# CITY OF HUNTINGTON BEACH AFFORDABLE HOUSING HOME OWNER APPLICATION



- ALL DOCUMENTS IN THIS PACKET MUST INCLUDE ORIGINAL SIGNATURES ON CITY DOCUMENTS. ELECTRONIC SIGNATURES ARE NOT ACCEPTED.
- PLEASE ALLOW UP TO <u>10 BUSINESS DAYS UPON SUBMISSION</u> <u>OF COMPLETE PACKAGE</u> FOR REVIEW.
- UPDATED APPLICATION AS OF JULY 2019.

### HOME OWNER APPLICATION

### **HOME OWNER APPLICATION INSTRUCTIONS**

| 1.  | Fill out the application completely for all adults and children who are anticipated to live in the home. Unrelated applicants must show at least one full year of joint residency.   |
|-----|--|
| 2.  | All adult household members must have at least <u>one-full year of verifiable income</u> and Federal tax payment history in the United States at the time of application. <b>Self-employed individuals</b> must provide at least <b>one continuous year of verifiable personal and business income.</b>  |
| 3.  | Gross income (before taxes and deductions) must be disclosed for all household members. Income includes any money received from any source, such as wages, interest, dividends, distributions, annuities, pensions, child support, alimony, etc.   |
| 4.  | Changes in employment may not have occurred within six months of application (such as a job change, termination, or decrease in salary).   |
| 5.  | Adult household members with no income must be a spouse or dependent of the applicant.   |
| 6.  | Separated applicants (not yet divorced) must have verifiable evidence of at least one full year of complete financial and residential separation.  |
| 7.  | Applicants with joint custody of children must verify at least 50% custody rights for a child to be considered part of the household.  |
| 8.  | Applicants may not own other residential property, including mobile home property, unless such property will be sold prior to or in conjunction with the purchase of an affordable unit.   |
| 9.  | First time homebuyers are required to pay a minimum down payment of 5% of the purchase price. Homebuyers who have owned residential property within three years are required to pay a minimum down payment of 10% of the purchase price.   |
| 10. | The City does not impose a cap on the amount of gift funds. However, gift funds are included in calculation of household assets and defined in down payment cap.   |
| 11. | The total value of liquid assets owned by an applicant cannot exceed one-half of the purchase price of the affordable home (assets do not include pension or retirement funds).  |
| 12. | Household income may not exceed the maximum income limit as stipulated for each Inclusionary Housing Program project (low, median, or moderate income).  |
| 13. | Household income cannot be less than the minimum amount required to pay the cost of owning a home. This amount is equal to twice the annual homeownership cost, which includes mortgage, insurance, taxes, maintenance, and homeowner association dues.  |
| 14. | Applicants must use conventional mortgage financing. Interest-only and stated-income loans are not allowed.  |
| 15. | Applicant households must be compatible with the size of the unit to be purchased. No more than two persons per bedroom plus one additional household person will be allowed.  |
| 16. | Applicants must certify that they will reside in the affordable unit as their primary residence annually. Each resident will be sent an Annual Certification.  |
| 17. | Applicants must have the right to permanently reside in the United States.   |
| 18. | The City of Huntington Beach reserves the right to request any documents and/or information needed to verify program eligibility. It is the applicant's responsibility to demonstrate eligibility to purchase an Inclusionary Housing Program home. Applicants unable to provide satisfactory evidence of income, assets, or other qualifying criteria will not be considered. |

This application must be completed, attached with all applicable required documents, signed by all applicants and submitted to the Housing Division. Applicants should complete this form as "Applicant" or "Co-applicant" as applicable. Co-applicant information must be provided for all adult household members and/or individuals to be designated on the property title. In such cases, Co-Applicant income and credit history will be used as a basis for eligibility qualification.

