# Down Payment Assistance (DPA) PROGRAM APPLICATION PACKAGE

Completed by Lender



Housing Department (HD)

Austin Housing Finance Corporation (AHFC)

MAILING ADDRESS: P. O. Box 1088 ● Austin, Texas 78767

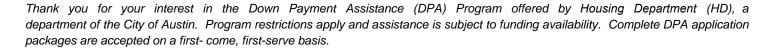
DELIVERY ADDRESS: 1000 E. 11<sup>th</sup> Street, Suite 200 Phone:

(512) 974-3100 ● Fax (512) 974-3161

Email: hpdhomeapps@austintexas.gov

Website: https://www.austintexas.gov/page/homebuyer-

education-and-assistance



Please submit DPA Prescreening and supporting documentation via:

Mail HD PO Box 1088 Austin. TX 78767-1088 In-person

Street-Jones Building 1000 E. 11<sup>th</sup> Street, Suite 200 Austin, TX 78702

**Fax** (512) 974-3161

**Email** 

hpdhomeapps@austintexas.gov

For more information call 512-974-3100 or visit <a href="https://www.austintexas.gov/page/homebuyer-education-and-assistance">https://www.austintexas.gov/page/homebuyer-education-and-assistance</a>

The City of Austin's Housing and Planning Department (HPD) is committed to compliance with the Americans with Disabilities Act (ADA and Section 504 of the Rehabilitation Act of 1973), as amended. Reasonable modifications and equal access to communications will be provided upon request. Please call 974-3100 (voice) or Relay Texas at 974-3102 or 1-800-735-2989 (TDD) for assistance. For a sign language interpreter, please call HPD at 974-3863 at least 7 days in advance.

The City of Austin's HPD does not discriminate on the basis of disability in the admission or access to or treatment or employment in their programs and activities. Dolores Gonzalez has been designated as the City's section 504/ADA Coordinator. Her office is located at 505 Barton Springs Road, Suite 600.Austin, TX 78704. If you have any questions or complaints regarding Section 504/ADA rights, please call the Section 504/ADA Coordinator at 974-3256 (Voice) or 974-2445 (TTY).

#### **PROGRAM DESCRIPTION**

#### SEE PROGRAM GUIDELINES FOR MORE IN DEPTH INFORMATION

Purpose:	The Down Payment Assistance (DPA) Program provides eligible first-time homebuyers with a 0%-interest (0% APR) loan to assist with eligible down payment and closing costs.
Submitting Applications:	Only DPA Participating Lenders listed on the City of Austin's website may submit application packages. Packages will be processed when they are 100% complete according to the Lender and Applicant Checklists. Complete application packages are accepted and processed on a first-come, first-served basis and are subject to fund availability.
Participants, Income & Assets:	Applicants must be first-time homebuyers who are citizens or legal permanent residents. Households may earn no more than 80% of the Austin Median Family Income (adjusted for household size), as published annually by the U.S. Department of Housing and Urban Development (HUD). Asset limits apply. Visit <a href="http://www.austintexas.gov/page/income-limits">http://www.austintexas.gov/page/income-limits</a> for current income limits.
	**NOTE: "The Household Size, Income and Assets" includes ALL persons (related and unrelated) residing with the applicant at the time of application and/or those who will reside with the applicant upon the purchase of the new home.
Properties:	Must be the borrower's primary residence. Single family homes, town homes or condos are eligible; duplexes are ineligible. Any new construction must meet Visitability and S.M.A.R.T. Housing™ standards. Manufactured housing must be new construction on permanent foundation and meet S.M.A.R.T. Housing™ standards. Properties must be located within the Full Purpose Jurisdiction of Austin city limits; Extra Territorial Jurisdiction are ineligible.
Financing:	First lien loan must be a fully amortized, fixed-rate loan for 30 years. Interest rate may not exceed <b>1.5</b> % above the prevailing interest rate released in the current <b>Federal Statistical Release</b> at the time the lender locks the borrower's interest rate. Annual Percentage Rate may not exceed <b>1.5</b> %. Discount point charges may not exceed <b>1.5</b> %.
Earnest Money:	All applicants must make a minimum \$500.00 Earnest Money contribution.
Sales Price:	Not to exceed 95% of area median purchase price for new or existing single family housing using data from the Federal Housing Administrations (FHA) for Austin. Please call HPD (512) 974-3100 for current applicable limits.
OTHER:	No "principal reduction" or cash back is allowed at closing.



