

APPLICATION PACKET

To apply for the Mortgage Assistance Program (MAP), complete the following steps:

- 1) Schedule and complete pre-purchase and budget counseling with Homsite. All parties on note and Mortgage must attend.
- 2) Complete the Fannie Mae worksheets, 1-4 and 9, and turn in to Homsite.
- 3) Complete the following paperwork, sign, and turn in to Homsite.
 - A) Application form (with gross family income calculation sheet.)
 - B) Debarment, suspension form.
 - C) Release of information form.
 - D) Conflict of interest form.
 - E) Verification of employment form.
 - F) Lead paint warning acknowledgment form.
 - G) Income Eligibility Certification.
 - H) HQS Disclaimer form.
- 4) Provide the following documentation to go with the preceding forms:
 - A) Proof of income, including current pay stubs and the most current IRS 1040 tax return.
 - B) Third party verification of income.
 - C) Proof of 1/2 of downpayment (savings or gift letter).
 - D) Risk- Assessment of property.

CAYUGA COUNTY HOMESITE DEVELOPMENT CORPORATION
60 CLARK STREET
AUBURN, NEW YORK 13021
(315) 253-8451

DHCR (HOME) Mortgage Assistance Program

NAME: _____ DATE APPLICATION COMPLETED: _____

ADDRESS: _____

_____ HOME PHONE #: _____

(BEST TIME TO CALL): _____

ALL MEMBERS OF HOUSEHOLD:

| <u>LAST NAME</u> | <u>FIRST NAME</u> | <u>AGE</u> | <u>SEX</u> | <u>SOC.SEC. #</u> | <u>RELATIONSHIP</u> |
|------------------|-------------------|------------|------------|-------------------|---------------------|
| _____ | _____ | _____ | _____ | _____ | <u>SELF</u> |
| _____ | _____ | _____ | _____ | _____ | <u>SPOUSE</u> |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

PRESENT EMPLOYER(S) (YOURSELF): _____

_____ WORK PHONE #: _____

PRESENT EMPLOYER(S) (SPOUSE): _____

_____ WORK PHONE #: _____

IS IT POSSIBLE TO CALL YOU AT WORK? _____

MEMBERS OF HOUSEHOLD WHO RECEIVE INCOME (from any source, for example, SSI, SSD, CHILD SUPPORT):

| <u>NAME</u> | <u>AMOUNT</u> | <u>SOURCE</u> |
|----------------|---------------|---------------|
| _____ (SELF) | _____ | _____ |
| _____ (SPOUSE) | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

TOTAL YEARLY GROSS FAMILY INCOME: _____

Note: Based on **current** family income projected for one year (52 weeks).

ARE YOU A FIRST TIME HOMEOWNER? YES _____ NO _____

DO YOU CURRENTLY OWN OR HAVE A PART INTEREST IN ANY PROPERTY?
 YES _____ NO _____

HAVE YOU OWNED OR HAD A PARTIAL INTEREST IN ANY PROPERTY IN THE PAST YEAR?
 YES _____ NO _____

ARE YOU A PARTNER OR PART OWNER OF A BUSINESS? YES _____ NO _____

I hereby certify that all of the information I have furnished on this application is true, correct and complete and is given for the purpose of obtaining a mortgage assistance deferred loan. I hereby grant permission to Cayuga County Homesite Development Corporation to verify any or all of this information. I understand that these grants are subject to recapture if I sell or no longer live in the home for the first sixteen to thirty (16 to 30) years from the closing date. I hereby agree to notify Homsite promptly if I decide to move from the home within the first sixteen to thirty (16 to 30) years, and to certify to Homsite, in writing, on an annual basis, my continued residency. I understand that the names of recipients are public record.

SIGNATURE: _____ SPOUSE'S SIGNATURE: _____

OFFICE USE ONLY

U.S. DEPARTMENT OF AGRICULTURE

Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the proposed covered transaction..