| 1. PROPERTY INFORMATION                         |                        |                    |                              |                            |                            |                            |
|---|------------------------|--------------------|------------------------------|----------------------------|----------------------------|----------------------------|
| Address of Property to be Purchased             |                        |                    | Project / Neighborhood Name  |                            |                            |                            |
|   |                        |                    |                              |                            |                            |                            |
| 2.  | APPLICANT / HOUSEHOL   | .D INFORM <i>A</i> | ATION                        |                            |                            |                            |
| Nam   | e of Applicant         |                    |                              | Name of                    | Co-Applicant               |                            |
|   |                        |                    |                              |                            |                            |                            |
| Marit   | al Status              | Date of Birth      |                              | Marital Status             |                            | Date of Birth              |
|   |                        |                    |                              |                            |                            |                            |
| Socia   | al Security #          | Driver Licens      | e #                          | Social S                   | ecurity #                  | Driver License #           |
|   |                        |                    |                              |                            |                            |                            |
| Empl  | oyment Status          | # Years at Cu      | rrent Address                | Employr                    | nent Status                | # Years at Current Address |
|   |                        |                    |                              |                            |                            |                            |
| Curre   | ent Address            | Own Rent           |                              | Current Address            |                            | Own Rent                   |
|   |                        |                    |                              |                            |                            |                            |
| Llom  | e / Work / Cell Phone  | Email Addres       |                              | Llome /                    | Work / Cell Phone          | Email Address              |
| ПОПП  | e / Work / Cell Frione | Linali Address     |                              | Hollie /                   | Work / Cell Frione         | Email Address              |
|   |                        |                    |                              |                            |                            |                            |
|   | If re                  | esiding at curre   |                              |                            | ars, complete the followin | ng:                        |
| Prior   | Address                |                    | Own Rent                     | Prior Address              |                            | Own Rent                   |
|   |                        |                    |                              |                            |                            |                            |
|   | List all additional    | l adults and ch    | ildren anticipated to li     | ve in the                  | nome. Use additional page  | es if necessary.           |
| Name  |                        | Date of Birth      |                              | Social Security #          |                            | Relationship to Applicant  |
| 1 Current Address (if different then            |                        | F (1)              |                              | Employment Status (if a di |                            | .14\                       |
| Current Address (if different than applicant's) |                        |                    | Employment Status (if adult) |                            | uit)                       |                            |
| Name  |                        | Date of Birth      |                              | Social Security #          |                            | Relationship to Applicant  |
| 2   |                        |                    |                              |                            |                            | 14\                        |
| Current Address (if different than applicant's) |                        |                    | Employment Status (if adult) |                            | uit)                       |                            |
|   |                        |                    |                              |                            |                            |                            |

|                             | Name   |  | Date of Birth                              |               | Social Security #                                |                | Relationship to Applicant        |  |  |
|-----------------------------|--|--|--|---------------|--|----------------|----------------------------------|--|--|
| 3                           | Current Address (if differ   | erent than applicant's)                            |  |               | Employment Status (if adult)                     |                |                                  |  |  |
|                             |  | , , , , , , , , , , , , , , , , , , ,              |  |               | , ,  | ,              |                                  |  |  |
|                             | Name   |  | Date of Birth                              |               | Social Security #                                |                | Relationship to Applicant        |  |  |
| 4                           | Current Address (if differ   | ent than annlicant's)                              |  |               | Employment Star                                  | tue (if adult) |                                  |  |  |
|                             | Current Address (il dillel   | ent than applicants)                               |  |               | Linployment Sta                                  | ius (ii auuii) |                                  |  |  |
|                             | List full names of all persons that will appear on the title of the home:              |  |  |               |  |                |                                  |  |  |
|                             |  | Name   |  |               |  | Relation       | ship                             |  |  |
| 1                           |  |  |  |               |  |                |                                  |  |  |
| 2                           |  |  |  |               |  |                |                                  |  |  |
| 3.                          | HOUSEHOLD INCO   | ME   |  |               |  |                |                                  |  |  |
| List <b>g</b>               | gross monthly income (b  | efore taxes and deduct<br>y regularly received fro | tions) from all sourc<br>m any source. Use | ces for all a | adult household member<br>al pages if necessary. | rs expected to | o live in the home. Consider the |  |  |
|                             |  | Name   |  | Name          |  | Nan            | ne                               |  |  |
|                             |  |  |  |               |  |                |                                  |  |  |
|                             | loyer Name   |  |  |               |  |                |                                  |  |  |
| Addr<br>Phor                |  |  |  |               |  |                |                                  |  |  |
|                             |  |  |  |               |  |                |                                  |  |  |
| Position / Title            |  |  |  |               |  |                |                                  |  |  |
| Number of Years at this Job |  |  |  |               |  |                |                                  |  |  |
| Base                        | Employment Income  |  |  |               |  |                |                                  |  |  |
|                             | time / Bonuses /<br>missions   |  |  |               |  |                |                                  |  |  |
|                             | lends / Interest from<br>stments   |  |  |               |  |                |                                  |  |  |
| Pension / Social Security   |  |  |  |               |  |                |                                  |  |  |
| Child Support / Alimony     |  |  |  |               |  |                |                                  |  |  |
| Othe                        | Other (please describe)  |  |  |               |  |                |                                  |  |  |
| Total                       | Total Monthly Income (add the Monthly Income Subtotal for all adult household members) |  |  |               |  |                |                                  |  |  |
| Total                       | Total Annual Household Income (Total Monthly Income x 12)                              |  |  |               |  |                |                                  |  |  |