#### PROGRAM DESCRIPTION

#### SEE PROGRAM GUIDELINES FOR MORE IN DEPTH INFORMATION

DPA Loan Options:	"Standard DPA \$14,999" Up to \$14,999.00, 0% interest (0% APR), deferred, forgivable loan, second lien position.	"Standard DPA up to \$40,000" \$15,000-\$40,000, 0% interest (0% APR), deferred, forgivable loan, second lien position. Includes a "Subordination Agreement".
DPA Loan Amounts:	A minimum of <b>\$1000</b> up to <b>\$14,999</b> of assistance for eligible closing costs, prepaid expenses, and down payment. The eligible loan amount is based on the borrower's demonstrated financial gap.	A minimum of \$15,000 up to \$40,000 of assistance for eligible closing costs, pre-paid expenses, and down payment. The eligible loan amount is based on the borrower's demonstrated financial gap. Amount may not exceed 30% of the home sales price.
Debt to Income Ratios:	Total combined debt ratio cannot exceed 48.00%	Total combined debt ratio cannot exceed 48.00%
Repayment:	The loan will be due and payable upon the sale, refinancing, home equity loan, vacating, lease or transfer of title before the 5 year maturity date. Otherwise, the loan is forgiven after 5 years.	The loan will be due and payable upon the sale, refinancing, home equity loan, vacating, lease or transfer of title before the 10 year maturity date. The loan is forgiven after 10 years.
Property Age Limit:	None. Remove lead paint beore closing.	None. Remove lead paint before closing.
Appraised Property Value:	The estimated value of the property must repurchase price, described in 24 CFR 92.25	·

Updated 10/01/2014. <u>Subject to funding availability</u>. <u>Other restrictions may apply.</u> For more information, please contact Austin Housing Finance Corporation at (512)974-3100.



#### Section 1 – Applicant Information

Name:	First	Middle Initial	
Current Address:			
City:	State:		Zip:
Mailing Address (if dif	ferent):		
City:	State:		Zip:
Work Phone:	Home Phone:	Cell P	hone:
E-mail		Ge	ender:   Male  Female
Marital Status:   Sin	ngle 🗆 Married 🗀 Widow	ved Divorced	
Are you a: ☐ U.S. Cit	izen ☐ Permanent Resident ☐	☐ Alien: Alien number A:	
☐ Other:			
Alternate Contact Nar	me, Phone Number and Email		
How did you hear abo	out the Programs?		
How did you hear abo	out the Programs?		
How did you hear abo	out the Programs?		
·		N/A	
·			
·	olicant Information		
Section 2 – Co-App  Name:  Last	olicant Information	N/A  Middle Initial	
Section 2 – Co-App  Name:  Last	olicant Information	N/A  Middle Initial	
Name:	olicant Information	<b>N/A</b> Middle Initial	ender: □ Male □ Female
Name:	Policant Information	<b>N/A</b> Middle Initial	
Name:  Work Phone:  E-mail  Marital Status:	Policant Information	Middle Initial  Middle Initial  Ge Widowed Divorced	ender: □ Male □ Female
Name:	First  Cell Phone:	Middle Initial  Middle Initial  Ge  Widowed Divorced  Alien: Alien number A:	ender: □ Male □ Female



