

**BOARD OF TRUSTEES OF THE
HARWICH AFFORDABLE HOUSING TRUST FUND
MONDAY, MAY 22, 2023 - 1:00PM
GRIFFIN ROOM, ROIQN HAL;L
732 MAIN STREET**

MEMBERS PARTICIPATING: Larry Ballantine, Acting Chair, Brendan Lowness, Robert Spencer

ALSO PARTICIPATING: Joseph Powers, Chair and Town Administrator

I. CALL TO ORDER: Larry Ballantine called the meeting of the Board of Trustees of the Harwich Affordable Housing Trust Fund to order on My 22, 2023 at 1:00PM.

II. REORGANIZATION OF THE BOARD OF TRUSTEES OF THE HARWICH AFFORDABLE HOUSING TRUST FUND

Chairman Powers introduced a new member to the Board, Bob Spencer. He also stated that Larry Ballantine serves on the Trust as the designee of the Town Administrator. Mr. Ballantine's term started on May 17th and runs co-terminously with the Mr. Powers' appointment as Town Administrator of Harwich. Mr. Powers also noted that as a Justice of the Peace he is able to preside over the reorganization which he will do to allow the other 3 members to vote on motions.

Mr. Spencer moved to nominate Larry Ballantine as Chair of the Board of Trustees, seconded by Mr. Lowney. Mr. Ballantine accepted the nomination. Vote 3:0 in favor by unanimously acclamation.

Mr. Spencer nominated Brendan Lowney as Vice Chair of the Board of Trustees, seconded by Mr. Ballantine. Mr. Lowney accepted the nomination. Vote 3:0 in favor by unanimous consent.

Mr. Ballantine nominated Mr. Spencer as Clerk of the Board of Trustees, seconded by Mr. Lowney. Mr. Spencer accepted the nomination. Vote 3:0 in favor by unanimous consent.

Chairman Ballantine read a letter that he just received from Judith Underwood. It is her letter of resignation effective Friday, May 19, 2023. The letter also included a criticism of the actions of the Select Board. He commented that it was difficult to read but he chose to do so because there is always room for improvement. He promised a new beginning and to move these projects forward as efficiently and accurately as possible.

NEW BUSINESS:

A. Welcome New Trustee, Bob Spencer

May 22, 2023

Mr. Ballantine welcomed the new Trustee, Bob Spencer.

Mr. Spencer shared his background including over 30 years as a Habitat for Humanity volunteer and other housing related projects over decades.

B. Vote to approve meeting minutes of April 23, 2023

Mr. Lowney moved to approve the minutes of the April 23, 2023 meeting, seconded by Mr. Ballantine. Vote 2:0:1 with Mr. Spencer abstaining.

OLD BUSINESS:

A. Presentation and discussion from Pine Oaks Village proposed Phase IV.

Greg Winston was in attendance. He thanked Mr. Ballantine for his continued service to the Town of Harwich. He introduced the spokesman, Bob Doane and the developer, James Perine.

Mr. Doane gave a brief history of Pine Oaks Village and what the projects include for housing. He continued with statistics regarding the SHI List and their vision to help Harwich meet the housing goals. Also explained was what the mixed housing would contain, 1, 2 and 3 bedroom units and other buildings, playgrounds etc. that will be on the properties. He shared maps and visuals of the properties, entrances and abutting property. The environmental studies have been done and no vernal pools will be effected. The area for the septic treatment was noted. Home ownership opportunities will be available. He noted an abutters meeting they held and that they had received a mostly favorable response. His presentation continued with details about the many aspects of the buildings and property, including environmental concerns.

Mr. Perine emphasized that everything they are discussing is preliminary. He explained the phases in detail including the percentages of different housing and the funding sources. They are anticipating three of the phases discussed. He spoke of the average median income which is decided by HUD just released and how they apply to all of Barnstable County. He explained how the numbers and percentages translate to the housing. He emphasized that they will be working with the Town and hope to have the support of the Town and the residents moving forward and noted how they hope to file applications and the time phrase involved for both building and financing.

Mr. Doane asked the Board of Trustees for a letter of support to accompany their eligibility letter for the 40B process and then financial support in the future.

Mr. Ballantine suggested that the letter in support be done formally and he asked that they help draft a letter that they would be comfortable with. He noted that the Board is still working on the financial aspect but they will support the project in any way they are able.

May 22, 2023

Brianna Powell, Housing Coordinator expressed her support and offered to help.

Mr. Spencer moved that the Board craft a letter of support, seconded by Mr. Lowney. Vote 3:0 in favor.

B. Presentation by Jenn Goldson from JM Godson on site tour visit followed by discussion.

Jenn Goldson started the presentation with an agenda beginning with an updated schedule. She gave a brief summary of the discussions to date. She proceeded through the presentation with slides. She explained that this plan could be a three or five year plan and noted the differences. There was discussion about the Board's vision for certain properties and the Community Workshop. She went through the calendar months stating what they hope to accomplish, noting that any of the dates can be changed if necessary. Also discussed was having a joint meeting with the Select Board and other Boards related to Housing.

Ms. Goldson began a working session to discuss and create a Strategic Plan: Mission, Goals, Actions and Capacity. She asked questions of the Board members and showed examples of what other towns have created. Board members expressed their opinions and made suggestions.

Chairman Ballantine noted that the Board would like two weeks for creating the Mission Statement so that they may include new members. A mid June meeting was discussed for discussing the Mission and the Goals. Ms. Goldson will send the Power Point to the Ms. Powell so she can share with members.

Kathy Green of the Real Estate and Open Space Committee spoke about the Community Preservation Act and the funding history regarding rental subsidies. She noted that they are waiting for an update regarding funding and eligibility.

Ms. Goldson showed a map that, she commented, needed updating. Mr. Lowney has data on the properties and will be the contact for Ms. Goldson regarding updating the map of properties.

Discussion followed regarding the Community Forum, possible venues and dates. Ms. Goldson suggested two different ways to conduct a forum, an open house or focus groups. Also discussed was a combination of the two which is what the Board members prefer.

Ms. Green offered a brief history of properties, particularly properties known as J4 and J6 and why they had been removed from the list.

Elaine Shovlin, Chair of Real Estate and Open Space suggested that the Board not include properties at the open forum that they have decided to sell and gave her reasons.

May 22, 2023

C. Discussion on Request for Proposal (RFP) for Marceline Property

Ms. Powell noted that she has been researching what other towns are including in their RFPs. She is ready to begin working on the RFP for the Marceline Property.

