Neighborhood and Business Development City Hall Room 005A, 30 Church Street Rochester, New York 14614-1290 www.cityofrochester.gov

#### HOME BUYER GRANT ASSISTANCE APPLICATION

Congratulations! By handing in this application and all required attachments to <a href="https://example.com/homebuyer@cityofrochester.gov">homebuyer@cityofrochester.gov</a>, you and/or your future household members are applying for assistance to purchase your first home in the City of Rochester.

Please note you may NOT put an offer in on a home until after you have been approved by the City of Rochester, or the house will <u>not be eligible</u> for grant assistance.

#### This application is for:

Program	Home Purchase Assistance Program (HPAP)	Employer Assisted Housing Initiative (EAHI)*	HOME Rochester
Amount of Closing Cost assistance	Up to \$3,000	Between \$2,000 - \$9,000 depending on employer	Up to \$6,000
House type	On private market	On private market	Rehabbed home through Greater Rochester Housing Partnership
Income Limit	120% MFI (see chart below)	None	Depends on house; max 120% MFI (see chart below)

<sup>\*</sup>Current EAHI partner employers: City of Rochester; Connected Communities, Eastman Kodak; Highland Hospital; Hillside Family of Agencies; Paetec Communications/Windstream; Rochester City School District; RIT, Rochester Management, Inc.; Rochester Regional Health; Stantec Consultant Services, Inc.; University of Rochester; Visiting Nurse Service; Xerox)

Questions? Email homebuyer@cityofrochester.gov, or call us at 585-428-6888.

# Income Limits (No income limits for EAHI program participants, but all documents are still required)

Household Size	80% MFI	120% MFI
1	\$42,800	\$64,200
2	\$48,900	\$73,350
3	\$55,000	\$82,500
4	\$61,100	\$91,700
5	\$66,000	\$99,000

Phone: 585.428.6888 Fax: 585.428.6229 TTY: 585.428.6054 EEO/ADA Employer (August 2019)

# **Application**

Ι, (	we)		,			
1.	identifies all of my/our house that this information I/we pro	hold income during the pas vided will be used to detern nay be eligible. The informa	tion and attached documentation			
2.	authorize The City of Roch	ester Home Buyer Service	es to check my/our credit			
	history by requesting a cre		_			
3.	involved with the program(s)	tion will not be shared with on with one with one without my/our prior approperties. If verification me/us. If verification we will be shared with one with the without the without the without the will be shared with one will be shared with one will be shared with the wi	other organizations beyond those val. Additional information and/or ation forms are needed I/we will			
4.		certify the information I/we have provided is complete, accurate and true. It will be				
			t I/we have falsified information of			
_	provided misleading informa					
5.	understand if I/we fail to at review and may return inco		ebuyer Services will not begin			
			<del></del>			
Sig	gnature	Print Name	Date			
(C	o-applicant) Signature	Print Name	Date			
Ho	ow should we contact yo Email Pho					
	o you prefer Spanish? _ o you want assistance in		uch as ASL, Karen, or			
ot	her?					
If ;	yes, what language?					

## 1. Household Info

#### A. Info about YOU:

B. Is

First Name	Middle	e Initial	Last Name
Home Address	Street	City	Zip
Best phone numb	per to reach you		
Email Address			
Social Security N	umber	Date of Birth	Age
All Current Emplo	yers & Number	of years at each (if less t	han 1 year, indicate start m
		of years at each (if less to the loans/deed with	
	oing to be on		
anyone else g	oing to be on Middle	the loans/deed wit	h you?
anyone else g	oing to be on Middle	the loans/deed with	h you? Last Name
First Name  Home Address S	oing to be on Middle	the loans/deed with	h you? Last Name

Name		Age			Relationship	
		2. Info Abo	ut You	Financ	ial Situation	
າat is yoເ	ır income?	•				
childcare), comp, welf	unemployme are assistand	-	Social Se y. Really	curity ben	nployment (even lefits, disability, chog that you get!	-
Recipient	Type of In	come Gros	ss month	y income	Will this contin	nue next year?
•		•	-		ld age 18 or older come status within	-
6 months.	-	lo or				
•		or do you now	•		ne City of Rochest	er?Yes
Ara vali na	w or will you	be receiving in	come fro	m rent?		
Are you no		After I move		If YES		
Now		Aitei i iiiove				

## B. What are your long term debts?

List all debts (car,	student loans, credit accounts, etc.)	
WHO PAYS	TYPE OF DEBT	PAYMENT \$/MONTH
-	ey saved (Cash Assets)?	
Current checking,	savings, credit union accounts	
Bank name	CURRENT BALANCE	
	_	
	_	
How much is or w	rill be available for a down payment?	
Tiow mach is of w	in be available for a down payment:	
When will it be av	ailable?	
w is your credit	: history?	
-	o your current situation.	
Monthly bill	payments are current and made in a	timely manner.
Some mont	hly bill payments have been late.	
Bankruptcy	has been filed. If yes Chap	ter 7 Chapter 13
There are o	utstanding Judgment Liens	Wages are garnished
I am using a	a credit monitoring service (Credit Ka	ırma, Discover, Lifelock, etc.)