#### Section 3 - Employment and Income History

Applicant's Employer		Occupation		
Estimated Gross Monthly Income \$	Number of Years with Employer			
Co-Applicant's Employer		Occupation		
Estimated Gross Monthly Income \$		Number of Years wit	h Employer	
Section 4 – Household Members  List all persons (children and adults) living ithat you are the owner(s) and/or occupant(s)	s) of the property (id	entified in Section 1)	and that the	e current gross monthly
and annual income of all persons living in the page(s) if needed)	he home (related an	d unrelated) have be	en listed be	low. (Attach additional
Total number of persons living in the house	ehold:			
Name	Relationship	Date of Birth	Age	Gross Income/ Pay Period
(Applicant)	Self			
(Co-Applicant)				
Ethnic Categories (select one)  Hispanic or Latino  Not-Hispanic or Latino  Racial Categories (select all that apply)  American Indian or Alaska Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White  Multi				



#### Section 5 – Property Information (completed by lender)

Last		First	Middle Initial	
Co-Applicant's Name:	<u>:</u>			
subject Froperty Addres	ss			
City		State	Zip	
Type of property:	□ Single Family home	□ Condominium	□ Town home	
□ NEW Manufactured or	n Permanent Foundation ar	nd APPROVED AS part o	of the S.M.A.R.T. Housing™ Program	
□ New Construction	□ Existing Construction	(pre-owned)	Year Built:	
Purchase Price of the P	roperty \$			
ction 6 – First Lie	en Information			
Type of loan	□ FHA □ Con	ıventional □ V	eterans Administration	
lata va at vata	O/Look Expiration Data	FIVED DATE (cr 20	years. Estimated Closing Date	
	, , , , , , , , , , , , , , , , , , ,			
_				
ction 7 – Lender a	and Title Company	Information		
	and Title Company		the closing:	
The following people ha		ation, and will assist with		
The following people ha	ive assisted with this applica	ation, and will assist with		
The following people ha  Mortgage Company  Loan Officer	eve assisted with this applica	ation, and will assist with		
The following people ha  Mortgage Company  Loan Officer  Loan Processor:	eve assisted with this applica	ation, and will assist withEmail	PhonePhone	
The following people ha  Mortgage Company  Loan Officer  Loan Processor:  Address	eve assisted with this applica	ation, and will assist withEmail Email	PhonePhone	
The following people ha  Mortgage Company  Loan Officer  Loan Processor:  Address  Title Company and/or A	eve assisted with this applica	ation, and will assist withEmailEmail	PhonePhone	
The following people ha  Mortgage Company  Loan Officer  Loan Processor:  Address  Title Company and/or A  Closing Officer	ave assisted with this application	ation, and will assist withEmail Email_	PhonePhone	
The following people ha  Mortgage Company  Loan Officer  Loan Processor:  Address  Title Company and/or A  Closing Officer  Closing Address	Attorney's Office	etion, and will assist with	PhonePhone	



#### **Section 8 – Real Estate Company Information**

Real Estate Company	
Real Estate Agent:	
Address	
Work Phone	Cell Phone
Email	
of your knowledge and belief. You und from the program(s) and also may req	der penalty of perjury that the information provided is true and correct to the beserstand that any omissions or discrepancies found at any time may disqualify you ire your immediate repayment of any funds spent. You authorize HPD or AHFC ct any source to solicit and/or verify what is necessary for an eligibility or
Signature of Applicant/Cuardian	Data
Signature of Applicant/Guardian	Date
Signature of Co-Applicant	Date

A DPA UPCS inspection has to be scheduled. Who should be contacted to schedule the DPA UPCS Inspection?:

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.