Board members noted specific items they would like included in the RFP. Ms. Goldsin remained at the meeting to answer questions for the Board.

Ms. Anderson suggested having an on site property manager. The Board will look into that possibility.

Ms. Green commented on a project that she was aware of and shared details of what was included on the property.

Mr. Ballantine asked Mr. Lowey to confirm the date of the next meeting after he has a discussion with Ms. Goldson.

Mr. Ballantine will follow up on amending the start date closer for the new member's appointment.

ADJOURN:

Mr. Spencer moved to adjourn, seconded by Mr. Lowney. Vote 3:0 in favor.

Meeting adjourned.

Respectfully submitted,

Judith Moldstad
Board Secretary

May 22, 2023

AGREEMENT FOR TOWN OF HARWICH

The following provisions shall constitute an Agreement between the Town of Harwich, acting by and through its Board of Selectmen, hereinafter referred to as "Town," and JM Goldson LLC with an address of 4228 Washington Street, Roslindale, MA 02131 hereinafter referred to as "Contractor", effective as of the 2nd day of September, 2022. In consideration of the mutual covenants contained herein, the parties agree as follows:

ARTICLE 1: SCOPE OF WORK:

The Contractor shall perform all work and furnish all services necessary to provide the Town with an Affordable Housing Trust action Plan, including the scope of services set forth in Attachment A.

ARTICLE 2: TIME OF PERFORMANCE:

The Contractor shall complete all work and services required hereunder commencing upon contract execution with a completion date of no later than December 31, 2023.

ARTICLE 3: COMPENSATION:

The Town shall pay the Contractor for the performance of the work outlined in Article 1 above the contract sum of \$28,270. The Contractor shall submit monthly invoices to the Town for services rendered, which will be due 30 days following receipt by the Town.

ARTICLE 4: CONTRACT DOCUMENTS:

The following documents form the Contract and all are as fully a part of the Contract as if attached to this Agreement or repeated herein:

1. This Agreement.
2. Amendments, or other changes mutually agreed upon between the parties.
3. All attachments to the Agreement.

In the event of conflicting provisions, those provisions most favorable to the Town shall govern.

ARTICLE 5: CONTRACT TERMINATION:

The Town may suspend or terminate this Agreement by providing the Contractor with ten (10) days written notice for the reasons outlined as follows:

1. Failure of the Contractor, for any reason, to fulfill in a timely and proper manner its obligations under this Agreement.
2. Violation of any of the provisions of this Agreement by the Contractor.
3. A determination by the Town that the Contractor has engaged in fraud, waste, mismanagement, misuse of funds, or criminal activity with any funds provided by this Agreement.

Either party may terminate this Agreement at any time for convenience by providing the other party written notice specifying therein the termination date which shall be no sooner than thirty (30) days from the issuance of said notice. Upon receipt of a notice of termination from the Town, the Contractor shall cease to incur additional expenses in connection with the Agreement. Upon such termination, the Contractor shall be entitled to compensation for all satisfactory work completed prior to the termination date as determined by the Town. Such payment shall not exceed the fair value of the services provided hereunder.

ARTICLE 6: INDEMNIFICATION:

The Contractor shall defend, indemnify and hold harmless the Town and its officers, agents, and all employees from and against claims arising directly or indirectly from the contract. Contractor shall be solely responsible for all local taxes or contributions imposed or required under the Social Security, Workers' Compensation, and income tax laws. Further, the Contractor

shall defend, indemnify and hold harmless the Town with respect to any damages, expenses, or claims arising from or in connection with any of the work performed or to be performed under this Agreement. This shall not be construed as a limitation of the Contractor's liability under the Agreement or as otherwise provided by law.

ARTICLE 7: AVAILABILITY OF FUNDS:

The compensation provided by this Agreement is subject to the availability and appropriation of funds.

ARTICLE 8: APPLICABLE LAW:

The Contractor agrees to comply with all applicable local, state and federal laws, regulations and orders relating to the completion of this Agreement. This Agreement shall be governed by and construed in accordance with the law of the Commonwealth of Massachusetts.

ARTICLE 9: ASSIGNMENT:

The Contractor shall not make any assignment of this Agreement without the prior written approval of the Town.

ARTICLE 10: AMENDMENTS:

All amendments or any changes to the provisions specified in this Contract can only occur when mutually agreed upon by the Town and Contractor. Further, such amendments or changes shall be in writing and signed by officials with authority to bind the Town. No amendment or change to the contract provisions shall be made until after the written execution of the amendment or change to the Contract by both parties.

ARTICLE 11: INDEPENDENT CONTRACTOR:

The Contractor acknowledges and agrees that it is acting as an independent contractor for all work and services rendered pursuant to this Agreement and shall not be considered an employee or agent of the Town for any purpose.

ARTICLE 12: INSURANCE:

The Contractor shall be responsible to the Town or any third party for any property damage or bodily injury caused by it, any of its subcontractors, employees or agents in the performance of, or as a result of, the work under this Agreement. The Contractor and any subcontractors used hereby certify that they are insured for workers' compensation, property damage, personal and product liability. The Contractor and any subcontractor it uses shall purchase, furnish copies of, and maintain in full force and effect insurance policies in the amounts here indicated.

- 1) General Liability of at least \$1,000,000 Occurrence/\$2,000,000 General Aggregate. The Municipality should be named as an "Additional Insured". Products and Completed Operations should be maintained for up to 3 years after the completion of the project.
- 2) Automobile Liability (applicable for any contractor who has an automobile operating exposure) of at least \$1,000,000 Bodily Injury and Property Damage. The Municipality should be named as an "Additional Insured".
- 3) Workers' Compensation Insurance as required by law.
- 4) Property Coverage for materials and services being transported by the contractor, as the Town's Property Contract provides coverage for personal property within 1000 feet of the premises.
- 5)
- 6) Umbrella Liability of at least \$1,000,000/ occurrence, \$1,000,000/aggregate. The Municipality should be named as an Additional Insured.

Prior to commencement of any work under this Agreement, the Contractor shall provide the Town with Certificates of Insurance which include the Town as an additional named insured and which include a thirty day notice of cancellation to the Town.

ARTICLE 13: SEVERABILITY:

If any term or condition of this Agreement or any application thereof shall to any extent be held invalid, illegal or unenforceable by the court of competent jurisdiction, the validity, legality, and enforceability of the remaining terms and conditions of this Agreement shall not be deemed affected thereby unless one or both parties would be substantially or materially prejudiced.