| Minimum Monthly Income Calculation                         |                       | Maximum Income (2019 Income Limits) |   |                        |                        |  |
|--|-----------------------|-------------------------------------|---|------------------------|------------------------|--|
| Add the following monthly Housing mortgage lender/broker): | Household Incor       | -                                   | -   | ow for the appropriate |                        |  |
| Mortgage Payment   |                       |                                     | Low   | Median                 | Moderate               |  |
| Property Tax Payment (1.08%                                | b)                    | Household<br>Size                   | Income<br>Limit   | Income<br>Limit        | Income<br>Limit        |  |
| Homeowner Association Dues                                 |                       | <u> </u>                            | \$66,500  | \$68,550               | \$82,250               |  |
| Other Housing Costs  |                       | 2                                   | \$76,500  | \$78,300               | \$94,000               |  |
| (insurance, maintenance, utili                             | ties)                 | 3                                   | \$85,500  | \$88,100               | \$105,750              |  |
| TOTAL  |                       | 4<br>5                              | \$94,950<br>\$102,500   | \$97,900<br>\$105,750  | \$117,500<br>\$126,900 |  |
| (Total monthly housing costs cannot                        | 3                     | ψ102,300                            | Ψ103,730  | Ψ120,300               |                        |  |
| 4. HOUSEHOLD ASSETS  |                       |                                     |   |                        |                        |  |
|  |                       | •                                   | all adult household members. Use Addition pages if necessary. |                        |                        |  |
| Name and Address of Bank, S&L,                             | Credit Union, Other   | Name and Addre                      | ess of Bank, S&L,   | Credit Union           | n, Other               |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Account #  | Account Type          | Account #                           |   | Accoun                 | nt Type                |  |
|  |                       |                                     |   |                        |                        |  |
| Name(s) on Account   | Balance               | Name(s) on Acc                      | count   | Balance                | <u> </u>               |  |
| (-)  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Name and Address of Bank, S&L,                             | Credit Union, Other   | Name and Addre                      | ess of Bank, S&L,   | Credit Union           | n, Other               |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Account #  | Account Type          | Account #                           |   | Accoun                 | nt Type                |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Name(s) on Account   | Balance               | Name(s) on Acc                      | ount  | Balance                | е                      |  |
|  |                       |                                     |   |                        |                        |  |
| Name and Address of Bank, S&L,                             | Credit Union, Other   | Name and Addre                      | ess of Bank, S&L,   | Credit Union           | ). Other               |  |
| rame and radiose of Bank, Saz,                             | ordan Griidii, Garidi | Traine and ridar                    | 000 01 Barm, 0a2,   | Ordan Ornon            | , 0.1101               |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Account #  | Account Type          | Account #                           |   | Accoun                 | at Type                |  |
| Account #  | Account Type          | Account #                           |   | Account                | птурс                  |  |
|  |                       |                                     |   |                        |                        |  |
| Name(s) on Account   | Balance               | Name(s) on Acc                      | ount  | Balance                | e                      |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Real Estate Owned  |                       |                                     |   |                        |                        |  |
| <u>Address</u>   | <u>Marke</u>          | et Value of Property                | Outstanding Mor   | tgages/Liens           | Owner Equity           |  |
|  |                       | )                                   | _ (   | ) =                    | = ( )                  |  |
| Cook Value of Dating                                       |                       |                                     |   |                        |                        |  |
| Cash Value of Retirement Account                           | s & Pension Funds     | Cash Value of C                     | orner Assets  |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
|  |                       |                                     |   |                        |                        |  |
| Total Value of Assets (Including Re                        | eal Estate Equity)    |                                     |   | T                      |                        |  |
| Total value of Assets (Illelucing Re                       | our Estato Equity)    |                                     |   |                        |                        |  |