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

- (1) The prospective primary participant certifies to the best of its knowledge, and belief, that it and its principals:
- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity. (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

CAYUGA COUNTY HOMSITE DEVELOPMENT CORP.
Organization Name

HUD HOME PROGRAM
PR/Award Number or Project Name

Name and Title of Authorized Representative

Signature

Date

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied to the Mortgage Assistance Program through Cayuga County Homsite Development Corporation. As part of the application process, the Cayuga County Homsite Development Corporation may verify information contained in my/our application and other documents required in connection with the deferred loan, either before the deferred loan is closed or as part of its quality control program.
2. I/We authorize you to provide Cayuga County Homsite Development Corporation any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns and supporting schedules.
3. A copy/facsimile of this authorization may be accepted as the original. .
4. Your prompt reply to Cayuga County Homsite Development Corporation is appreciated, 60 Clark Street, Auburn, New York 13021, Attention: Steve Adams.

Borrower's Signature

Borrower's Name

Social Security Number

Borrower's Signature

Borrower's Name

Social Security Number

CONFLICT OF INTEREST CERTIFICATION

Participation in the Mortgage Assistance Program is prohibited for employees or Board Members of Cayuga County Homsite Development Corporation and their immediate families, for elected officials and their immediate families, for City of Auburn employees and their immediate families who exercise any function or responsibilities with respect to HUD grants or HUD programs.

As an applicant for the Mortgage Assistance Program, I hereby affirm that I have read and understand the foregoing prohibitions and certify that I am not a member of any of the prohibited classes.

Applicant Signature

Applicant Signature

I, _____ having talked to the above applicant (s) and verified their employment, do to the best of my knowledge attest that the above signed certification is true and accurate.

Homsite Representative

City of Auburn Representative

**CAYUGA COUNTY HOMSITE DEVELOPMENT CORPORATION
60 CLARK STREET
AUBURN, NEW YORK 13021**

98
Attachment 7-1

Date: _____

RE: _____

Request for Verification of Employment

Regulations require us to verify employment of household/family members for the purpose of determining the family's eligibility for rental assistance.

Thank you,

Signature

Part 1 – Verification of Employment

| | | | |
|---------------------|-----------------------|--|---|
| 1. Present Position | 2. Date of Employment | 3. Probability of Continued Employment | 4. If overtime or Bonus, is its continuance likely? N/A Overtime ___Yes ___No Bonus ___Yes ___No |
|---------------------|-----------------------|--|---|

| | | |
|---------------------|--|---|
| 5. Current Base Pay | Anticipated Increase (___) Yes (___) No | Effective _____ Amount \$ _____ per _____ |
| [___] Annual | [___] Monthly | [___] Hourly* (see below #8) |
| | | [___] Weekly [___] Other (specify) |

| | | | | | |
|--|-----------|--------------------------------|-----------------|---------------------------------|-----------------|
| 6a. Earnings Year-to-date Base Pay | Past Year | 7. For Military Personnel Only | | | |
| \$ _____ | \$ _____ | Taxable Pay (Monthly Amount) | | Nontaxable Pay (Monthly Amount) | |
| b. Earnings Year-to-date Overtime | Past Year | Base Pay | Career C Pay | Quarters | YHA |
| \$ _____ N/A | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| c. Earnings Year-to-date Bonus | Past Year | Pro Pay | Other (Specify) | Rations | Other (Specify) |
| \$ _____ N/A | \$ _____ | \$ _____ | \$ _____ | | |
| d. Earnings Year-to-date (Incentive Pay, Commissions, Tips, etc.) | Past Year | Flight Pay | | Clothing | |
| \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

*8. Remarks: (If paid hourly, please indicate average hours worked each week during current and past year.)

Part II - Certification

This form should be completed and signed by a bona fide representative of the employer such as the timekeeper, bookkeeper or accountant. **IN NO EVENT SHOULD IT BE COMPLETED BY THE EMPLOYEE.** Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy.

Signature/Title _____ Phone _____ Date _____

Please return to:

Cayuga County Homsite Development Corporation
60 Clark Street
Auburn, New York 13021
315-253-8451



To: Owners, and Tenants & Purchasers
Of Housing Constructed
Before 1978

Notification

Watch Out For Lead-Based Paint

This property was constructed before 1978. There is a possibility it contains lead-based paint. Please read the following concerning lead-based paint poisoning.

