



Washington County CDA-Down Payment Assistance Application

<u>Application Checklist of Required Documents</u>

☐ Completed Application Form All Parts

Review, sign and date all release forms Monthly Budget Worksheet Proof of All Household Income
 Pay stubs: Most recent 2 months Benefit Statement/Letter: Example: Social Security, Disability, Pension, Food Support or Unemployment. Statement needs to show amount received and must be for current time period. If self-employed, Profit & Loss Statement for most recent quarter
• If self-employed, Front & Loss Statement for most recent quarter
accounts, custodial accounts in which you as a borrower receive funds, all investment accounts, stocks, bonds, etc., other than retirement accounts in which you are not
receiving income. Statements must include all pages; website printouts must show your
name and at least the last 4 of your account number on each page.
If you receive child support and/or spousal maintenance must have copy of Divorce Decree along with current proof of receipt of support.
2 years most recently filed Federal Tax Returns and W2s and/or 1099s
Copy of your signed and agreed upon purchase agreement
Copy of property appraisal
Copy of the Home Inspection
Copy of Homebuyer Education Certificate for each borrower listed on the first mortgage
Certificate of Homebuyer Counseling by HUD Approved Agency or other proof counseling
was received within the last 6 months
by the CDA at no charge and will not show up on your credit report.
Lead Based Paint Pamphlet Receipt
CDA program staff may request additional documents as needed

Questions? Call 651-202-2822

Send completed application packet to:

Fax: 651-458-1696
Attn: Homeownership

Email using the following directions:

When emailing your application, re-save documents as "Last Name_DPA (Date)"

Send to: Homeownership@washingtoncountycda.org

Mail: Attn: Homeownership Washington County CDA 7645 Currell Blvd. Woodbury, MN 55125



HOMEBUYER DOWN PAYMENT ASSISTANCE APPLICATION

NOTE: If you have impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about the down payment assistance program, please communicate with CDA staff about arranging alternative accommodations.

arranging altern	anve accommodations.			
**Do you need an interpreter when communicating v	ith CDA staff? □Yes_	(langu	age) 🗆 No	
How did you hear about the down payment assistance program	n?			
☐ Lender / Mortgage company	☐ Agency (which one: _	☐ Agency (which one:)		
☐ Realtor	☐ Newspaper, Flyer or Brochure			
☐ Someone who took a workshop, Friend or Relative	☐ CDA Website ☐ C	Other:		
orrower(s) Information:				
Borrower #1				
Name (Please print):	Email:			
First MI Last				
Current Address:	City:	State:	Zip:	
Social Security #				
Phone #1Phone #2				
Gender Identity/Expression: ☐ Male ☐ Female ☐ 0	Other (please specify) _			
Preferred Language:	Birth Date			
Your ethnicity: \square Hispanic, Latino, or Spanish \square	Non-Hispanic			
Race:(select one)				
Single Race	Multiple Race			
☐ American Indian / Alaskan Native	☐ American !	Indian / Alaskan N	ative & White	
☐ Asian	☐ American I	Indian / Alaskan N	ative & Black	
☐ Black or African American	☐ Asian & W			
☐ Native Hawaiian or Other Pacific Islander	☐ Black or African American & White			
	_	waiian/Other Pacif 		
☐ White	□ Other race):		
Marital Status (select one): ☐ Married ☐ Partnered	I □ Single □ Divorced	d □ Separated	☐ Widowed	
Are you disabled? ☐ Yes ☐ No				
Are currently enlisted in the Armed Forces? Yes	□ No Are you a ve	teran? 🗆 Yes [□ No	
Are you a single parent household? Yes	No			

Name (Please print): Email:
Relationship to Individual #1 Current Address: City: State:Zip: Social Security # Birth Date Phone #1 Phone #2 Gender Identity/Expression:
Current Address: City: State:Zip: Social Security # Birth Date Phone #1 Phone #2 Gender Identity/Expression: □Male □Female □Other (please specify) Your ethnicity: □ Hispanic, Latino, or Spanish □ Non-Hispanic Race:(select one)
Social Security # Birth Date Phone #1 Phone #2 Gender Identity/Expression: Male Female Other (please specify) Your ethnicity: Hispanic, Latino, or Spanish Non-Hispanic Race:(select one)
Phone #1Phone #2 Gender Identity/Expression: □Male □Female □Other (please specify) Your ethnicity: □ Hispanic, Latino, or Spanish □ Non-Hispanic Race:(select one)
Gender Identity/Expression: □Male □Female □Other (please specify) Your ethnicity: □ Hispanic, Latino, or Spanish □ Non-Hispanic Race:(select one)
Your ethnicity: ☐ Hispanic, Latino, or Spanish ☐ Non-Hispanic Race:(select one)
Race:(select one)
,
Single Race Multiple Race
☐ American Indian / Alaskan Native ☐ American Indian / Alaskan Native & White
☐ Asian ☐ American Indian / Alaskan Native & Black ☐ Asian & White
☐ Black or African American ☐ Black or African American & White
☐ Native Hawaiian or Other Pacific Islander ☐ Native Hawaiian/Other Pacific Islander & Blad
☐ White ☐ Other race:
Marital Status (select one): ☐ Married ☐ Partnered ☐ Single ☐ Divorced ☐ Separated ☐ Widowed
Are you disabled? ☐ Yes ☐ No
Are currently enlisted in the Armed Forces? ☐ Yes ☐ No Are you a veteran? ☐ Yes ☐ No
Are you a single parent household? Yes No
Household Information (if you need more room use back of sheet)
Provide for ALL people who will live in the purchased property, including buyer(s): Full Name Relationship to Birth Date M/D/YY Full Time Student?
Borrower(s) Y/N