ARTICLE 14: ENTIRE AGREEMENT:

This Agreement, including all documents incorporated herein by reference, constitutes the entire integrated agreement between the parties with respect to the matters described. This Agreement supersedes all prior agreements, negotiations and representations, either written or oral, and it shall not be modified or amended except by a written document executed by the parties hereto.

ARTICLE 15: COUNTERPARTS:

This Agreement may be executed in any number of counterparts, each of which shall be deemed to be a counterpart original.

ATTACHMENT A

Harwich Affordable Housing Trust Action Plan and Scope of Work

Purpose: The overall intention of the Action Plan is to establish a deliberate focus to the work of the Trustees and the use of Trust resources. The Action Plan will guide initiatives funded by the Harwich Affordable Housing Trust (AHT) and establish the AHT's goals, priority initiatives, and estimated five-year budget.

Objectives:

- To establish a vision and mission for the AHT
- To establish a clear role for the AHT Board of Trustees
- To establish how the AHT will coordinate with other boards
- To provide guidelines and parameters regarding priority uses of Trust funds
- To establish a specific implementation plan and corresponding budget
- To gain support from municipal officials and other stakeholders through internal and external community engagement

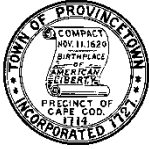
Elements of an AHT Action Plan

- Description of local housing needs: review of current plans and data, assess if additional information is needed
- Assessment of community priorities for the AHT: the process of creating the action plan provides an ideal opportunity for the trust to engage the community. The intent of this community outreach would be threefold: generate feedback and ideas from members of the community, provide information about the community's affordable housing needs and the role of the trust, and generate support for trust activities and projects.
 - Interviews of key town officials
 - Interviews of other stakeholders
 - Convene community workshops for public input
- Mission Statement: craft a mission based on local need, community input and the mission statement, to provide clear guidelines for AHT activities and use of funds. Typical AHT activities include but are not limited to:
 - Providing financial support for the construction of affordable homes by private developers (non-profit or for-profit)
 - Rehabilitating existing homes to convert to affordable housing
 - Increasing affordability in new housing developments projects
 - Developing surplus municipal land or buildings
 - Preserving properties faced with expiring affordability restrictions
 - Supporting rent assistance for low-and moderate-income households
- Development Strategies: if development is established as an AHT priority activity, then a strategy can be created to maximize the impact of Trust funds and ensure meeting local need

- Five-Year Budget to accomplish Goals & Priorities: developing a budget is essential to determine the level of funding required to implement the action plan. The AHT should create a one-to-five year budget that corresponds to the action plan and include estimated amounts and sources of income, estimated costs for the housing trusts’s operations and estimated costs for project and program initiatives. Sources of funding can include but are not limited to:
 - Community Preservation Act funds
 - Inclusionary zoning payments
 - Negotiated developer fees
 - The municipality’s general fund Tax title sales
 - Payments from special bylaws/ordinances
 - Cell tower lease payments
 - Private donations
- Strategy to secure funding
- Evaluation: methods to measure progress against goals

#	Tasks
1	a. Kickoff meeting (Zoom) with the Trust to review project scope, approach, and schedule b. Review background materials, including Trust revenue and expenditures, as well as other relevant planning reports and studies pertaining to the community’s housing needs, goals and priorities c. Update key housing needs data to supplement data per the most recent Housing Production Plan
2	a. Community tour and design and facilitate a working meeting (in-person) with the Trust to review community housing priorities and possible initiatives eligible for trust funding b. Prepare written summary of main themes/issues to help inform next steps
3	a. Survey members to help inform vision, goals, and potential initiatives to explore further b. Survey other towns as needed c. Prepare summary of findings and draft goals and potential initiatives for further consideration d. Meet with the Trust (Zoom) to review results and next steps
4	a. Prepare detailed outline of plan including options for priority initiatives b. Meet with Trust (in-person) to review detailed outline and determine direction for draft plan c. Prepare preliminary draft plan and meet with Trust (in-person) and determine any revisions and discuss possible budget considerations
5	a. Prepare complete draft plan including draft budget and meet with Trust (Zoom) to review and determine revisions b. Revise as necessary and prepare final draft plan c. Present final draft plan at meeting of Trust or other Town Board/Committee/Public meeting (in-person). Revise as necessary and finalize plan for Trust adoptions d. Attend final meeting (Zoom) with Trust for plan adoption

6	a. Facilitate a community engagement forum (in-person) to conduct public education efforts and develop strategies in support of housing initiatives b. Work with the community and residents to facilitate a discussion about the need for housing development and how it benefits the community
7	Project management, coordination, and communications



Provincetown Housing Office



Down Payment & Closing Cost Assistance Program 2022/2023

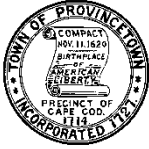
Purpose: The Town of Provincetown, through its Affordable Housing Trust Fund & Community Preservation Fund, offers up to 10% of the sale price, capped at \$30,000 for each eligible buyer to put towards downpayment and closing costs for the purchase of an eligible affordable unit. It is intended to assist year-round residents qualifying at the CPA 100% AMI [Area Median Income] or less income level who can afford monthly mortgage payments yet do not have enough money to pay the initial home purchase downpayment and closing costs. The goal of the program is to increase homeownership among the low and moderate income households in the Town of Provincetown. This is a zero-percent (0%) interest, deferred forgivable loan program, subject to repayment as described below.

Eligibility:

- Available to qualified applicants earning up to 100% AMI [total household income; see below]
- The property must be the homeowner's principal year round residence; not a second home
- Purchaser must be first-time homebuyer defined as someone who has not owned a home in the past three years, some exceptions.
- First Time Homebuyer Workshop: purchaser must provide certificate from an approved Homebuyer Education Workshop Series [*may waive for delayed participation due to COVID*].
- Applicant must provide written confirmation that they have been deemed eligible to purchase a year round home through an approved lottery process or have a fully executed P&S for an eligible unit
- Applicant must have a mortgage pre-qualification letter from a recognized financial institution on bank letterhead clearly indicating their qualification to purchase the unit
- The property must be located in Provincetown

Other requirements / details:

- Available on a first-come, first-serve basis until the allocation for this program is depleted
- Loans are up to 10% of sale price, capped at \$30,000 solely for downpayment and closing costs based on a bona fide Loan Estimate from a recognized financial institution
- A minimum of 1.5% of sale price of homebuyer's funds are required. Loan funds are given at closing, so purchaser will need their own funds for Offer & P&S deposits and other pre-closing costs.
- Funds to be released to closing attorney following receipt of bona fide mortgage loan commitment letter and once the purchase is approved to close
- Downpayment & Closing cost funds loan based on approved legitimate closing costs and limited to 10% of sale price and capped at \$30,000
- This is a zero-percent (0%) interest loan secured by a second mortgage on the property from the purchaser to the Town of Provincetown which will be recorded as a subordinate lien by the closing attorney
- The loan must be repaid in whole or in part when property is sold or transferred in less than ten (10) years; the repayment will be pro-rated based upon the length of time since purchase and will be forgiven after ten (10) years
- The loan will be subordinated if refinanced by original owner(s)