#### APPLICATION PACKAGE CHECKLIST

Down Payment Assistance (DPA)

Documents Provided by Lender



Housing Department (HD)

Austin Housing Finance Corporation (AHFC)
MAILING ADDRESS: P. O. Box 1088 ● Austin, Texas 78767
DELIVERY ADDRESS: 1000 E. 11<sup>th</sup> Street, Suite 200

Phone: (512) 974-3100 • Fax (512) 974-3161

Email: <a href="mailto:nhcdcs@austintexas.gov">nhcdcs@austintexas.gov</a>
Website: <a href="mailto:www.austintexas.gov/empower">www.austintexas.gov/empower</a>

Complete DPA application packages include all the items listed under both the "Checklist for Lenders" <u>AND</u> the "Checklist for Applicants." Only DPA Participating Lenders listed on the City of Austin's website and approved Borrowers with and Approved Lender may submit application packages. Only 100% complete DPA application packages will be accepted for



processing. Original DPA Application, Docu signed or wet signed by applicant(s) Original Affidavit, completed and signed by applicant(s)  $\Box$ Original Request for HPCS Inspection and Agreement, completed and signed by applicant(s) DPA Buyer/Seller Certification of Purchase, signed by both parties Lender's INITIAL Uniform Loan Application, signed by applicant(s) and lender  $\Box$ **Complete Credit Report**  $\Box$ Signed and dated Letter of Explanation and complete paper trail (canceled checks, lease agreement, loan repayment documents, gift documents, etc.) for all non-payroll related deposits into bank accounts **Loan Estimate** signed by applicant(s) (if applicable)  $\Box$ "As Is" Property Appraisal (all pages) including a copy of unexpired Appraiser license **Evidence of Underwriter Loan Approval (all calculations should match):** └─ 1003 Loan Application and 1008 Loan Transmittal Underwriter signed page 3 & 4 of the Final HUD-92900-A Form (if applicable) Borrower & lender signed Interest Rate Lock Agreement Borrower & lender signed Interest Rate Lock Agreement Participating Lender Agreeemnt - Loan Officer name and Company Name should match this 



application

Title Company accepted Survey
Complete copy of Preliminary Title Commitment reflecting CITY OF AUSTIN HOUSING DEPARTMENT (HD) as Second Lien Lender on Schedule A under the Other section
Complete copy of Tax certificates reflecting figures that fall in line with Principal + Interest + Taxes + Insurance (PITI) calculations on final Underwriting Documents
<b>Evidence of Hazard Insurance Coverage</b> (and flood if applicable) with the following mortgagee clause: City of Austin Housing Department or HD Attention: DPA Monitoring Department PO Box 1088 Austin TX 78767-1088
Copy of Executed/Receipted Sales Contract, signed by both parties
Proof of Earnest Money Contribution
First Lien Lender's 1003, 1008 and UW Summary with MFI, DTI, LTV, PITI, income and asset amounts
All pages of Real Estate Contract, signed by both parties
<b>Lead-based Paint Disclosure</b> , (completed) and executed by borrower(s) receipt of "Protect Your Family from Lead in Your Home" pamphlet (only for homes built before 1978); (Standard DPA only)



#### PROGRAM CHECKLIST- Down Payment Assistance (DPA)

#### **Documents Provided by Applicant**



#### Housing Department (HD)

Austin Housing Finance Corporation (AHFC) MAILING ADDRESS: P. O. Box 1088 ● Austin, Texas 78767 DELIVERY ADDRESS: 1000 E. 11th Street, Suite 200