| <u> </u>   |                         | support, etc. Use additi             | onal pages if necessar   | y                  | s, real estate loans, alimony, chi |  |
|--|-------------------------|--------------------------------------|--------------------------|--------------------|------------------------------------|--|
| Name and Address of Credit   | or                      | Name and Address o                   |                          | f Creditor         |                                    |  |
| Account # Monthly F  |                         | 'ayment                              | Account #                |                    | Monthly Payment                    |  |
| Name(s) on Acct.   | Unpaid Ba               | alance                               | Name(s) on Acct.         |                    | Unpaid Balance                     |  |
| Name and Address of Credite  | or                      |                                      | Name and Address o       | f Creditor         |                                    |  |
| Account #  | Monthly F               | <sup>2</sup> ayment                  | Account #                |                    | Monthly Payment                    |  |
| Name(s) on Acct.   | Unpaid Ba               | alance                               | Name(s) on Acct.         |                    | Unpaid Balance                     |  |
| Name and Address of Credit   | or                      |                                      | Name and Address o       | f Creditor         |                                    |  |
| Account #  | Monthly F               | 'ayment                              | Account #                |                    | Monthly Payment                    |  |
| Name(s) on Acct.   | Unpaid Ba               | alance                               | Name(s) on Acct.         |                    | Unpaid Balance                     |  |
| Tota   | Il Balance of Liabiliti | es (add the Unpaid Bala              | nces of all Liabilities) |                    |                                    |  |
| 6. PURCHASE INFOI  | RMATION                 |                                      |                          |                    |                                    |  |
| Name of Real Estate Agent  |                         | Agent's Company Name & Address       |                          | Telephone & E-Mail |                                    |  |
| May the City contact to ask q application? Yes No May the City contact to apprastatus? Yes No                                  |                         |                                      |                          |                    |                                    |  |
| Name of Mortgage Lender/Broker Agent   |                         | Lender/Broker Company Name & Address |                          | Telephone          | & E-Mail                           |  |
| May the City contact to ask questions about application? Yes No May the City contact to appraise of application status? Yes No |                         |                                      |                          |                    |                                    |  |
| TOTAL Purchase Price of Prassociated costs) \$_  |                         | Mortgage Amount(s)                   |                          | Mortgage T         | erms                               |  |
| Initials (see note below)  |                         | 1 <sup>st</sup> :                    |                          |                    |                                    |  |
|  |                         | 2 <sup>nd</sup> :                    |                          |                    |                                    |  |

| "Note: All adult household members must initial next to the Total Purchase Price of Property above, acknowledging that the price of the property is restricted under the City of Huntington Beach Affordable Housing Program. By initialing this price, you indicate your understanding and agreement that no payment will be made separate from this price and/or separate from the attached Residential Purchase Agreement by you or by anyone on your behalf. |   |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| 7. SOURCES OF F  | 7. SOURCES OF FUNDS FOR DOWN PAYMENT & CLOSING COSTS                    |  |  |  |  |  |  |
| List all funds intended to be used from bank accounts, Certificates of Deposit, mutual funds, and other sources for meeting down payment and closing costs needs:  |   |  |  |  |  |  |  |
| Source of Funds  | Source of Funds  Amount to be Used for Down Payment                     |  |  |  |  |  |  |
| 1  |   |  |  |  |  |  |  |
| 2  |   |  |  |  |  |  |  |
| 3  |   |  |  |  |  |  |  |
| 8. ADDITIONAL INFORMATION  |   |  |  |  |  |  |  |
| Does any household member have any ownership interest in Real Estate?  |   |  |  |  |  |  |  |
| Will the Inclusionary Housi  | Will the Inclusionary Housing Program Unit be your permanent residence? |  |  |  |  |  |  |
| Do all household members have the right to permanently reside in the US?   |   |  |  |  |  |  |  |
| Have any household mem   | Have any household members terminated employment in past 4 months?      |  |  |  |  |  |  |
| 9. REQUIRED DOCUMENTS – SEE ATTACHED CHECKLIST   |   |  |  |  |  |  |  |

CERTIFICATION: I/We certify that the information provided in this Inclusionary Housing Program Eligibility Application is true and correct as of the date set forth opposite my/our signature(s) and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to fine or imprisonment or both and liability for monetary damages to the City, its agents, insurers, and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application.

| Applicant's Signature Date |  | Co-Applicant's Signature | Date |
|----------------------------|--|--------------------------|------|
| X                          |  | x                        |      |

Please Note: Before submitting your application to the City, check carefully to make sure you have neatly and completely filled out the application and attached all required documents. Illegible or incomplete applications will not be accepted. The City does not except electronic application submittals.