Provincetown Housing Office



Down Payment & Closing Cost Assistance Program - GUIDELINES & APPLICATION

The Down Payment and Closing Cost Assistance Program (“DPCC”) is offered through the Town of Provincetown’s Housing Office and offers up to 10% of sale and capped at \$30,000 for eligible buyers to be put toward bona fide downpayment and closing costs for the purchase of deed-restricted affordable units restricted to buyers at a 100% AMI or less income level. The program is intended for lower to moderate income home buyers who can afford monthly mortgage payments but do not have enough to pay the initial home purchase closing costs. The goal is to increase homeownership among 100% and below AMI households in the Town of Provincetown. *You are encouraged to begin your house-hunting process by applying for DPCC early. If submitted as part of an application for a deed-restricted home, that application may cover this program. If a market unit, to avoid unnecessary delays, submit your application and all required documentation a minimum of eight (8) weeks prior to your loan closing. Once qualified, your conditional letter of approval is valid for 6 months.*

What Type of Assistance is Available?

The DPCC is considered a “deferred payment loan.” The loan is interest free, and you will not have to pay anything back unless you sell or transfer the property. If the property is sold prior to the tenth anniversary of the sale, you will be required to pay back some or all of amount upon sale; the repayment amount will be pro-rated based upon number of years since the purchase.

What is the Maximum Amount of Assistance?

The DPCC program will loan eligible buyers bona fide downpayment and closing costs up to 10% of sale price, capped at \$30,000.

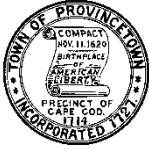
Who is Eligible?

Applicants must meet the following eligibility requirements:

- The household must occupy the property as their principal year-round residence.
- This is a fist-time homebuyer opportunity with look back of 3-years [some exceptions]
- You must complete an approved homebuyer training course and provide certification of completion [may waive for delayed participation due to COVID].
- A household cannot have more than \$75,000 in assets
- You must be approved for a mortgage with a recognized commercial lender
- You must provide a minimum of 1.5% down payment from your own funds
- You must either purchase a permanently deed-restricted affordable unit in the Town of Provincetown and agree to future resale restrictions or other such eligible unit
- Your total household income must not exceed 100% of the HUD/CPA annual median household income. In Provincetown, 100% AMI is (as of 2022; updated annually):

Household Size	1	2	3	4	5	6
Income Limits	\$80,920	\$92,480	\$104,040	\$115,600	\$124,848	\$134,096

For more information contact: Housing Director Michelle Jarusiewicz 508/487-7087 or mjarusiewicz@provincetown-ma.gov



Provincetown Housing Office



Down Payment & Closing Cost Assistance Payment Application



Applicants are selected without regard to race, sex, national origin, color, creed, military status, marital status, familial status, sexual orientation, disability or handicap, genetic information, ancestry, children, or public assistance recipiency.

Applicant/Co-applicant Information

Today's Date _____

This application is to be filled out jointly by ALL Adult Members of Household, 18 years old and over. If there are more than two adult members of household who are not full-time students, please provide additional pages with same information.

Applicant #1 _____ SS# _ _ - _ - _ _ _ _

Other Name(s) You Have Used _____ Date Of Birth _____

Current Address _____ phone _____

Mailing Address (if different) _____

E-mail address _____ Length of Time at Present Address _____

Applicant #2 _____ SS# _ _ - _ - _ _ _ _

Other Name(s) You Have Used _____ Date Of Birth _____

Current Address _____ phone _____

Mailing Address (if different) _____

E-mail address _____ Length of Time at Present Address _____

HOUSEHOLD INFORMATION

TOTAL NUMBER OF PERSONS IN HOUSEHOLD (INCLUDING SELF): _____

PLEASE LIST ALL HOUSEHOLD MEMBERS WHO WILL OCCUPY THE HOME, REGARDLESS OF AGE

NAME	AGE	RELATIONSHIP

HOME OWNERSHIP

Has anyone listed on this application owned a home in the past 3 years or does anyone on this application currently own a home? Yes ___ No ___

If you answered no, please move on to the next section. If you answered yes, please answer the following questions.

To qualify as a **displaced homemaker**, please answer the following questions about the person that has been an owner of a home in the past 3 years or currently owns a home:

Is person an adult? Yes ___ No ___

Has person owned a home only with a partner? Yes ___ No ___

While married, did person not work full-time, full year in the labor force but worked primarily without remuneration to care for the home or family? Yes ___ No ___

Is person currently legally separated from spouse? Yes ___ No ___

Has the home in question already been sold? Yes ___ No ___

If you answered NO to the last two questions you may still be eligible but you must finalize your separation and/or sell your home before you will be given an opportunity to purchase an affordable unit.

To qualify as a **single parent**, please answer the following questions:

Do you have 1 or more children, of whom you have custody/joint custody, or are you pregnant? Yes ___ No ___

Did you own a home with your partner or reside in a home owned by your partner? Yes ___ No ___

Has the home in question already been sold? Yes ___ No ___

Are you unmarried or legally separated from your spouse? Yes ___ No ___

If you answered NO to the last two questions you may still be eligible for this assistance but you must finalize your separation and/or sell your home before you will be given an opportunity to purchase an affordable unit.

1. Do you own or have financial interest in any other real estate and/or business? YES ___ NO ___

If yes, please describe: _____

2. Have you attended an approved First Time Home Buyer Education class*? YES ___ NO ___

If yes, please provide a copy of your completion certification.

* Attendance is a requirement of funding [may waive for delayed participation due to COVID].

3. Do you have an executed Purchase and Sales Agreement? YES ___ NO ___

Have you been awarded a right to purchase a 100% AMI through an approved lottery program?

