

City of Dothan Planning and Development

The initial application package must include the following:
 Homebuyer Application & Affidavits (originals)
 Copy of Lender's Loan 1003
 Income verification
 Purchase Contract and amendments signed by all parties
 Income Tax Returns
 Copy of Lender Good Faith Estimate

HBA# _____

HOME BUYER ASSISTANCE APPLICATION

(1) APPLICANT #1:

First Name	Middle	Last Name	Age		
Current Address	City	State	Zip	Home Phone #	Work Phone #
Occupation	Employer Name and Address		Date of Employment	Years in line of business	

(2) (For Statistical Purposes Only)

<i>Marital Status</i> (check one)	<i>Ethnicity</i>	<i>Race</i> (Enter appropriate number in family)
<input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married	Hispanic Ethnicity? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan <input type="checkbox"/> American Indian/Alaskan Native & Black/African American <input type="checkbox"/> Other/Multi-racial
		<input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> Native Hawaiian/Other Pacific Islander
<i>Gender</i> (check one) <input type="checkbox"/> Male <input type="checkbox"/> Female	<i>First Time Buyer</i> (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No	

(3) APPLICANT #2:

First Name	Middle	Last Name	Age		
Current Address	City	State	Zip	Home Phone #	Work Phone #
Occupation	Employer Name and Address		Date of Employment	Years in line of business	

(4) (For Statistical Purposes Only)

<i>Marital Status</i> (check one)	<i>Ethnicity</i>	<i>Race</i> (Enter appropriate number in family)
<input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married	Hispanic Ethnicity? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> American Indian/Alaskan Native & Black/African American <input type="checkbox"/> Other/ Multi-racial
		<input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> Native Hawaiian/Other Pacific Islander
<i>Gender</i> (check one) <input type="checkbox"/> Male <input type="checkbox"/> Female	<i>First Time Buyer</i> (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No	

(5) HOUSEHOLD INFORMATION: List all household members who will live in the property during the first six months after purchase, including dependents, domestic partners, roommates and those going on title to the property:
 Total Persons in Household _____ Total Yearly Household Income \$ _____

Name	Age	M/F	Name	Age	M/F
Name	Age	M/F	Name	Age	M/F
Name	Age	M/F	Name	Age	M/F
Name	Age	M/F	Name	Age	M/F

(6) PROPERTY INFORMATION: **Closing Date:**

Street Number _____ Street Name _____ Unit # _____ Zip Code _____

of bedrooms _____ Detached Condo New Existing Rental within last 90 days
 (check one) (check one)

(7) LOAN INFORMATION (filled in by lender/broker)

Sales Price	\$ _____	1 st Mortgage Amt.	\$ _____	Proposed Monthly Payments	
Origination points (_____%)	\$ _____	Initial Note Rate	% _____	1 st Mtg P&I	\$ _____
Discount points for below par pricing (_____%)	\$ _____	Non-buydown Rate	% _____	2 nd Mtg P&I	\$ _____
Fees (Prepays & other closing costs)	\$ _____	Term (months)		Hazard Insurance	\$ _____
Buy-down costs	\$ _____	2 nd Mortgage Amt	\$ _____	Taxes	\$ _____
PMI, other Fees	\$ _____	TOTAL LTV	% _____	Mtg. Ins	\$ _____
Total Costs	\$ _____	Qualifying Ratios		HOA Fees	\$ _____
Less: Fees paid by Seller	\$ _____	Total Housing Ratio	% _____	Other	\$ _____
Less: Fees paid by Lender	\$ _____	Total Debt to Income Ratio	% _____	TOTAL Housing Expenses	\$ _____
Less: First Mortgage Loan Amount	\$ _____				
Cash required from Borrower	\$ _____				

TYPE OF LOAN: FHA VA CONV Fixed rate (no ARMs accepted)
FICO score: _____

(8) SELLER:

Full Name (s) _____ Address _____ Home Phone # _____ Work Phone # _____

(9) LENDER(S):

Originating

Company Name	Contact	Phone #	FAX #
Address(complete)		E-mail:	

Funding

Company Name	Contact	Phone #	FAX #
Address(complete)			

(10) INCOME STATEMENT

Fill in completely or the application will be returned.

YOU MUST ATTACH

- 1. VERIFICATION OF INCOME FROM ALL SOURCES**
- 2. LATEST TAX RETURN**
- 3. CHILD SUPPORT/ALIMONY/DIVORCE DECREE**

DO YOU RECEIVE MONTHLY INCOME FROM ANY OF THESE SOURCES? IF NO INCOME IS RECEIVED, MARK "NO"

SOURCE OF INCOME	APPLICANT: EMPLOYER:	CO-APPLICANT: EMPLOYER	CO-APPLICANT: EMPLOYER:
Wages, Tips, Overtime, etc.			
Business Income			
Interest, dividends, etc.			
Unemployment			
Welfare assistance			
Child support, alimony, etc.			
Social Security, pensions, etc.			
Totals	a.\$	b.\$	c.\$

Enter TOTAL of items (a) through (c). This is your anticipated annual household income.	\$
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TO THE HOMEBUYER:

Thank you for your application to the City of Dothan Homebuyer Assistance Program. The successful completion of the application process may result in your receiving a City of Dothan grant. It is very important that you take time to read and sign each page of this application before your lender sends it to our office. You will be certifying that you understand the Program eligibility guidelines, and believe that you meet those guidelines. If you have any questions, please contact the Planning Department at 334-615-4417.