Phone: (512) 974-3100 ● Fax (512) 974-3161

Email: nhcdcs@austintexas.gov

Website: www.	austintexas.gov/empower		
Application (original) completed & signed	d		
Social Security card(s) for applicant(s)			N/A
Permanent Residency Card(s) (front &	back) (if applicable)		N/A
<b>Picture Identification</b> for applicant(s) Texas Driver's license, Texas Permanent	ID Card, or Passport		
Last 2 consecutive months paycheck s	stubs from all household members, 18+ years old		N/A
self employed - Jan- thru last quarter's P	Profit & Loss & two years tax returns		N/A
Most Recent 2 Years W-2's and/or 1099	o's		N/A
Most Recent signed 2 Years Federal Ta	x Returns, complete with all schedules		N/A
Verification of other income (Check all that apply)		□ N//	Д
☐ Disability Award Letter ☐ We ☐ Death Benefits ☐ An ☐ Unemployment ☐ Tree	nild Support or Spousal Support/Alimony orker's Compensation and Severance Pay nuity, Retirement, or Pension Payments ust Income ther:		
All pages of most recent 6 Months Che Savings for all accounts FROM ALL hous	cking Account Statements and 1 month sehold members (related or unrelated)		N/A
☐ Money Market Account       ☐ Permitted Perm	etirement Savings (ex. IRA,401K,403B,Keogh) ension		N/A



#### **AFFIDAVIT**

considered	by submit the attached Application, Uniform Resider for the Housing and Planning's <i>Down Payment A</i> is located at:			
		_, Austin	, Texas, Zip	<u>.</u>
The informa	1. Neither I or the Co-Applicant have owned 2. I (we) am a U.S. citizen or I (we) have leg 3. The house I (we) am purchasing will be m 4. The house I (we) am purchasing is locate 5. The following is a list of all persons (reliciosing:	a home al perma y (our) p d within t	in the last three years nent resident status rimary place of residence he Full Purpose Austin city	limits
	Name	Age	Relationship	Gross Mo. Income
		U	SELF	\$
				\$
				\$
				\$
				\$
			TOTAL	\$
(wa) unda	ratand that:			
1.	second lien position. See Program Guidelines for up to \$40,000 and is in a 0% interest, deferred, for demonstrated financial gap.  The DPA loan will be due and payable upon early affordability period of 5 years for Standard DPA \$1 Households may earn no more than 80% median for DPA loans require a minimum borrower contribution DPA funds will be for: eligible closing costs and pre reflected in the final Closing Disclosure; and a down demonstrated financial gap.  The first lien mortgage loan must be a fully amortize exceed the prevailing market rates for conforming the DPA second mortgage when combined with the closing costs.	more det givable lo sale, refir 4,999, or amily inc n of \$500 e-paid ex n payme ed, fixed oans. he first ma	ailed information. "STAND, ban. The DPA loan amount nancing, home equity loan, 10 years for Standard DPA ome for Austin. 0.00 in Earnest Money. penses identified in a signent amount calculated according to the stimated ay not exceed the estimated	ARD DPA \$40,000" is from \$15,00 is based on the borrower's lease or transfer of title before the \$40,000.  d Good Faith Estimate and ding to the borrower's , with an interest rate that does not

Date



Applicant (original signature)

Date

Co-Applicant/NPS) (original signature)

#### **AFFIDAVIT (continued)**

I (we) agree to release whatever information the State Attorney General determines to be publicly available. I (we) agree to allow the City and/or its designee, financial institutions, and other appropriate institutions to share information contained in this file for the purpose of Down Payment Assistance eligibility and related business. I (we) understand that any discrepancy or omissions later found may disqualify me (us). If such a discrepancy or omission is discovered after closing, I (we) understand that any financial assistance provided by the City of Austin may immediately become due and payable.

I (we) read, completed, and executed this Affidavit in connection with the DPA application.

Applicant (original signature)	Date Co-Applicant/NPS (original signature) Date
Ethnicity:	Ethnicity:
☐ Hispanic or Latino	☐ Hispanic or Latino
☐ Not Hispanic or Latino	☐ Not Hispanic or Latino
Race/National Origin:	Race/National Origin:
☐ Alaskan Native or American Indian	☐ Alaskan Native or American Indian
☐ Native Hawaiian or Other Pacific Islander	☐ Native Hawaiian or Other Pacific Islander
White	□ White
Asian	☐ Asian
Black or African American	☐ Black or African American
Multi	Multi
Gender:	Gender:
Female	☐ Female
☐ Male	☐ Male
Has a Disability:	Has a Disability:
□ No	□No
Yes (complete the Verification of Disability for	orm) Yes (complete the Verification of Disability form)