YES ___ NO ___

SUBJECT PROPERTY:

Address: _____

Purchase Price: \$ _____ Scheduled Closing Date: _____

HOUSEHOLD INCOME

INSTRUCTIONS FOR COMPLETING THE FOLLOWING INCOME TABLE:

- List **ALL** sources of income as requested below for **ALL household members** over 18 years old.
- The gross income must include income for the next 12 months
- For self employed applicants- please put net-income in the gross annual income column (please include a current business income/ expense report)

- For periodic payments (like Social Security and child support) please include the amount received per week or per month (*ex: \$100/month*) in the space provided under “Source / type of Income”. Then provide under “Gross Annual Income” provide the annual amount (*ex: \$1200*)
- Please attach verification for each source of income to include copies of three consecutive months pay stubs, for salaried employed household members over 18, longer for seasonal and hourly workers. If you are self-employed, you have provided a current year-to-date Income & Expense report signed by the preparer. Statements and documents that indicate the payment amounts from all other sources of income of all members listed on the application, such as alimony and/or child support, Social Security benefits, all types of pensions, employment, unemployment Compensation, Workman's Compensation, alimony, disability or death benefits and any other form of income – on organization letterhead
- **Copy of 2020 and 2021 Federal tax returns, as filed, with 2021 1099's, W-2's and schedules, for every current or future person living in the household over the age of 18**
- TOTAL ALL INCOME AND CONTINUE TO ASSET SECTION

EMPLOYMENT INCOME: List all household members who are employed. Include all employers for the next 12 months. For Gross Annual Income please write the anticipated gross income for the NEXT 12 months. Total all employment income.			
Employed Household Member	Employer/Contact	Employer Address & Phone	Gross Annual Income
TOTAL EMPLOYMENT INCOME			

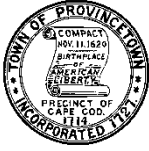
ADDITIONAL INCOME: List all other sources of recurrent income, such as Social Security, SSI, pensions, annuities, military pay, disability, public assistance, TANF, regular monetary contributions from outside sources, unemployment benefits, grants/scholarships, additional financial assistance in excess of tuition, etc.			
Household Member Who Receives Income	Source/Type of Income	Address of Source	Gross Annual Income
TOTAL ADDITIONAL			

ALIMONY & CHILD SUPPORT	
Are you legally entitled to receive alimony? If yes, list the amount you are entitled to receive: \$	Yes _____ No _____
Do you receive alimony? If yes, list the amount you receive: \$	Yes _____ No _____
Are you legally entitled to receive child support? If yes, list the amount you are entitled to receive: \$	Yes _____ No _____
Do you receive child support? If yes, list the amount you receive: \$	Yes _____ No _____
TOTAL ALIMONY and CHILD SUPPORT you are entitled to receive(annually)	

HOUSEHOLD ASSETS

Assets are items of value, such as IRAs, CDs, and checking and savings accounts. Interest received from assets are included as part of your income. Assets do not include necessary personal property such as clothing, furniture, automobiles, jewelry, etc. Please describe your assets and income or dividends from these assets in the chart below. Continue on a separate sheet if necessary.

Household Member	Asset Description	Cash Value
		\$
		\$
		\$
		\$
		\$
Total cash value of all assets =		\$ _____



Provincetown Housing Office



Down Payment & Closing Cost Assistance Program Certification

In signing this application, I/we hereby certify that:

- I/we have correctly indicated the number of persons in the household;
- My/our total liquid assets do not exceed \$75,000;
- We have been qualified to purchase a permanently deed-restricted home in the Town of Provincetown, MA, for buyers at 100% or below Area Median Income [CPA] or other eligible property;
- The information contained in this application is true and accurate to the best of my/our knowledge and belief under the full pains and penalties of perjury and understand that perjury will result in disqualification from further consideration; and
- I/we understand that it is my/our obligation to secure the necessary mortgage for the purchase of the home and all expenses, including closing costs, down payments, etc.

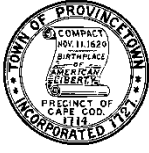
I/we will furnish to the Town of Provincetown upon request at any time any and all income and/or asset and other financial information, any and all household, resident location, and workplace information and I further direct any employer, landlord, or financial institution to release any information to the Town for the purpose of income and/or asset determination eligibility.

_____ Signature	_____ Date	_____ Signature	_____ Date
--------------------	---------------	--------------------	---------------

_____ Printed Name	_____ Printed Name
-----------------------	-----------------------

Submit to:
Housing Director Michelle Jarusiewicz
Town of Provincetown
260 Commercial Street
Provincetown, MA 02657

For more information:
Contact: 508/487-7087 or mjarusiewicz@provincetown-ma.gov



Provincetown Housing Office



Down Payment & Closing Cost Assistance Program Application Checklist

Applying for downpayment and closing cost payment assistance is a two-step process. The first step is to submit an application and copies of all required income documentation in order for us to determine if you qualify for the program. Second, once you have found a home, submit all of the property eligibility information for review. After the property's eligibility is confirmed, at your loan closing with your primary lender, you will sign loan agreements provided by the closing attorney.

Step 1: Submit Applicant Eligibility Information

- Completed Downpayment & Closing Cost Assistance Program Application
- Written verification from a recognized Lottery Agent or Monitoring Agent that you are income and asset qualified to be purchasing the permanently deed-restricted 100% or below AMI restricted unit or eligible unit on the application. If you are applying for a Provincetown deed-restricted home through the Provincetown Housing Office, that application may be sufficient. Contact Housing Office for mor information.
- Bona fide Loan Estimate including estimated downpayment and closing costs from a recognized financial institution
- Mortgage Pre-Qualification letter on bank letterhead from a recognized financial institution

Step 2: Submit Property Eligibility Information

- An executed Purchase and Sale Agreement, as soon as it is available
- Executed Final Loan Commitment Letter on bank letterhead from a recognized financial institution
- Copy of the final affordability deed rider to be executed at closing

Step 3: Post-closing

- Prompt return to the Town of Provincetown by the closing attorney any excess funds beyond downpayment & closing costs disclosed on the Closing Disclosure
- Copy of the Closing Disclosure statement
- Copy of the recorded mortgages & loan



**Wellfleet Local Housing Partnership
Wellfleet Housing Authority
Town Hall – 300 Main Street
Wellfleet, MA 02667**

Introduction

The Wellfleet Local Housing Partnership and the Wellfleet Housing Authority are sponsoring the Down Payment and Closing Cost Assistance Program for 1st Time Home Buyers in Wellfleet. The intent of the Program is:

1. To help working families stay in or come to live in Wellfleet. In particular, the Town hopes to attract younger people and families with school-age children to stay or come to live here; and
2. To help in recruiting eligible police and fire personnel, teachers, health care providers and other critically needed workers in Wellfleet.

