



Rocky Mount Housing Authority

HOMEOWNERSHIP Pre-Eligibility Questionnaire

Submit by E-mail

Print Form

Date _____

E-mail _____

Applicant's

Name _____

Address _____

City _____

State/Province _____ Zip/Postal Code _____

Date Of Birth _____

Phone Number _____

Of Dependents _____

Co-Applicant's

Names _____

Address _____

City _____

State/Province _____ Zip/Postal Code _____

Date Of Birth _____

Phone Number _____

Names & Ages of Dependents _____

Marital Status: Married _____ Unmarried _____ Separated _____ If Separated is it a "Legal" Separation? _____

Credit history must be satisfactory. Do you have any of the following: Check all that apply.

Collections _____ Charge Off(s) _____ Bankruptcy _____ Tax liens _____ Late payments _____ Judgements _____

Foreclosure _____ Repossession _____

Applicant's Monthly Income

\$ _____

\$ _____

\$ _____

\$ _____

Co-Applicant's Monthly Income

\$ _____

\$ _____

\$ _____

\$ _____

Total Monthly Income Amount

\$ _____

\$ _____

Number in family	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	RMHA Use Only
Very Low(50%)	19,350	22,100	24,850	27,600	29,850	32,050	34,250	36,450	Income
Low (80%)	30,950	35,350	39,750	44,150	47,700	51,250	54,750	58,300	Eligibility Met? _____

Debt - Credit cards, Car payments, Loans

Monthly Payment

Estimated Balance

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

Total Of Debts

\$ _____

\$ _____

Final Action: "A" Mortgage Ready _____ "B" Ready within 3-18 Months _____
 "C" Ready in 18 Months or more _____ "D" Over Income _____ "E" Under Income _____
 RMHA Use Only Eligibility Status _____

Comments _____

EXHIBIT "C"

BUDGET

The City of Rocky Mount has received a Community Development Block Grant to effectively carry out the Department of Community and Business Development Down Payment Assistance Program. The total Down Payment Assistance Program funds committed to the Rocky Mount Housing Authority shall not exceed \$100,000.

CDBG funding is available for an individual or family who meets all other eligibility requirements and is low-to moderate income individual or family with a gross income(s) at or below 80% of the Area Median Income (AMI) as defined and published by the HUD annually, as adjusted for family size. Borrowers will be required to provide documentation to verify their income status with their lender.

GROSS HOUSEHOLD INCOME GUIDELINES

Source documentation (e.g. tax returns, social security statements, etc.) must be on file with the Subrecipient in order to determine that a household is low-income. Household size must be determined, and tax documents must be submitted and retained in the client file for a minimum of 10 years. Document the income level (i.e. extremely-low, low, or mod) in the client file and applicable reporting records.

HUD Income Limits (Effective April 2019) FY 19-20 INCOME LIMITS

Family Size (Number of Persons in family)	1	2	3	4	5	6	7	8
Income Limit (80% of AMI)	\$30,950	\$35,350	\$39,750	\$44,150	\$47,700	\$51,250	\$54,750	\$58,300

EXHIBIT "D"

APPLICATION FOR DOWN PAYMENT ASSISTANCE

**City of Rocky Mount Down Payment Assistance Program
Application**

Name: _____

Address: _____

Phone Number: _____

Email: _____

Application is for: (Please Check)

- Down Payment Assistance**

Status of Application with Rocky Mount Housing Authority (Subrecipient): (Please Check)

- Approved**
- Pending**
- Denied**

Do you agree to the Community Development Block Grant Terms for usage of federal funds? (Please check)

- YES**
- NO**

Guidelines include:

- 2nd Mortgage Deferred Loan for 10 years**
- Maintain Homeowners Insurance**
- Flood insurance (if applicable)**
- Down payment cannot exceed \$25,000**

Applicant Signature

Date

EXHIBIT "E"

REPAYMENT SCHEDULE & RECAPTURE CLAUSE ADDENDUM

For the **City of Rocky Mount Second Mortgage** provided by the Subrecipient through City of Rocky Mount, Community Development Block Grant, to prospective homeowners.

The Closing Attorney should provide a breakdown for the Second 10-Year Mortgage in the amount of _____ . The re-payment period is scheduled as shown below:

<u>Sale of Transfer Period</u>	<u>Repayment Required</u>
1 st Year of Ownership	100%
2 nd Year of Ownership	90%
3 rd Year of Ownership	80%
4 th Year of Ownership	70%
5 th Year of Ownership	60%
6 th Year of Ownership	50%
7 th Year of Ownership	40%
8 th Year of Ownership	30%
9 th Year of Ownership	20%
10 th Year of Ownership	10%
11 th Year of Ownership	0%- No Longer Applicable

Prospective Homebuyer Signature _____ Date _____

Subrecipient Representative _____ Date _____

EXHIBIT "E" (continued)

RECAPTURE CLAUSE

The City of Rocky Mount is issuing down payment assistance monies (recapture monies) in the amount of \$_____ that will be used to assist the buyer with purchasing the home for the selling price of \$_____.

The Recapture Agreement (Clause) (Addendum) for these funds will remain in effect for a Ten-Year (10) CDBG Retention Period.