By signing this document you will be certifying that 1) You have made an accurate representation of your household composition during the first six months after purchase; 2) You are able to verify your first-time homebuyer status; 3) You intend to move in within 60 days of loan closing and occupy the property as your principal residence for at least five years; 4) If the property is newly constructed, it will not be occupied prior to loan closing; 5) You are receiving a first (not an existing) mortgage; 6) You have provided complete and accurate information about your gross annual household income for all household members who will occupy the house during the first six months after purchase; 7) You have not made any side agreement with the seller which would misrepresent the purchase price; 8) No one related to you has an interest as a creditor on the Mortgage Loan; 9) You understand the City of Dothan grant is not transferable; and 10) You are applying for the City of Dothan grant through a lender of your own choice.

FIRST-TIME HOMEBUYER PROGRAM AFFIDAVIT (Part 1)

Each applicant must make the following certifications:

I, the undersigned, as part of my application for a Homebuyer Assistance Grant from the City of Dothan (the "Program"), and in connection with a purchase of a single-family home (the "residence") and an application for a mortgage loan (the "Mortgage Loan") from a lender (the "lender") of my choosing, do hereby state that I have carefully reviewed this document. I understand and agree with the answers on pages one and two, and do furthermore certify the following:

1. **I understand and agree that the answers given on page one and two represent those people who will initially share occupancy of the Residence with me (within six months of closing). I understand that my spouse or domestic partner, whether on title or not, is an Applicant for the Program and must sign this Application.**
2. I certify that I am a first-time homebuyer, who has not had an ownership interest in a principal residence within the three years immediately preceding the date of this application, and I do not and will not have an ownership interest in a principal residence prior to the date of closing. The term "first-time home buyer" means neither the buyer(s) nor any other members of the household have owned or been on the title to a home during the previous 3-years. The term will also include any person who has been displaced due to a divorce even though the person owned a home with his/her spouse or lived in a home owned by a spouse. The term "displaced person" refers to a person who is an adult and is divorced from a spouse and purchasing a home for themselves and any dependent children for the first time. I further certify that I will submit true and complete copies of my actual signed federal tax returns for the preceding tax year, or such other written verification that is acceptable to the Program.
3. I certify that the Residence will be occupied and used as my principal place of residence within 60 days of the date of Mortgage Loan closing. I expect that I will live in the home at least five years before selling. I certify that the Residence will not be used as an investment property, vacation home or recreation home. **I certify that I will notify the Program in writing if the Residence ceases to be my principal residence.**
4. If the grant application is for a newly built home, I certify that the Residence has not and will not be occupied prior to loan commitment.
5. I certify that the Mortgage Loan is a first mortgage, not a replacement mortgage.
6. I certify that my income does not exceed the program income limits as explained to me by the Mortgage Lender.
7. I certify that no person related to me has, or is expected to have, an interest as a creditor in the Mortgage Loan being acquired for the Residence.
8. I understand and agree that if the City of Dothan Grant is issued on my behalf, it may not be transferred.
9. I understand and agree that I may seek financing from any Lender of my choosing, and that I am in no way prohibited from seeking financing from any potential Lender, so long as the Lender executes and complies with the program guidelines.

CERTIFICATION OF THE APPLICANT

I acknowledge and understand that this Affidavit, as completed above, will be relied on for determining my eligibility for a City of Dothan Grant. I acknowledge that a material misstatement negligently made by me in this affidavit or in any other connection with my application for a City of Dothan Grant will constitute a violation and will result in the cancellation or revocation of the Grant. I acknowledge that any false statement or misrepresentation or the fraudulent use of any instrument, facility, article, or other valuable thing or service pursuant to my participation in the City of Dothan program.

(11)

_____	_____	_____	_____
BUYER	DATE	BUYER	DATE
_____	_____	_____	_____
BUYER	DATE	BUYER	DATE

Based upon reasonable investigation, the Lender has no reason to believe that either the Applicant or the Seller of the Residence has made any negligent or fraudulent material misstatements in connection with the Applicant's application for a City of Dothan Grant, and submits the completed information above as accurate and true to the best of the Lender's knowledge.

Name and Title of Lender Representative _____

_____	_____
ORIGINAL SIGNATURE OF OFFICER APPROVING THE LOAN	DATE

AFFIDAVIT (Part 1)

I, _____, swear or affirm under penalty of perjury under the laws of the State of Alabama that (check one):

_____ I am a United States citizen, or

_____ I am a Permanent Resident of the United States, or

_____ I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that HUD regulations require me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit.

Signature

Date

The above affidavit must be accompanied by a copy of one of the following four types of identification.

_____ A valid Alabama Driver's License or a Alabama identification Card.; or

_____ A United States military card or a military dependent's identification card; or

_____ A United States Coast Guard Merchant Mariner card; or

_____ A Native American Tribal document.