The Program will make a zero-interest deferred payment loan of up to \$20,000 available to qualified moderate-income applicants. The amount will be based on the down payment and closing cost amounts documented in the mortgage loan commitment from a recognized commercial lender minus the buyer's contribution of at least 1.5% of the purchase price in their own funds.

This funding is not in the form of a grant or forgivable loan but will be provided as a "second mortgage" and recorded as a subordinate lien by the closing attorney. This loan will not have to be repaid until the property is sold or the title of the property is transferred, whichever comes first. Repayment may also be required if the primary loan is refinanced.

Applicants must be first-time homebuyers (see definition in Section 1 of this Application) and must also meet the following eligibility requirements:

- Annual household income must not exceed 100% of the HUD annual area median household income. These limits are provided by household size in the table below (see Section 3 for what income is included in determining eligibility).
- There is a limit of no more than \$75,000 in financial assets (see Section 3 for details on what assets are involved in determining eligibility).

- The purchased property must be intended for and maintained as a principal year-round residence, not a second home.
- An approved homebuyer training course must be completed, documented by a certification of completion (see Section 2 for information on where these courses are offered).
- A mortgage must be issued from a recognized commercial lender based on specific requirements (see Section 2 for details).
- A minimum of a 1.5% of the purchase price must be provided as part of the down payment from the applicant’s own funds.

2021 Barnstable 100% MSA Income Limits						
Household size	1 person	2 persons	3 persons	4 persons	5 persons	6 persons
Income Limits	\$62,510	\$71,440	\$80,370	\$89,300	\$96,444	\$103,588

*Figures from the Community Preservation Coalition for moderate-income households earning up to 100% of area median income.

The Town of Wellfleet has allocated \$100,000 in funding from Community Preservation Funds in support of this Program, and applications will be processed on a first-come, first-served basis until all funds have been expended. Please note that all complete applications require about 3 weeks for processing and the subsidy will be provided at the mortgage closing.

This application form is available on the Town of Wellfleet website at www.wellfleetma.org, the Town Hall at 300 Main Street and the Public Library at 55 West Main Street.

Completed applications with all the necessary attachments must be submitted in hard copy to the Community Development Partnership’s office at 3 Main Street Mercantile, Unit 7, Eastham, MA 02642. For more information, contact Ann Robinson at 508-240-7873, ext.13 or ann@capecdp.org or Elaine McIlroy at 617-947-1269 or emcilroy@comcast.net.

Detailed information on Program requirements is provided in the following sections. Make sure you review all information to ensure that you understand the Program and your application is complete!

Equal Housing Opportunity



Application Checklist

Before submitting this application, please make sure you have filled out all pages and attached the requested documentation. IN ADDITION to completing this application packet (all 18 pages, you will need to attach the following documentation. PLEASE make photocopies – do not attach originals!

- TWO most recent years Federal Tax Income Taxes and W-2's or 1099's.
(for all household members 18 years or older; PLEASE MAKE SURE COPIES ARE SIGNED)
- Most recent TWO months of Paystubs
(for all household members 18 years or older)
- Most recent THREE months of Bank Accounts/Asset Accounts - checking, savings, investment accounts, retirement accounts, etc. - (for all household members 18 years or older)
- Employment Verification for all household members 18 years or older (form provided on page 15 – make additional copies as needed)
- Asset Verification for all asset accounts (form provided on page 17 – make additional copies as needed)
- Documentation of OTHER INCOME: if any household member receives Social Security, Veteran's Benefits, Disability, income from pensions, income from IRAs or other retirements accounts, income from unemployment statements, or other income not shown on paystubs, include two months of documentation.
- Certificate of Completion of a Homebuyer Education Course. If you signed-up for this but have not completed it, provide documentation of class schedule with class to be taken noted which can be verified by the provider.
- A loan commitment from a lender that includes all down payment and closing costs.**

___ YES, I have included a complete and signed application

Discrimination on the basis of race, creed, color, sex, age, disability, marital status, familial status, veteran's status, sexual orientation, and/or national origin, or any other basis prohibited by law is specifically prohibited in the selection of applicants for this housing opportunity. Disabled persons are entitled to request a reasonable accommodation of rules, policies, practices, or services, or to request a reasonable modification of the housing, when such accommodations or modifications are necessary to afford the disabled person equal opportunity to use and enjoy the housing.

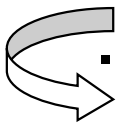
Program Eligibility/Application Certification

Please check the Homeowner Status category that applies to you. To be eligible for this program you must fit into one of these categories (additional documentation may be required for verification of status):

- First-Time Homebuyer (applicant households must not have had an ownership interest in a residential property for the preceding 3 years). Applicant households may not own a home included in trust.
- Age-Qualified Household (a household in which at least one member is age 55 or over).
- Displaced Homemaker, where the displaced homemaker (an adult who has not worked full-time for a full-year in the labor force for a number of years but has, during such years, worked primarily without remuneration to care for the home and family), while a homemaker, owned a home with his or her partner or resided in a home owned by the partner.
- Single Parent, where the individual owned a home with his or her partner or resided in a home owned by the partner and is a single parent (is unmarried or legally separated from a spouse and either has 1 or more children of whom the individual has custody or joint custody, or is pregnant).
- A household that owned a principal residence not permanently affixed to a permanent foundation in accordance with applicable regulations OR a household that owned a property that was not in compliance with State, local or model building codes and which cannot be brought into compliance for less than the cost of constructing a permanent structure.

You must be able to obtain a mortgage in order to purchase the home and receive the down payment and closing cost assistance. The mortgage must meet the following minimum standards:

- The loan must have a fixed interest rate through the full 30-year term of the mortgage.
- The loan must have a current fair market interest rate (no more than 2 percentage points above the current MassHousing rate (617) 854-1000 or www.masshousing.com).
- The loan can have no more than 2 points.
- The buyer must provide a down payment of at least 1.5% from their own funds.
- The buyer may not pay more than 38% of their monthly income for monthly housing costs (inclusive of principle, interest, property taxes, hazard insurance, private mortgage insurance and condominium or homeowner association fees).
- Non-household members shall not be permitted as co-signers of the mortgage.



- YES, the loan commitment from a mortgage lender is attached to this application (REQUIRED)**

Homebuyer Education: You must complete a homebuyer education course at a Massachusetts Homeownership Collaborative certified agency before closing. A list of pre- and post-purchase education courses, which is updated periodically, is on the MHP website www.mhp.net. Classes are also offered by the Community Development Partnership, 800-220-6206, the Housing Assistance Corp. 508-771-5400, and Housing Solutions for Southeastern Massachusetts at 781-422-4200.

