

# First Time Homebuyer Program Loan Application

### **INSTRUCTIONS**

Please complete this application and submit with all requested documentation listed in the "Household Income Information" section. Include information for all members of the household who reside in the home for at least nine months of the year and/or who are claimed as a dependent for income tax purposes. The City of Plymouth is required to verify all sources of income.

HOUSEHOLD IN	FORMATION					_
Applicant:	Last Name		First Name	9		
	Social Security Number	Primary Pho	one #	Email		
Co-Applicant:						
(If any)	Last Name		First Name	9		MI
	Social Security Number	Phone		Email		
			Yes	No	☐ Ye	es 🔲 No
Household Size	e #Dependents #Other Dependents Disabled Household Under 18			Household	Female-	Headed Household
HOUSING INFO	PRMATION					
Current Address					Move-in Da	ate (mm/yyyy)
City		State			Zip Code	
Building Type		Mont	thly Rent Pa	yment		
Have you ever ov If yes, plea	wned a home? use answer the following que	estions:				
Whe	n did you sell or move-out?					
Were	e you displaced due to a divo	orce situation?		O Yes	0	No
	you had a previous loan thr Time Homebuyer Program?	ough Plymouth	's	Yes	0	N
Pleas	se provide the address of the	e previously ow	ned propert	ty.		
 Street Addr	ess	City		State		 Zip Code

#### The following information is requested solely for the purpose of determining compliance with federal civil rights law. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may not discriminate on the basis of this information, or on whether you choose to furnish it. Applicant: Race Ethnicity Hispanic or Latino (select all Asian Not Hispanic or Latino that apply) ☐ Black or African American American Indian or Alaskan Native Marital Married Unmarried **Status** Native Hawaiian or Other Pacific (includes: Single, □ Separated Islander Divorced, Widowed) Co-Applicant: Race **Ethnicity** White Hispanic or Latino (select all (if any) Asian Not Hispanic or Latino that apply) ☐ Black or African American Marital American Indian or Alaskan Native Married Unmarried **Status** Native Hawaiian or Other Pacific Separated (includes: Single, Islander Divorced, Widowed) Relationship to Spouse Other Adult Co-Head of Household Dependent **Applicant** HOUSEHOLD INCOME INFORMATION Income List all household members, their ages, and their estimated gross income (even if it is zero). Income listed should include all income which you are expecting to receive during the next 12 months. Income includes, but is not limited to: Full and/or part-time employment (including Self-employment overtime, commissions, bonuses and tips) Worker's compensation benefits Unemployment Public assistance Childcare earnings Social Security/SSI Child support **Pensions and Annuities** Alimony/spousal maintenance Investment Income **Educational grants** All other income Interest dividends or gains Name of Household Member Source(s) of Income **Gross Monthly Income** Age

**DEMOGRAPHIC INFORMATION** 

Note: Household Size listed on p. 1 and the number of members listed above should match. If additional space are needed, please list on a separate sheet.

**Total Monthly Household Income** 

FINANCIAL INFORMATION					
Prior Government Assistance  Have you or any member of your bousehold over received a Housing Pehabilitation Lean or First	☐ Yes ☐ No				
Have you or any member of your household ever received a Housing Rehabilitation Loan or First Time Homebuyer loan through the City of Plymouth, Hennepin County, or the State of Minnesota? Please provide date of the loan and what the loan covered (repairs, down payment assistance, etc.)					
Asset Accounts					
Provide information for all asset accounts. Provide name of institution, account number(s) are	nd a copy				
of your 2 most recent statement(s):  Checking:					
Savings:					
Other:					
Other:					
Debts					
Per elle const Control					

List all current fixed obligations, installments accounts, revolving charge accounts, loans, and debts to banks, finance companies, and government agencies (if more space is needed, list additional debts on attached sheets).

To Whom Indebted (Name)	Date Incurred	Original Amount	Present Balance	•	

## HOMEBUYER EDUCATION/ LENDER INFORMATION

Р	lease provide the following information for the homebuyer education class you attended:
	Name of Class (i.e. "Home Stretch Workshop" through Community Action for Suburban Hennepin, etc.)
	Date Completed
Р	lease provide the following information for the primary lender you are working with:
	Name of Bank/ Mortgage Company
	Name of Loan Officer
	Phone Number of Loan Officer
	entation e provide the following required materials for all residents of your home, including anyone renting a .
	Check Stubs: Copies of two months of the most recent check stubs from your employer(s).
	<b>Tax Returns</b> : Please submit a complete copy of your federal income tax return for the last three years. If you are self -employed, also submit a profit and loss statement covering the current year.
	<b>Bank Statements:</b> A complete copy of your two most recent monthly bank statement(s) for all accounts and including all pages of the statement. Please note, a printout of account activity is not accepted. <b>Asset Statements:</b> A copy of the most recent statement of all asset account(s) showing balances or cash value.
	<b>Social Security/Other Income:</b> Social security annual benefit letter, pension statement, AFDC and/ or GA statement for the current year. Please note, copies of statements for prior years are not acceptable
	Mortgage Statement(s): Most recent statement showing current balance and payment status (include statements for any other liens, equity lines, etc. on the property as well).
_	<b>Homebuyer Training Certificate:</b> Copy of certificate for participating in approved Homebuyer training course.
	If applicable, copies of:
	<b>Homeowners Association:</b> Statement from the Association indicating dues are current and documents showing what repairs are the responsibility of the Association and what repairs are the homeowner's responsibility.
	Contract for Deed
	Divorce Decree