# UNIFORM PHYSICAL CONDITIONS STANDARDS (UPCS)/VISITABILTY EXISTING HOME INSPECTION AGREEMENT

We/I, _		, as an
applica followir	nt(s) to Housing and Planning "Down Payment Assistance" (DP ng:	A) Program hereby agree to and understand the
•	A Uniform Physical Conditions Standards (UPCS) Inspect Housing and Urban Development (HUD) is required of each This inspection will be performed by a UPCS-certified Inspecto	existing home purchased under the DPA Program.
•	This inspection is a requirement of HUD and in <b>no way</b> sho property. Housing and Planning (HPD) encourages the Burreport that addresses the structural integrity of the property.	
•	I (we) understand that <u>all utilities must be ON</u> for the inspection	on to occur.
•	I (we) understand that all repairs identified as necessary throubefore the date of closing, as a condition of participation in the through agreements with the Seller, or through other means HPD. Follow up inspections will be required to assure that necessary inspection are completed satisfactorily.	e DPA Program. The repairs may be undertaken determined to be acceptable in consultation with
•	If lead-based paint hazards are found at the time of the UPCS follow HUD's safe work practice methods.	S inspection, a certified contractor will have to
•	UPCS inspections (by HPD inspectors only) are paid for by HPD	D.
Subject	Property:	
Applica	ant Signature	Date
Co-App	olicant/NPS Signature	Date
Seller S	Signature	Date
Seller	bignature	Date

\*\* ALL DOCUMENTS WITH ORIGINAL SIGNATURES MUST BE SUMBITTED PRIOR TO APPROVAL\*\*

Date



Seller Signature

#### **BUYERS/SELLERS CERTIFICATION OF PURCHASE**

Date:			
Property Being Sold:			
Owner(s)/Seller(s):			
Buyer(s):			
Dear Owner(s)/Seller(s):			
form of downpayment and required to disclose the foll	closing cost assistance to the coverage of the	ne Buyer(s), may be used in the public Department of Housing and Urban	ase. Because Federal funds, in the burchase of your property, we are Development (HUD) in accordance added (URA), Section 24.101(b) (2):
acquired by either 2. The fair market val	voluntary purchase or eminent ue of the property is estimated	domain. to be \$ How	greement, the property will not be ever, since this transaction is the same, higher or lower than this
payments. Additionally, an qualify as a displaced person URA relocation assistance. In accordance with HUD rebeen executed between the agreement.  Any title deficiencies, liens,	y person who occupies the proon. However, tenant-occupants and must be informed in writing quirements, if the information per Buyer(s) and the Seller(s), the or encumbrances on the property.	ese terms does not qualify as a disp perty for the purpose of obtaining as a displaced as a result of a voluntary g as soon as feasible. Provided above is disclosed after an e Seller(s) must be provided the opposite erty must be cleared <b>prior to</b> any cleat of these costs may be negotiated	esistance under the URA does not a capacition may be entitled to option to purchase or contract has cortunity to withdraw from the opsing. Generally, this is a cost that
Seller(s). No federal fund	s can be used to pay these c	osts.	
Should you have any quest	ions, please feel free to contac	t (lender's name)	
at telephone number		·	
** ONLY A	APPLICATIONS WITH OR	IGINAL SIGNATURES WILL E	BE ACCEPTED**
Buyer(s)	Date	Buyer(s)	Date
Seller(s)	 Date	Seller(s)	 Date

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.