Income Limits: Total household annual income must be at/below the 100% Barnstable County Median Income Level, as adjusted for family size as shown in the table below.

2021 Barnstable 100% MSA Income Limits						
Household size	1 person	2 persons	3 persons	4 persons	5 persons	6 persons
Income Limits	\$62,510	\$71,440	\$80,370	\$89,300	\$96,444	\$103,588

*Figures from the Community Preservation Coalition for moderate-income households earning up to 100% of area median income.

Asset Limit: Total Household assets cannot exceed \$75,000.

I/We certify that the information in this application and in support of this application is true and correct to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that an incomplete or untruthful application will result in disqualification from further consideration.

I/We understand that being selected does not guarantee that I/We will be able to purchase the affordable unit. I understand that all application data will be verified and my qualifications will be reviewed in detail.

I/We understand it is my/our obligation to secure the necessary mortgage for the purchase of the affordable unit and all expenses, including providing at least 1.5% of the purchase price as part of the down payment from my/our own funds.

I/We fully authorize the Program Manager to verify any and all income sources, income amounts, assets, financial information, resident location and workplace information.

I/We understand that if I/we and/or a family member has a financial interest in the Down Payment and Closing Cost Assistance Program that I/we will not be eligible for participation in the Program. Family member is defined as a parent, a son/daughter, an uncle/aunt, a niece/nephew, a grandparent, a grandchild and/or a sibling.

No household member may own a home, including a home in a trust.

Applicants determined ineligible will be notified, given an opportunity to discuss the reasons for the ineligible determination, and further given the opportunity to submit additional information that may affect a new determination.

Name of Applicant

Signature

Date

Name of Co-applicant

Signature

Date

Definitions of Income and Assets

Income Limit: Total household annual income must be at/below the 100% Barnstable Area Median Income limits, as adjusted for household size and summarized in the table below.

2021 Barnstable 100% MSA Income Limits						
Household size	1 person	2 persons	3 persons	4 persons	5 persons	6 persons
Income Limits	\$62,510	\$71,440	\$80,370	\$89,300	\$96,444	\$103,588

*Figures from the Community Preservation Coalition for moderate-income households earning up to 100% of area median income.

Asset Limit: Total Household assets cannot exceed \$75,000.

.....

Annual Household Gross Income means all amounts which go to or on behalf of all current adult household members for the 12-month period following application. Annual income includes but is not limited to the following, with certain detailed exemptions (see 24 CFR 5.609):

- The full amount, before ANY payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services
- Net income from the operation of a business or profession
- Interest, dividends, and other net income of any kind from real or personal property
- Payments from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of period receipts
- Payments in lieu of earnings such as unemployment and disability compensation, worker's compensation and severance pay
- Welfare assistance payments
- Alimony and child support
- Regular pay, special pay, and allowances of a member of the Armed Forces

Household Assets include the following:

- Cash in savings accounts, checking accounts and safety deposit boxes, etc., certificates of deposit, bonds, stocks, treasury bills, mutual funds and money market accounts
- Revocable trusts
- Equity in rental property or other capital investments
- Retirement plans are included when the holder has access to the funds, even though a penalty may be assessed. Retirement funds are NOT included if amounts can only be withdrawn if upon termination of employment or retirement
- Cash value of life insurance policies available to the applicant before death

- Personal property held as an investment (this includes gems, jewelry, coin collections, or antique cars held as investments; personal jewelry is NOT considered an asset)
- Lump sum receipts or one-time receipts. (i.e. inheritance, capital gains, one-time lottery winnings, victim's restitution, settlements on insurance claims (including health and accident insurance, worker's compensation, and personal or property losses), and any other amounts that are not intended as periodic payments)
- A mortgage or deed of trust held by an applicant

Household assets **do not** include:

- Personal property. (clothing, furniture, cars, wedding ring and other jewelry that is not held as an investment, vehicles specially equipped for persons with disabilities)
- Term life insurance policies. (i.e. where there is no cash value)
- Equity in the cooperative unit in which the applicant lives
- Assets that are part of an active business (DOES NOT include rental of properties that are held as investments unless such properties are the applicant's main source of income)
- Assets that are not effectively owned by the applicant

Assets disposed of for less than fair market value: Applicants must declare whether an asset has been disposed of for less than fair market value during the two years preceding application. If an asset has been disposed of for less than fair market value, the amount counted as an asset is the difference between the cash value and the amount actually received.

Application Form/Household, Income and Asset Information

How many people in your household (include everybody; all adults, all children)? _____

Applicant Name (this is you): _____

Address: _____

City/Town: _____ State: _____ Zip Code: _____

E-mail Address: _____

Telephone (Day): _____ (Evening): _____

Employer's Name: _____ Town: _____

Co-Applicant (this is any other adult in the household) _____

Address: _____

City/Town: _____ State: _____ Zip Code: _____

E-mail Address: _____

Telephone: (Day): _____ (Evening): _____

Employer's Name: _____ Town: _____

List all household members including yourself (anyone who will live in the house, any age):

<u>Name</u>	<u>Date of Birth</u>	<u>Relationship to Applicant</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are any of the above listed household members full time students? YES NO
If yes, please list below (for students 18 years old or over, documentation of enrollment will be required).

Are any of the above listed household members divorced? YES NO
If yes, please list below and include documentation of child/support and/or spousal support, or documentation that the household member is not receiving child support and/or spousal support.

ANNUAL HOUSEHOLD INCOME INFORMATION: *Gross Annual income is income from all sources, including all wages and salaries (prior to deductions), overtime pay, commissions, tips, fees and bonuses, and other compensation for personal services, net business income, interest/dividend income, Social Security, Supplemental Security Income, pension payments, disability income, unemployment compensation, alimony/child support, and veterans' benefits, for all adult household members over the age of 18, unless the member is a full-time student.*

Self-Employed (those reporting income on a Federal Tax Form, Schedule C) should also include a year-to-date Profit and Loss Statement for the business activity.