The City of Huntington Beach reserves the right to request any documents and/or information needed to verify program eligibility. It is the applicant's responsibility to demonstrate eligibility to purchase an Inclusionary Housing Program home. Applicants unable to provide satisfactory evidence of income, assets, or other qualifying criteria will not be considered.



#### THIS FORM MUST BE SIGNED BY ALL ADULT HOUSEHOLD MEMBERS

By signing below, you provide irrevocable consent to the City of Huntington Beach for a background investigation and review of your financial affairs, budget, outstanding accounts, obligations, and debt. You understand that information obtained by the City may be governed by the Fair Credit Reporting Act (15 USC 181 ET Seq.) as it may be amended from time to time. Credit information will be obtained for affordable housing program eligibility review purposes only, and not for credit granting purposes or credit repair. All adult household members must sign this consent, attesting that you are the true and correct individual described below. Use additional pages if necessary.

| Full Legal Name (First, Middle, Last) |                   |
|---------------------------------------|-------------------|
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Other names used in last 7 years      |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Date of Birth                         | Social Security # |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Current Address                       |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Prior addresses in last 7 years       |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Signature                             | Date              |
|                                       |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Full Legal Name (First, Middle, Last) |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Other names used in last 7 years      |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Date of Birth                         | Social Security # |
|                                       | ,                 |
|                                       |                   |
|                                       |                   |
| Current Address                       |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |
| Prior addresses in last 7 years       |                   |
| ,                                     |                   |
|                                       |                   |
|                                       |                   |
| Signature                             | Date              |
| Ŭ                                     |                   |
|                                       |                   |
|                                       |                   |
|                                       |                   |



| Appli                   | icant(s)  |   |  |  |  |  |
|-------------------------|---|---|--|--|--|--|
| Prope                   | perty Address   |   |  |  |  |  |
| The u                   | undersigned ("Applicant/Purchaser") hereby  | certify(ies) the following:   |  |  |  |  |
| 1.                      |   | e" or the "Property) shown above with the intent to ary residence, and with the understanding that the  |  |  |  |  |
| 2.                      | The purchase price of the Home is \$  |   |  |  |  |  |
| 3.                      | Purchaser's combined household <b>gross annual income</b> from all sources is   |   |  |  |  |  |
| 4.                      | . The number of persons that will occupy the  | e Home is   |  |  |  |  |
| 5.                      | . Purchaser has read the Special Disclosure form attached hereto and understands the information contained therein.                             |   |  |  |  |  |
| 6.                      | Restrictions for Property ("Resale Restrictions restrictions contained therein, including reserved Property, will remain on the Property and by | s that a Declaration of Conditions, Covenants, and ions") is recorded on the Property and that the strictions relating to the transfer and use of the be applicable to any future resale of the Property so venants, and Restrictions for Property ("Resale |  |  |  |  |
| Depa                    | chaser acknowledges that this certificate is be<br>artment of the City of Huntington Beach ("the<br>e herein.                                   | eing provided to the Economic Development e City"), and that the City may rely on the statements  |  |  |  |  |
| All pe                  | ersons taking title to the Home must sign this  | s certificate.  |  |  |  |  |
| <u>Appli</u>            | <u>icant</u>  | Co-Applicant  |  |  |  |  |
| Signa                   | ature:  | Signature:  |  |  |  |  |
| Print Name: Print Name: |   |   |  |  |  |  |
| Date:                   | e:  | Date:   |  |  |  |  |

## CITY OF HUNTINGTON BEACH AFFORDABLE HOUSING PROGRAM SPECIAL DISCLOSURE

Date:

| Applicant(s)  |   |
|---|---|
| Property Address  |   |
| for Property ("Resale Restrictions") is recorded on                     | Declaration of Conditions, Covenants, and Restrictions the Property and that the restrictions contained ty. The undersigned specifically acknowledge(s) the |
| The Property must be the only res                                       | sidence of the owner.   |
| The Property may not be rented of includes renting or leasing to family | or leased to any individual or household, this ily members of the owner.  |
| •   | operty or refinancing existing debt on the property the City. The City may establish limits on the red by the Property.                                     |
|   | will be subject to affordability restrictions, requiring dable price to an income-eligible buyer.   |
| Future maximum affordable sales and may be less than the fair mar       | prices of the property will be determined by the City ket value of the home.  |
|   | ot be amended or transferred without prior approval of the property must be income-eligible, and ordable sales price.                                       |
|   | against potential subsequent buyers based on their status, sexual orientation, national origin, or ancestry.  |
| ·   | ded in the Declaration of Conditions, Covenants, and s partially described in this Special Disclosure, into erty.   |
| All persons taking title to the Home must sign this                     | Disclosure.   |
| <u>Applicant</u>  | Co-Applicant  |
| Signature:  | Signature:  |
| Print Name:   | Print Name:   |