General Program Requirements an	d Acknowledgement						
General Program Requirements:							
You must have no current intention	n to rent, sell, assign, or transfer into	erest in the property to another.					
The property must be used as a year-round, permanent residence, and must be a completed structure.							
Acknowledgement & Authorization:							
First time Homebuyer funds may nacknowledge that my/our continui	In submitting this application I/we acknowledge that if my eligibility is established I am aware that housing First time Homebuyer funds may not be immediately available for my/our use, and I/we further acknowledge that my/our continuing eligibility will depend upon my being able to provide reverification of eligibility when requested by City of Plymouth.						
☐ I/We authorize City of Plymouth or improved at any time from the date	•	·					
☐ I/We understand that if the proper sold, title is transferred or conveyed		· · · · · ·					
☐ I/We understand that any future at limited and/or require repayment of	•	• • • • • • • • • • • • • • • • • • • •					
Acknowledgment of Receipt of Infor	mation						
Please read the following documen I/We certify that I/We have receive							
Release of Information (PLEASE	SIGN AND RETURN)						
Data Privacy (Tennessean Warning)	(PLEASE SIGN AND RETURN)						
I/We, the undersigned, certify subject application are true, accurate, and corprovisions stated herein are accepted	mplete to the best of my/our know						
Print Applicant Name	Applicant Signature	Data					
Print Applicant Name	Applicant Signature	Date					
Print Co-Applicant Name	Co-Applicant Signature	Date					

# RELEASE OF INFORMATION FOR PLYMOUTH HOUSING & REDEVELOPMENT AUTHORITY FIRST TIME HOMEBUYER PROGRAM

I hereby authorize the City of Plymouth Housing and Redevelopment Authority (HRA) ("The Lender") and its staff to obtain, use, and disclose financial records, including tax return information, held by any financial institution and the Department of Housing and Urban Development (HUD), in connection with any pending participation in Plymouth's First Time Homebuyer Program. I understand, acknowledge, and agree that the Lender has my express permission to obtain, use, and disclose tax return information with financial institutions and their representatives, another entity, entities, person, or persons for purposes of: (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. Financial records involving this participation/transaction will be available to the City of Plymouth staff representatives, or other financial institutions and representatives as determined by the purchaser or seller, and the Department of Housing and Urban Development without further notice or authorization, but will not be disclosed or released to another government agency, department, or individual without consent except as required or permitted by law. Failure to release such information will result in disqualification from participation in this program.

Name	Social Security Number
Street Address/Apt. #	City/State/ZIP Code
Signature	

**Note:** For additional information, please contact Shelonda Marie-Alves, Housing & Economic Development Coordinator with the Plymouth HRA at smarie-alves@plymouthmn.gov or 763-509-5413. Fax number is 763-509-5407. Mailing address is:

Plymouth HRA
Attn: Shelonda Marie-Alves
3400 Plymouth Boulevard
Plymouth, MN 55447

### INDIVIDUAL DATA CONFIDENTIALITY

Home Improvement Loan Program City Of Plymouth, Minnesota

#### YOUR RIGHTS AS A SUBJECT OF DATA

In accordance with the Minnesota Government Data Practices Act, the City of Plymouth is required to inform you of your rights as they pertain to the private information collected from you. Private data is that information which is available to you but not to the public. The personal information we collect about you is private, except for your name and address.

The information collected from you or from other agencies or individuals authorized by you is used to determine your eligibility for a home improvement loan. You are not required to provide information relating to your marital status and race; however, this information is vital to determine to what extent our programs are used by minorities. All other information on the form is needed to determine your eligibility.

If you will not supply the required information, the agency processing your application will not be able to determine your eligibility for the loan.

The dissemination and use of the private data collected is limited to that necessary for the administration and management of home improvement loans. Persons or agencies with whom this information may be shared includes:

- 1. City of Plymouth personnel administering home improvement loans.
- 2. Federal, state, county, local and contracted private auditors.
- 3. Authorized personnel from the U.S. Department of Housing and Urban Development (HUD).
- 4. Law enforcement personnel in the cases of suspected fraud.
- 5. Those individuals or agencies to whom you give or express written permission.
- 6. Secretary of the Treasury: only your name and address, for purposes of avoiding the acceptance of a tax credit for energy improvements made with loan funds.

Unless otherwise authorized by statute or federal law, other governmental agencies utilizing the reported private data must also treat the information as private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include the right to:

- 1. See and obtain copies of the data maintained on you;
- 2. Be told the contents and meaning of the data, and;
- 3. Contest the accuracy and completeness of the data.

To exercise these rights, please contact Shelonda Marie-Alves, Housing & Economic Development Coordinator at:

3400 Plymouth Boulevard, Plymouth, Minnesota 55447 (763) 509-5413 smarie-alves@plymouthmn.gov

I hereby declare that I have received a copy understand my rights as a subject of data.	of the Individual	Data (	Confidentiality	form	and	that I	have	read	it and
Applicant Name		Date					=		

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