Annual Income (Applicant): Gross Income for the past 12 months: \$ _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____ Your Job Position: _____

Wages BEFORE Taxes and Withholding:

\$ _____ (hourly) -or- \$ _____ (weekly) -or- \$ _____ (other – specify: _____)

Additional Income from other sources (such as Social Security, Alimony, Child Support, Unemployment, Disability, Workers' Compensation, etc.):

Source: _____ Income per month: \$ _____

Source: _____ Income per month: \$ _____

Annual Income (Co-Applicant): Gross Income for the past 12 months: \$ _____

Employer Name: _____

Employer Address: _____

Employer Phone: _____ Job Position: _____

Wages BEFORE Taxes and Withholding:

\$ _____ (hourly) -or- \$ _____ (weekly) -or- \$ _____ (other – specify: _____)

Additional Income from other sources (such as Social Security, Alimony, Child Support, Unemployment, Disability, Workers' Compensation, etc.):

Source: _____ Income per month: \$ _____

Source: _____ Income per month: \$ _____

Note: If any other adult household members have income, or if a household member has more sources of income than there is space for above, please attach a separate sheet of paper with their income information as described above

Household Asset Information: *Assets to be included include: cash, savings and checking accounts, stocks, bonds and other forms of capital investment, real estate and retirement accounts. Do not include the value of personal property such as furniture and automobiles.*

Name on Account: _____

Bank Name and Address: _____

Savings Account Number: _____ Balance: \$ _____

Checking Account Number: _____ Balance: \$ _____

Other (e.g. Certificate of Deposit) Account Number: _____ Balance: \$ _____

Name on Account: _____

Bank Name and Address: _____

Savings Account Number: _____ Balance: \$ _____

Checking Account Number: _____ Balance: \$ _____

Other (e.g. Certificate of Deposit) Account Number: _____ Balance: \$ _____

Name on Account: _____

Bank Name and Address: _____

Savings Account Number: _____ Balance: \$ _____

Checking Account Number: _____ Balance: \$ _____

Other (e.g. Certificate of Deposit) Account Number: _____ Balance: \$ _____

Cash: _____

Stocks/Bonds - Description: _____ Value: \$ _____

Real Estate - Description: _____ Value: \$ _____

Retirement Account - Description: _____ Value: \$ _____

Total Household Assets: \$ _____

Note: If any other household members have assets from additional sources, please attach a separate sheet of paper for each with their asset information as described above.

Application Form/Affirmative Marketing

Affirmative Marketing:

Please complete the following section to assist us in fulfilling affirmative marketing requirements. The following section is optional.

Household Race:

- Caucasian
- African American/Black
- Asian/Pacific Islander/Native Hawaiian
- Native American / Alaskan Native
- Other

Ethnic Classification:

- Hispanic/Latino

Application Form/Purchase Information

Address of property being acquired:

Street _____

Type of property:

Single-family

Two-family

Condo

Other – Please specify _____

Lender:

Name of Lender _____

Branch address _____

Name of Loan Officer _____

Phone number of Loan Officer _____

Email address of Loan Officer _____

Attorney:

Name of Attorney _____

Street address _____

Phone number _____

Email address _____

Paralegal's name if applicable _____

Paralegal's email address if applicable _____

Estimated closing date _____

Application Form/General Authorization for Release of Information

Name: _____

Address: _____

Address: _____

Social Security Number: _____

Date of Birth: _____

Name: _____

Address: _____

Address: _____

Social Security Number: _____

Date of Birth: _____

I/We, the above named individual(s), authorize the Program Manager to verify the accuracy of the information which I/we have provided or to secure information from the following sources:

- | | |
|--------------------------------|-----------------------------------|
| Employer | Banks and Credit Bureaus |
| Social Security | Retirement & Pensions Systems |
| Department of Public Welfare | Department of Employment Security |
| Veteran's Administration | Payer of Child Support |
| Trust Administrators | Insurance Companies |
| Criminal History Systems Board | |
| Other: _____ | |

I/We hereby give permission to release this information to the Program Manager subject to the condition that it be kept confidential. I/We would appreciate your prompt attention in supplying the information requested on the attached page within five (5) days of receipt of this request. I/We understand that a photocopy of this authorization is as valid as the original. This authorization is valid for a period of one year from the date noted below. Thank you for your assistance and cooperation in this matter.

Applicant Signature

Date

Applicant Signature

Date

Application Form/Verification of Employment

☞ *Take this page out of the application, fill out Part I & Part II, have your employer fill out Part III, and then re-insert into the application. If you have more than one employer, or have more than one household member with an employer or employers, please make multiple copies. We need a Verification of Employment form for each and every job held by a household member.*

PART I. APPLICANT INFORMATION (To be completed by Applicant)

Applicant: _____ Phone Number: _____

Signature: _____

PART II. EMPLOYER INFORMATION (To be completed by Applicant)

Name of Employer: _____ Phone Number: _____

Address of Employer: _____

PART III. EMPLOYMENT INFORMATION (To be completed by Employer)

1. Date of Employment _____ Position/Occupation _____
2. Date of Termination (if applicable) _____
3. Current Rate of Regular Pay \$ _____ per hour, week, month or year (circle one)
4. Current Rate of Overtime Pay \$ _____ per hour, week, month or year (circle one)
5. Gross income for the last 8 weeks \$ _____.
6. Do you anticipate any change in the employee rate of pay in the near future? Yes _____
No _____ If yes: Revised Rate \$ _____ Effective Date: _____
7. Number of hours employee typically works per week: _____ Weeks per year: _____
8. Do you anticipate any change in the number of hours the employee works?
Yes _____ No _____ If yes, please explain _____
9. Anticipated average amount of overtime per week _____
10. Gross annual earnings you anticipate for this employee for the next 12 months \$ _____
11. Does the employee receive tips, bonuses, overtime, commissions? Yes _____
No _____ Please indicate annual: Tips \$ _____ Bonuses \$ _____ Overtime \$ _____
Commissions \$ _____
12. If the employee's work is seasonal or sporadic, indicate lay-off periods _____

13. Additional Comments: _____

Completed By (signature): _____ Date: _____

Name and Title: _____

Application Form/Verification of Assets

Program regulations require verification of all assets on deposit for all members of the household applying for participation in the community housing program. We ask for your cooperation in supplying this information. This information will be used only to determine the eligibility status and/or level of benefit of the applicant household. Your prompt return of the requested information is appreciated. Please either use the grid below or you may attach a letter on company letterhead detailing the information.

PART I. APPLICANT INFORMATION (To be completed by Applicant)

Applicant: _____

Applicant Address: _____

Phone: _____ SSN: _____

RELEASE: I hereby authorize the release of the requested information

Signature: _____

PART II. ASSET INFORMATION (To be completed by Bank or other holder of Deposits)

	Account number	Current Balance	Average Monthly Balance for Last 6 Months	Current Interest Rate	Withdrawal Penalty and/or Limitations on Withdrawal
Checking/Savings					
Checking/Savings					
Money Market					
Certificates of Deposit					
Retirement (IRA, Keogh, 401(k), etc.)					

Signature of Authorized Representative:

Title: _____

Date: _____

Telephone: _____