Employment and Income Information (if you need more room use back of sheet)

Must include income for **all** individuals who will **1.** sign the first mortgage and/or **2.** Will live in the property being purchased **and** will sign/guarantee the first mortgage note or **3.** Is the legal spouse of a mortgagor **and** will live in the property. List income from all sources (*work, self-employment, disability, child support, unemployment, alimony,*

regular contributions, social security, etc. for further details ask staff)

Household Member (person receiving income)	Employer (included name and address) /Other Income Sources and Hire Date or date started receiving	Rate of Pay (hr/wk/mo)	If Applicable, Frequency of pay (weekly, every other week, monthly) and average number of hours worked in pay period
		\$ per (ex. \$15 per hr)	(ex. 80hrs every other week)
		\$ per	
		\$	
		\$	

Bank Account/Other Asset Accounts

Household Member	Checking/Savings Account		Stocks/Bonds/Investment Accounts		
	Name of Bank or Credit Union		Company Name		
	Toront Annual	A			
	Type of Account	Account #	Type of Asset	Cash Value of Asset	
		\$ Amount on Deposit			
	Name of Bank or Cred	dit Union	Company Name		
	Type of Account	Account #	Type of Asset	Cash Value of Asset	
		\$ Amount on Deposit			
	Name of Bank or Credit Union		Company Name		
	Type of Account	Account #	Type of Asset	Cash Value of Asset	
		\$ Amount on Deposit			
	Name of Bank or Credit Union		Company Name		
	Type of Account	Account #	Type of Asset	Cash Value of Asset	
		\$ Amount on Deposit			
	Name of Bank or Credit Union		Company Name		
	Type of Account	Account #	Type of Asset	Cash Value of Asset	
		\$ Amount on Deposit			
L	L				

Additional Household Information 1. What was your household annual gross income (you can find this on last year's taxes)? \$ 2. Current housing: ☐ Rent ☐ Own ☐ Staying with family/friends **How long have you lived there? _____ 3. Current household rental payment: \$_____/ month 4. Are you a first-time homebuyer? \square **Yes** \square **No** (You have not owned a home for the past three years.) 6. Have you experienced a home foreclosure, deed-in-lieu, pre-foreclosure/short sale, or bankruptcy in the past 3 years? Yes No If yes, which one and when? 7. Did vou complete a Home Stretch Workshop OR Framework course online? ☐ No ☐ Yes: Location & Date(s): _____ Other education please list here _____ 8. How much money do you have saved towards your home? \$_____ 9. Do you have any or an interest in any other assets or property not listed above that has cash value? List here **Purchase Property and Closing Information** Property address: City State Zip Code Type of Property: □Single Family □Town Home □Condo □Manufactured Home Year Built: _____ Purchase price: \$ _____ Appraised Value \$ _____ Loan amount: \$_____ Loan interest rate: ____% Closing date: _____ Loan program (FHA, VA, MN Housing etc.): ______ Estimated PITI \$_____ Lender Bank/Mortgage Co.: ______ Lender Name _____ Lender Phone # _____ Lender Fax # _____ Lender Email _____ Realtor Name_____ Realtor Phone # _____ Realtor Email _____ Title Co. ______ Title Co. Contact _____ Title Co. Phone #____ Certification of Application and Borrower Signature(s) I/We understand that by completing this application I/we are applying for a down payment assistance loan through the Washington County CDA. I/we understand that this loan must be repaid when the first mortgage is paid in full, the home is sold, refinanced or no longer the primary residence of the borrower(s). I/We certify that the information I/we provided in this application is accurate, complete and true to the best of my/our knowledge and belief as of the date of my/our signature(s) below:

Borrower #1 Signature/ Date

Borrower #2 Signature/ Date

Please print Borrower's Name(s)