HOME ADDRESS: _____

Date: _____

Buyer: _____

Date: _____

Seller:

EXHIBIT "F"

ELIGIBILITY RELEASE

ELIGIBILITY RELEASE

City of Rocky Mount

Applicant Name: _____

Applicant Address: _____

Instructions to Applicant: Your signature on this Eligibility Release, and the signatures of each member of your household who is 18 years of age or older, authorizes the City of Rocky Mount to obtain information from a third party regarding your eligibility and continued participation in the:
City of Rocky Mount Down Payment Assistance Program

Privacy Act Notice Statement: Federal program guidelines require the collection of the information listed in this form determine an applicant's eligibility for programs administered by the City of Rocky Mount which provides assistance with federal grant funds. This information will be used to establish the level of benefits for which the applicant is eligible and to verify the accuracy of the information furnished. Information received from an applicant or as a result of verifying an applicant's eligibility may be released to appropriate Federal, State, and local agencies or, when relevant, to civil, criminal, or regulatory investigators, and to prosecutors. Failure to provide any information may result in delay or rejection of your eligibility approval. The City of Rocky Mount is authorized to ask for this information under the National Affordable Housing Act of 1990. Each adult member of the household must sign the Eligibility Release prior to the receipt of benefits to establish continued eligibility.

NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. If a copy of a tax return is needed, IRS Form 4506, "Request for a Copy of Tax Form" must be prepared and signed separately.

Signature

Date

EXHIBIT "G"

APPLICABLE LAWS AND REGULATIONS

Subrecipient shall comply with the Act specified in Section III of this Agreement, the OMB Circulars and regulations specified in the grant agreement; and with all federal, state, and local laws and regulations applicable to the activities and performances rendered by Subrecipient under this Agreement including, but not limited to the laws and regulations promulgated thereunder specified in this Exhibit.

I. Nondiscrimination and Equal Opportunity

Title VI of the Civil Rights Act of 1964, as amended, (42 U.S.C. §§2000d et seq.); 24 C.F.R. Part 1, "Nondiscrimination in Federally Assisted Programs of the Department of Housing and Urban Development – Effectuation of Title VI of the Civil Rights Act of 1964"; Title VIII of the Civil Rights Act of 1968, "The Fair Housing Act of 1968" (42 U.S.C. §§3601 et seq.) and implementing regulations; Executive Order 11063, as amended by Executive Orders 12249, 12892, and 24 C.F.R. Part 107, "Nondiscrimination and Equal Opportunity in Housing under Executive Order 11063". The failure or refusal of the Contractor to comply with the requirements of Executive Order 11063 of 24 C.F.R. Part 107 shall be a proper basis for the imposition of sanctions specified in 24 C.F.R. Part 107, §60. The prohibitions against discrimination on the basis of age under the Age Discrimination Act of 1975 (42 U.S.C. §§6101 et seq.) and implementing regulations at 24 C.F.R. Part 146; The prohibitions against discrimination against otherwise qualified individuals with handicaps under §504 of the Rehabilitation Act of 1973 (29 U.S.C. §794). The affirmative action requirements of Executive Order 11246, as amended, and the regulations issued under the Order at 41 C.F.R. Chapter 60; and Executive Orders 11625, 12138, and 12432, as amended. Contractor shall make efforts to encourage the use of minority and women's business enterprise in connection with activities funded under this contract.

EXHIBIT "H"

CERTIFICATION FOR CONTRACTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS

THE UNDERSIGNED CERTIFIES TO THE BEST OF HIS OR HER KNOWLEDGE AND BELIEF THAT:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Sign and Date: _____

RMHA Employee Signature and Date

**Community Development Block Grant (CDBG)
Funding Homeownership Program Check List:**

(A Partnership between the City of Rocky Mount & Rocky Mount Housing Authority)

(Does the potential buyer(s) meet the following requirements for the program?)

Buyer's Name: _____ Co-Buyer's Name: _____

Address: _____ Address: _____

Total number of people who will be living in household: _____

1. Income:

Buyer's Monthly Income: \$ _____ Co-Buyer's Monthly Income: \$ _____

Total Annual Income: \$ _____

RMHA Income Limit: \$ _____

Income Eligibility Met? Yes No

Employed consistently for the last 12 months? Yes No

2. Debts:

<u>NAME OF DEBT:</u>	<u>MONTHLY PAYMENT:</u>	<u>ESTIMATED BALANCE:</u>
TOTAL MONTHLY DEBT:	\$	

Debt Eligibility Met? Yes No

.....
3. Credit:

- A. Obtained & reviewed credit reports: Yes No
- B. Do you have a Pre-Approval Letter from a Lending Institution? Yes No
(If yes, please attach.)

4. Miscellaneous:

- A. Is the property being purchased in the City of Rocky Mount:?
 Yes No
- B. How much "Down Payment Assistance" is needed (not to exceed \$25,000)?
\$ _____
- C. Address of Property to be purchased: _____

- D. Purchase price of Property to be purchased: \$ _____
- E. Proposal Mortgage Type? Conventional Non-Conventional
 FHA VA Other: _____
- F. Attach The Following: 2-Years Tax Returns with W-2's; 2-Months Bank Statements; 2-Months or 4 Check Stubs; Copy of Photo I.D.; and Pre-Approval Letter (if approved)
- G. Prospective Homebuyer Printed Full Name:

Signature: _____

Date presented to RMHA for Review? _____

By Office of RMHA: Approved Disapproved

Comments: _____