Sources of Lead Based Paint

The interiors of older homes and apartments often have layers of lead-based paint on the walls, ceilings, window sills, doors and door frames. Lead-based paint and primers may also have been used on outside porches, railings, garages, fire escapes and lamp posts. When the paint chips, flakes or peels off, there may be a real danger for babies and young children. Children may eat paint chips or chew on painted railings, window sills or other items when parents are not around. Children can also ingest lead even if they do not specifically eat paint chips. For example, when children play in an area where there are loose paint chips or dust particles containing lead, they may get these particles on their hands, put their hands into their mouths, and ingest a dangerous amount of lead.

Hazards of Lead-Based Paint

Lead poisoning is dangerous - especially to children under the age of seven (7). It can eventually cause mental retardation, blindness and even death.

Symptoms of Lead-Based Paint Poisoning

Has your child been especially cranky or irritable? Is he or she eating normally? Does your child have stomachaches and vomiting? Does he or she complain about headaches? Is your child unwilling to play? These may be signs of lead poisoning. Many times though, there are no symptoms at all. Because there are no symptoms does not mean that you should not be concerned if you believe your child has been exposed to lead-based paint.

Advisability and Availability of Blood Lead Level Screening

If you suspect that your child has eaten chips of paint or someone told you this, you should take your child to the doctor or clinic for testing. If the test shows that your child has an elevated blood lead level, treatment is available. Contact your doctor or local health department for help or more information. Lead screening and treatment are available through the Medicaid Program for those who are eligible. If your child is identified as having an elevated blood lead level, you should immediately notify the Community

Development or other agency to which you or your landlord is applying for rehabilitation assistance so the necessary steps can be taken to test your unit for lead based paint hazards. If your unit does have lead-based paint, you may be eligible for assistance to abate that hazard.

Precautions to Take to Prevent Lead-Based Paint Poisoning.

You can avoid lead-based paint poisoning by performing some preventative maintenance. Look at your walls, ceilings, doors, door frames and window sills. Are there places where the paint is peeling, flaking, chipping, or powdering? If so, there are some things you can do immediately to protect your child:

- (a) Cover all furniture and appliances;
- (b) Dust containing lead can be a health hazard. DO NOT vacuum loose paint. Sweep and damp mop;
- (c) Sweep up all pieces of paint and plaster and put them in a paper bag or wrap them in newspaper. Put these packages in the trash can. DO NOT BURN THEM;
- (d) Do not leave paint chips on the floor in window wells. Damp mop floors and window sills in and around the work area to remove all dust and paint particles. Keeping these areas clear of paint chips, dust and dirt is easy and very important, and;
- (e) Do not allow loose paint to remain within your children's reach since children may pick loose paint off the lower part of the walls.

Homeowner Maintenance and Treatment of Lead-based Paint Hazards

As a homeowner, you should take the necessary steps to keep your home in good shape. Water leaks from faulty plumbing, defective roofs and exterior holes or breaks may admit rain and dampness into the interior of your home. These conditions damage walls and ceilings and cause paint to peel, crack or flake. These conditions should be corrected immediately. Before repainting, all surfaces that are peeling, cracking, chipping or loose should be thoroughly cleaned by scraping or brushing the loose paint from the surface, then repainted with two (2) coats of nonlead paint. Instead of scraping and re-painting, the surface may be covered with other material such as wallboard, gypsum, or paneling.

Beware that when lead-based paint is removed by scraping or sanding, a dust is created which may be hazardous. The dust can enter the body either by breathing it or swallowing it. Use of heat or paint removers could create fumes which may cause poisoning if inhaled over a long period of time. Whenever possible, the removal of lead based paint should be done in a place when there are no children or pregnant woman on the premises. Simply painting over defective lead based paint surfaces does not eliminate the hazard. Remember that you as an adult play a major role in the prevention of lead poisoning. Your actions and awareness to the lead problem can make a big difference.

Tenant and Homebuyer Responsibilities

You should immediately notify the management office or the agency through which you are purchasing your home if the unit has flaking, powdering or peeling paint, water leaks from plumbing, or a defective roof. You should cooperate with that office's efforts to repair the unit.

