you, your spouse, **OR** anyone in your household have any public records against you such as State or Federal Tax liens, other liens, collections, judgments, bankruptcy, etc.? 21A.  NO - I/we don't                      21B.  YES - If yes, please list all below

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22. Is anyone in your household self-employed or engaged in sales? 22A.  NO

22B.  YES - If yes, how much sales tax do you currently owe? \$ \_\_\_\_\_

23. Do you have the necessary funds available, or can you obtain them with certainty, to pay for the down payment and closing costs? Please list the amounts below that you intend to use for the down payment and closing costs:

and security deposits:

**Yes:**                      **No:**

**Please don't leave blank**

23A. Applicants' own funds: \$ \_\_\_\_\_ 23B. Additional Reserves \$ \_\_\_\_\_ 23C. Gifts (that you will receive): \$ \_\_\_\_\_

## B. Total Household Members and Total Income Affidavit

Using the spaces below, please list ALL household members, including minors, who intend to occupy the residence in the next 12 months. Please do not leave any blanks. **Where indicated, please list the Source of Income and Gross Annual Income for all income sources received by these household members. Gross Income is total income before taking out any taxes and any type of deductions.**

Example: wages, overtime, pay differential, commissions, bonuses, farming income, public assistance, social security, retirement pensions, veteran's or GI benefits, child or spousal support, unemployment, disability insurance, worker's compensation, contributions, cash gifts, rental income, sale of property, foster care, interest, dividends, royalties, scholarships, grants, trust, or **ANY** other type of income. **For the self-employment list, your approximate income; your tax forms, and your Year-to-Date Profit and Loss Statement will be examined by HouseKeys.**

Please disclose ALL SOURCES of income separately and DO NOT lump them together.

If the member does not have income, please write in a zero (\$0.00) and state that "n/a" under the source of income column.

24A. Household Member (Full Name)	24B. Birthdate	24C. Age	24D. Date Started	24E. Source of Income (list employer name, one of the sources listed above, or any other source not listed)	24F. Gross Annual Income
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
<b>24G. Total Gross Income:</b>					\$

**25.** Do you or any member of your household, have any other type of income besides what is listed and disclosed on this form? (check one) **25A.**  YES                      **25B.**  NO

## C. Past Employment/Self Employment

For all adult household members (18 years old and over), please list any jobs you left in the last 2 years.

26A. Household Member (Full Name)	26B. Company Name, Address, and Contact Information	26C. Date Started	26D. Date Ended	26E. Reason for leaving?

## D. Assets Declaration Form

Using the spaces below, please list all asset sources for all household members. Assets include, but are not limited to, checking, savings, retirement accounts (IRA, 401k), cash on hand, stocks and bonds, investment accounts, Venmo, PayPal, Apple Cash, Coinbase, Cash App, Stripe, whole life insurance, etc. NOTE: You must include assets owned by ALL the members in your household, regardless of age.

27A. Name of Financial Institution	27B. List the last 4 digits of the account	27C. Type of account (Savings, checking, 401K, CalPERS, stocks, bonds, etc.)	27D. Full Name of the Account Owner (Household member name)	27E. Current Balance (found on the most current statement)
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
<b>27 F. Total</b>				\$

**27G. List any other type of asset (land, home, mobile home, etc.)**

Type: \_\_\_\_\_ Value/Equity \$ \_\_\_\_\_

Type: \_\_\_\_\_ Value/Equity \$ \_\_\_\_\_

Type: \_\_\_\_\_ Value/Equity \$ \_\_\_\_\_

**28. Do you or any member of your household, have any other type of asset besides what is listed and disclosed on this form? (Check one) 28A.  Yes 28B.  No**



## E. Intent to Abide – Purchase Program

### INTENT TO ABIDE BY THE ADMINISTRATOR, PROGRAM PROVIDER/AGENCY’S HOUSING PROGRAM RESALE/DEED RESTRICTION AGREEMENT, COVENANTS, POLICIES, AND PROCEDURES

**This form must be signed by all adult applicants and must be submitted with your application. This summary is not intended to replace the legal documents. Please ensure to review the actual agreement and program documents. You may hire an attorney for advice if necessary.**

**All adult applicants please read, review and Initial:**

\_\_\_\_\_ **29A.** I/we have read the program’s restriction agreements and program documents (e.g., deed restriction, resale restriction, covenants and restrictions, excess sales proceeds, program notes, deeds of trusts, policies, and/or procedures. If selected, I/we agree to abide by the terms and conditions found on the agreements and the program documents for the full term.