# We Do Business in Accordance With Federal Fair Lending Laws

# UNDER THE FEDERAL FAIR HOUSING ACT, IT IS ILLEGAL, ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, RELIGION, SEX, HANDICAP, OR FAMILIAL STATUS (HAVING CHILDREN UNDER THE AGE OF 18), TO:

- Deny a loan for the purpose of purchasing, constructing, improving, repairing or maintaining a dwelling, or deny any loan secured by a dwelling; or
- Discriminate in fixing the amount, interest rate, duration, application procedures or other terms or conditions of such a loan, or in appraising property

## IF YOU BELIEVE YOU HAVE BEEN DISCRIMINATED AGAINST, YOU SHOULD SEND A COMPLAINT TO:

Assistant Secretary for Fair Housing and Equal Opportunity
Department of Housing & Urban Development
Washington, DC 20410
For processing under the Federal Fair Housing Act

#### and to:

Division of Compliance and Consumer Affairs Federal Deposit Insurance Corporation Washington, DC 20429-9990 For processing under FDIC regulations

### UNDER THE EQUAL CREDIT OPPORTUNITY ACT, IT IS ILLEGAL TO DISCRIMINATE IN ANY CREDIT TRANSACTION:

- On the basis of race, color, national origin, religion, sex, marital status, or age,
- · Because income is from public assistance, or
- Because a right was exercised under the Consumer Credit Protection Act

# IF YOU BELIEVE YOU HAVE BEEN DISCRIMINATED AGAINST, YOU SHOULD SEND A COMPLAINT TO:

Division of Compliance and Consumer Affairs Federal Deposit Insurance Corporation Washington, DC 20429-9990

Applicant Signature	Date	Co-Applicant Signature	Date



# HOME Program Eligibility Release Form

Organization requesting release of information (PJ name, address, telephone, and date)

**Purpose**: Your signature on this HOME Program Eligibility Release Form, and the signatures of each member of your household who is 18 years of age or older, authorizes the above-named organization to obtain information from a third party relative to your eligibility and continued participation in the:

HOME TBRA Program HOME

Homebuyer Program

HOME Rental Rehabilitation Program HOME

Homeowner Rehabilitation Program

Privacy Act Notice Statement: The Department of Housing and Urban Development (HUD) is requiring the collection of the information derived from this form to determine an applicant's eligibility in a HOME Program and the amount of assistance necessary using HOME funds. This information will be used to establish level of benefit on the HOME Program: to protect the Government's financial interest; and to verify the accuracy of the information furnished. It may be released to appropriate Federal, state, and local agencies when relevant to civil, criminal, or regulatory investigators, and to prosecutors. Failure to provide any information may result in a delay or rejection of your eligibility approval. The Department is authorized to ask for this information by the National Affordable Housing Act of 1990.

**Instructions**: Each adult member of the household must sign a HOME Program Eligibility Release Form prior to the receipt of benefit and on an annual basis to establish continued eligibility. Additional signatures must be obtained from new adult members whenever they join the household or whenever members of the household become 18 years of age.

NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.

**Information Covered**: Inquiries may be made about items initialed by applicant/tenant.

Income (all courses)	Initials	Initials
Income (all sources)		
Assets (all sources)		
Child Care Expense		
Handicap Assistance Expense (if applicable)		
Medical Expense (if applicable)		
Other (list)		
Dependent DeductionFull-Time Student		
Handicap/Disabled Family Member		
Minor Children		

**Authorization**: I authorize the above-named HOME Participating Jurisdiction and HUD to obtain information about me and my household that is pertinent to eligibility for participation in the HOME Program.

I acknowledge that:

- A photocopy of this form is as valid as the original.
- (2) I have the right to review the file and the information received using this form (with a person of my choosing to accompany me).
- (3) I have the right to copy information from this file and to request correction of information I believe inaccurate.
- (4) All adult household members will sign this form and cooperate with the owner in this process.

Head of Household—Signature, Printed Name, and Date: Family Member HEAD

Other Adult Member of the Household—Signature, Printed Name, and Date: Family Member #2

Other Adult Member of the Household—Signature, Printed Name, and Date:

Family Member #3

Other Adult Member of the Household—Signature, Printed Name, and Date:

Family Member #4