Date:

### Real Estate Transfer Disclosure Statement Language

The following language must be inserted exactly as written below into the Real Estate Transfer Disclosure Statement signed by both the seller and the buyer and attached to the Residential Purchase Agreement:

The Subject Property is an affordable housing unit in the City of Huntington Beach's Inclusionary Housing Program. The City of Huntington Beach has established a Maximum Price for this unit, and the Purchase Price in the Residential Purchase Agreement, does not exceed this amount. All consideration for the purchase of the Subject Property has been fully disclosed and described in the Residential Purchase Agreement, which will be submitted to the City of Huntington Beach for approval. Buyer and Seller acknowledge that there may be no agreement separate from the Residential Purchase Agreement between Buyer and Seller or any other parties related in any manner to the purchase of the Subject Property, which would include payment for personal property, upgrades to the Subject Property, gifts, or other arrangements that might circumvent the Maximum Price established by the City.



### CITY OF HUNTINGTON BEACH INCLUSIONARY HOUSING PROGRAM

|     | <b>1 3</b>        | INCLUSIONANT HOUSING PROGRAM  |
|-----|-------------------|---|
|     |                   | NEW APPLICATION CHECKLIST   |
|     |                   | The following documents must be submitted, preferably, in the following order:  |
|     | Please initial to | The renewing accuments mass se sacrimeted, preferacity, in the renewing craci-  |
| 1   | verify inclusion. | The City Application. An original signature is needed.  |
| 2   |                   | The Certificate of Purchaser. An original signature is needed.  |
| 3   |                   | The Special Disclosure. An original signature is needed.  |
|     |                   | The Background and Financial Investigation Authorization. An original signature is  |
| 4   |                   | needed.   |
| 5   |                   | Copy of California driver's license or identification for all adult household members and copy of birth certificates of all dependents.                           |
|     |                   | Copy of Residential Purchase Agreement and Real Estate Transfer Disclosure  |
|     |                   | Statement (with City-required affordable housing program disclosure language)   |
| 6   |                   | signed by both the buyer and seller.  |
|     |                   | Copy of complete loan packet from mortgage lender (stated income and interest   |
|     |                   | only loans are not allowed). The loan packet must include the fully completed,  |
| 7   |                   | typed and signed  |
|     |                   | mortgage application,   |
|     |                   | pre-qualification letter,   |
|     |                   | loan underwriting analysis,   |
|     |                   | loan estimate and   |
|     |                   | conditions of final loan approval.  |
|     |                   | Copy of 3 most recent months of checking, savings, and other investment account   |
|     |                   | statements for all adult household members. If self-employed, 12 months of  |
|     |                   | personal and business account statements are required. Account statements must  |
| 8   |                   | demonstrate sufficient funds for down payment.  |
|     |                   | Copy of 3 most recent months of pay stubs. Pay stubs must clearly identify business name, employee name, salary rate, hours worked, pay period, gross income, and |
| 9   |                   | year to date income.  |
|     |                   | Signed copies of 2 most recent years of federal tax returns (with all schedules and   |
| 4.0 |                   | attachments), including W-2s and 1099s for all adult household members; if self   |
| 10  |                   | employed, include 4 most recent quarterly tax filings   |
| 11  |                   | If applicable:  |
|     |                   | copy of divorce decress evidencing dissolution of marriage, child custody, child support and/or spousal support,  |
|     |                   | copy of pension statement, Social Security or other income verification,  |
|     |                   | school registration for adult, full-time household members  |
|     |                   | evidence of sale of real estate. Sale of any residnetila real estate must be  |
|     |                   | completed before final approval can be given for purchase on an Inclusionary  |
|     |                   | Housing Program Unit, and/or  |
|     |                   | documentation of gift funds.  |
|     |                   |   |