\_\_\_\_\_ **29B.** I/we understand that the agreement establishes a formula that determines how the home’s resale price will be calculated. The program may limit my/our ability to refinance my/our first mortgage loan(s) and borrow /access an equity line of credit against the home.

\_\_\_\_\_ **29C.** I/we understand that we, the owners listed on the title of the home must occupy it as our principal place of residence. The program may limit the ability to rent the home.

\_\_\_\_\_ **29D.** I/we understand that in the event of a resale, the subsequent owners must meet certain criteria, and must be pre-approved for purchase by the program provider/agency/administrator as stipulated on the program documents and agreements.

\_\_\_\_\_ **29E.** I/we understand that the program agreements and the program documents also grant the program provider/agency/administrator the first option to purchase the program unit (hone) at the time of resale and/or to assign this option to an eligible buyer.

\_\_\_\_\_ **29F.** I/we understand that the program agreements in their entire form as well as the program policies and procedures, current and subsequent updates/revisions, will govern the restricted home for the term of the Resale Restriction Agreement.

\_\_\_\_\_ **29G.** The financial information and other information provided by me/us is/are true and correct.

\_\_\_\_\_ **29H.** If selected, I/we will occupy the property as my/our primary residence. No persons or entities will be on title to the property other than those listed on Resale Restriction at the time of purchase.

\_\_\_\_\_ **29I.** If selected, I/we understand that junior loans or equity lines of credit are not permitted, except as expressly approved by the program provider/agency/administrator in writing and if certain criteria are met.

\_\_\_\_\_ **29J.** If selected, I/we understand that using the home for any type of collateral is a violation of the agreement and will trigger a default notice.

\_\_\_\_\_ **29K.** For property improvements, I/we must obtain approval from the program provider, agency, or administrator before the improvements are made.

\_\_\_\_\_ **29L.** I/We authorize the release of any information in possession by the program provider, agency, and/or administrator and its various departments to HouseKeys.

\_\_\_\_\_ **29M.** I/We understand that the program provider/agency/administrator will review our application file to determine if eligible for the program.

**I/We understand and agree with the information provided. (Applicants that will be listed as owners)**

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

## F. Certification and Authorization

- I/we certify under penalty of perjury that all the information stated on this application and all the supporting documents are true, accurate, and complete.
- I/we also certify that I/we haven't made any misrepresentations, nor did I/we omit any pertinent information.
- I/we also certify that if any conflicting, inaccurate, or false information is found, this application will be deemed ineligible and my/our household will not be able to participate in the program.
- I/we are aware that there are penalties for willfully and knowingly giving false information. I understand that the information in my application file is subject to verification at any point in time. Penalties for falsifying information may include and are not limited to repayment of any down payment assistance (if any), repayment of excess sales proceeds, fines, prosecution under the law, and/or other penalties as applicable.
- I/we understand the following: All material alterations, and/or omissions including but not limited to household size, income, asset information, etc., are not permissible and will render all future re-submissions ineligible for review and approval for a period of one year. Exceptions for re-submissions are significant life events such as a job/career change, marriage, death, or the birth of a child and are at the discretion of the Administrator.
- I/we authorize HouseKeys to verify, share and release my/our information (as required in connection with the program) with the program providers (e.g., City, County, etc.), lenders, title companies, funders, and agencies.

### Everyone 18 years and older must sign below:

Applicant 1: Print Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant 2: Print Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant 3: Print Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant 4: Print Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant 5: Print Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant 6: Print Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_