#### 3. Other Information

# A. Tell us about you - is there anything we should know about your situation? If yes, please provide a short statement with your application.

#### **B.** Information for Federal Reporting.

The information requested below is for HUD reporting. The information is requested in order to monitor compliance with equal opportunity credit and fair housing practices. Please check which applies.

Applicant	Co-App	Race Hispanie	c origin
		Y	'es/No
		White	
		Black or African American	
		American Indian or Alaska Native	
		Native Hawaiian or Other Pacific Islander	
		American Indian or Alaska Native and White	
		Black or African American and White	
		American Indian or Alaska Native and Black or African American	
		Other, Multi Racial	
Household typ	е		
Single	Elderly	Single Parent Two Parent	
Other (pleas	se specify)		

#### REQUIRED DOCUMENT CHECKLIST

☐ Completed and signed application

Please give us **COPIES ONLY**. You will need your originals for your mortgage application or other programs. We cannot return your documents.

# Want that house fast? Incomplete info slows you down – make sure you check every box!

•	5						
Perso	Personal Identification						
	Social security card for everyone in household						
	Photo ID for household members age 18 and OVER						
	Birth certificate for households members UNDER age 18						
Incon	ne						
	Last 2 months' (8 weeks') consecutive pay stubs for all household members 18 or over						
	Copies of all other forms of income for everyone living in the household						
	Is anyone self-employed? Current year-to-date and prior year Profit and Loss statement is required.						
Supp	orting docs						
	Last 2 years' full tax returns AND W-2 statements for all jobs or income for all household members 18 or over (If you cannot locate or did not file tax returns, contact the IRS office at 1-800-829-1040) to obtain TAX and WAGE TRANSCRIPTS. If you did not file, submit proof of non-filing from the IRS for the past 2 years);						
	Bank statements: Last 3 months for all accounts						
Other							
	Letter of Eligibility from participating Employer if eligible (EAHI Program but NOT City of Rochester)						
	Copies of documents for any other grants or programs you have applied for						
	(Optional) Recent tri-merge credit report from lender or non-profit. The City of Rochester reserves the right to determine if the credit report is acceptable. If not, Homebuyer Services will run its own report.						
	(Optional but recommended) Information about your specific situation						

#### **Homebuyer Services Process**

- 1. Applicant: Complete and submit application with all required documentation
  - a. If application is not complete, Homebuyer Services cannot accept application.
  - b. City will review; currently a 4 week turnaround
- 2. Applicant: If eligible, meet for appointment with Program Manager to review grant agreement and receive approval (currently within 1-2 weeks after review)
  - a. Will be referred for pre-purchase education if not already completed
- 3. Applicant: Submit purchase offer denoting grant condition and other required documents (checklist provided on grant documents)
  - a. City will order HQS Inspection; depending on response time of seller/seller's realtor, typically within 2 weeks
  - b. City will request voucher and contract agreement (if all prior documentation is current and in file)
    - Applicant will come in to sign/notarize agreements or may ask to have them mailed/emailed to themselves directly
  - c. If property is a multi-family, applicant will also need to take Operating Rental Property course
  - d. Applicant will apply for mortgage with preferred lender (concurrent with HQS inspection)
    - i. If Applicant is going through EAHI program, they may be required to work with an employer-approved lender
- 4. Applicant: Submit Mortgage commitment and Closing Cost Estimate documents denoting grant condition
- 5. Applicant: City will request final grant approval and funds (usually 3 weeks) if all previous requirements are met and HQS inspection has passed.
- 6. Once funds are available, City Law Department will contact Applicant's attorney. Applicant's and Seller's attorneys will schedule closing as well as any final lender requirements.

Note: typical timeline between Purchase Offer received by Homebuyer Services and a closing date is 8 weeks.

Please contact 428-6888 or HomeBuyer@cityofrochester.gov with any questions.



Bureau of Business and Housing Development

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### **Authorization for Release of Information**

I/we& (if applicable	<del>)</del>
authorize The City of Rochester Homebuyer Services	program and its representatives to speak with
	_ (name and relationship to Borrower/CoBorrower)
and to provide this person documentation on my/our bel authorize these parties to discuss my loan and/or applica Homebuyer Services program.	
The City of Rochester agrees to maintain the confidential authorize the City of Rochester and/or lender and/or submit my personal information to the entities funding purposes of program evaluation and monitoring.	servicer handling my loan and/or application to
I further authorize the City of Rochester and/or lender and to access my credit report file(s) for debt and expense versions.	•
This authorization will not be valid unless signed below remain valid until revoked in writing by any borrower or or	•
Applicant Name:	
(if applicable) Co-Applicant Name:	
Co-Applicant (signed)	Date