_____ I have received a copy of the Notice entitled "Watch Out for Lead Paint Poisoning".

Date

Print Full Name

Signature



WATCH OUT FOR LEAD PAINT POISONING

PLEASE READ CAREFULLY:

Your apartment or house may contain substantial amounts of lead based paint, even where HUD regulations regarding lead based paint are met. HUD regulations do not require that properties be made free of lead based paint.

Children get lead poisoning when they eat bits of paint that contain lead. If a child eats enough lead paint, his brain will be damaged. He may become mentally retarded or even die.

Older houses often have layers of lead, paint on the walls, ceilings, and woodwork. When the paint chips off or when the plaster breaks, there is real danger for babies and young children. Outdoors, lead paints and primers may have been used in many places, such as walls, fences, porches, and fire escapes.

If you have seen your child putting pieces of paint or plaster in his mouth, you should take him to a doctor, clinic, or hospital as soon as you can. In the beginning stages of lead poisoning, a child may not seem really sick. Do not wait for signs of poisoning.

Of course, a child might eat paint chips or chew on a painted railing or windowsill while parents aren't around. Has your child

been specially cranky? Is he eating very little? Does he throw up or have stomach aches often? These could be signs of lead poisoning. Take him to a doctor's office or to a clinic.

Be sure to tell the rest of your family and people who babysit for you about the danger of lead poisoning.

Look at your walls and ceilings and woodwork. Are there places where the paint is peeling?

- Get a broom or stiff brush and remove all loose pieces of paint from walls, woodwork, and ceilings. Sweep up all the pieces of paint and plaster. Put them in a paper bag or wrap them in newspaper and put the package in the trash can.
- Always keep the floor clear of loose bits of paint and plaster.
- Children will pick loose paint off the walls, so be extra careful about keeping the lower parts of the walls free of loose paint.
- You can cover up at least the lower part of walls by moving heavy furniture against them. If you want to know more about how to keep your child safe from lead poisoning, talk to your doctor, public health nurse, or social worker at the clinic or health department.

CAYUGA COUNTY

Homsite Development Corporation

60 CLARK STREET • AUBURN, NEW YORK 13021-3387 • 315/253-8451 FAX: 315/255-6114

INCOME ELIGIBILITY CERTIFICATION

I understand that eligibility for the Mortgage Assistance Program (MAP) is determined at the time of closing. I understand that I will have to sign an affidavit at the time of closing that my income has not changed since application. In addition, understand that if six months have passed since my initial application for the program, and closing has not yet occurred, that I will have to provide new proofs of income and have my eligibility re-certified. I understand that I will have to have my eligibility re-certified each six months, provided that closing has not yet taken place. I understand that I will still have to sign the affidavit at closing.

I understand that this means that I must disclose to Homsite any changes in income or household status that occurs between the time of application to closing. Changes in income would be things like; raises, bonuses, overtime, new Job, spouse going to work, etc. Changes in household status means; getting married, losing or gaining custody of a child, etc.

I hereby certify that I have read the foregoing paragraphs. I further certify that any portion of the foregoing paragraphs that I do not understand have been explained to me and that I now understand my obligations under this certification.

Client Signature & Date

Client Signature & Date

Witness

CAYUGA COUNTY

Homsite Development Corporation

60 CLARK STREET • AUBURN, NEW YORK 13021-3387 • 315/253-8451 FAX: 315/255-6114

I understand that the HQS inspection conducted by Homsite is a MINIMUM property standard, and conducted solely for PROGRAM purposes. The HQS inspection is not for my benefit, nor does it provide me with any useful information in making a judgment about the condition of the house or in making a decision to buy the house. I understand that it is my responsibility to inspect the property and make the purchase decision on grounds other than the HQS inspection. I understand that the program and Homsite do not in any way warrant the condition of the house or property

I have read the above paragraph and had it explained to me. I certify that I now understand the content of the above paragraph and my responsibility for inspection and purchase decision. In addition, a lead risk assessment must be conducted by Homsite or an outside firm (Buyer's choice) for a fee to be paid at closing.

Homeowner Signature & Date

Homeowner Signature & Date

Witness