

# HCRIH HOMEBUYERS APPLICATION

Taylor County Housing Authority has received funding through the State of Wisconsin's to help low to Moderate income households purchase a home with Homebuyers Assistant Loans.

**This is a loan! YOU WILL BE REQUIRED TO PAY BACK, when you no longer use the home as your primary residence, sell the home or you refinance your mortgage for something Taylor County Housing Authority can not subordinate to. At that time your loan will be do in full.**

**Homebuyers must complete home buyers education course prior to closing. We do give the course, so let us know right away if you have not taken the home buyers course so we can set up a date a time.**

**Purchase loan interest rates shall not exceed the WHEDA interest rate by more than 2 %.**

To be eligible for these loans, your gross income (before taxes) must be at or below the following limits.

Number of People in Household	Yearly Income Limits
1.....	30,750.00
2.....	35,100.00
3.....	39,500.00
4.....	43,900.00
5.....	47,000.00
6.....	50,900.00
7.....	54,450.00
8.....	57,950.00

Please bring in a copy of your Federal Tax return for the most resent year for every adult in the home.

# HCRIH APPLICATION

Home buyers

Date Received: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Co-applicant: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_

HOW MANY PEOPLE WILL LIVE IN THIS HOME: \_\_\_\_\_

*List all members planning to live in the unit (include yourself)! List the incomes of all persons 18 years of age or older. Income includes, but is not necessarily limited to, income from all gross wages, salaries, commissions; net income from self-employment, net income from the operation of real property; interest and dividend income; Social Security, SSI, Pensions, AFDC, alimony, child support, and other benefit income.*

If you are uncertain about including something as income, please list it below and the Community Development Department will advise you about it.

<b>First Name, Last Name</b>	<b>M.I.</b>	<b>S.S.#</b>	<b>Source of Income &amp; Address</b>	<b>Monthly Gross Income</b>

CHILD SUPPORT: County \_\_\_\_\_ Address \_\_\_\_\_ Amount \_\_\_\_\_

Other Income: (write in amount for all that apply)

SSI \$ \_\_\_\_\_ monthly amount  
AFDC \$ \_\_\_\_\_ monthly amount  
Pension \$ \_\_\_\_\_ monthly amount

Social Security \$ \_\_\_\_\_ monthly amount  
Child Support \$ \_\_\_\_\_ monthly amount  
Unemployment \$ \_\_\_\_\_ monthly amount

Other Income \_\_\_\_\_ Monthly Amount \$ \_\_\_\_\_

<b>ASSETS:</b>	<b>Name of Bank/Credit Union &amp; Address</b>	<b>Account Balance</b>
Checking:		\$
Savings:		\$
Stocks/Bonds:		\$
Other:		\$

Have you found a house you wish to purchase?

\_\_\_\_\_ Yes. Address: \_\_\_\_\_

\_\_\_\_\_ NO

If no, what is the timeframe within which you would like to acquire a home? \_\_\_\_\_.

Name of financial institution through which home would be financed?

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Address of Bank: \_\_\_\_\_.

Are you pre-approved for a loan?

\_\_\_\_\_ Yes. Amount: \_\_\_\_\_

\_\_\_\_\_ NO

**(BRING IN COPY OF LETTER FROM BANK FOR PRE-APPROVAL)**

Amount of money your household can contribute toward the down payment on a home:

\$ \_\_\_\_\_

**CONFLICT OF INTEREST**

A program requirement is that the applicant identify and disclose any potential conflict of interest. Conflict of interest may arise if an applicant for a loan is related by family or business ties to any employee, elected or appointed official or agent of a unit of local government who exercises any functions or responsibilities with respect to the Taylor County Housing Authorities Programs. On the next page is a list of people whose work is related to the Housing Authorities programs. Please indicate in the space provided if you have family or business ties with any of those persons.

Do you have any family or business ties to any of the following people?

OFFICE	NAME OF OFFICIAL	No Ties	Business Ties	Family Ties	Please explain any relationship that exists
TCHA Board	Charles Webster				
	Al Beadles				
	George Southworth				
	Tammy Mann				
	Joe Tomandl				
<b>County Board</b>	Jim Metz				
Dist. 1	Fred Parent				
Dist. 2	James Seidl				
Dist. 3	Mary Bix				
Dist. 5	John Werner III				
Dist. 6	Mike Roiger				
Dist. 7	George Southworth				
Dist. 8	Charles Zenner				
Dist. 9	Diane J. Albrecht				
Dist. 10	Dave Bizer				
Dist. 11	Mary Haider				
Dist. 12	Rollie Thums				
Dist. 13	Lester B. Lewis				
Dist. 14	Allen Beadles				
Dist. 15	Wayne Lato				
Dist. 16	Joseph Sweda				
Dist. 17	David Krug				
<b>Steering</b>					
<b>TCHA Staff</b>	Shelia Nice				
	Jennifer Gustum				
<b>County Clerk</b>	Bruce Strama				
<b>County Corp</b>	Steve Anderson				

No provision of a marital property agreement (including a Statutory Individual Property Agreement pursuant to Sec. 766.587, Wis. Stats.), unilateral statement classifying income from separate property under Sec. 766.59, or court decree under Sec. 766.70 adversely affects the creditor unless the creditor is furnished with a copy of the document prior to the credit transaction or has actual knowledge of its adverse provisions at the time the obligation is incurred.

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Signature of Applicant

Date

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Signature of Applicant

Date

You are not required to answer the questions below. If you choose not to answer them, please check this box

Age of Applicant: \_\_\_\_\_

Racial/Ethnic Background, Check One:

- |   |  |
|---|--|
| <input type="checkbox"/> White                                  | <input type="checkbox"/> American Indian/Alaskan Native & White                  |
| <input type="checkbox"/> Black/African American                 | <input type="checkbox"/> Asian & White   |
| <input type="checkbox"/> Asian                                  | <input type="checkbox"/> Black/African American & White                          |
| <input type="checkbox"/> American Indian/Alaskan Native         | <input type="checkbox"/> American Indian/Alaskan Native & Black/African American |
| <input type="checkbox"/> Native Hawaiian/other Pacific Islander | <input type="checkbox"/> Hispanic  |

**APPLICANT'S CERTIFICATION:**

I/WE certify that the above information is true, accurate and complete to the best of my/our knowledge. I/We understand that giving false information is considered fraud and will result in loss of program benefits.

X \_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

# GENERAL RELEASE OF INFORMATION

Taylor County Housing Authority  
224 S. Second Street, Medford, WI 54451  
(715) 748-1456

To Whom It May Concern:

I/We have applied for a loan or housing assistance through Taylor County Housing Authority and hereby authorize you to release the requested information listed below.

1. Previous and past employment history including employer, period employed, title of position, income, and hours worked.
2. Disability payments, Social security, and pension funds.
3. Child support, unemployment, public assistance and any other source of income.
4. Any information deemed necessary in connection with a consumer credit report or a real estate transaction.
5. Current and previous Circuit Court information in regards to the open to the public records law that may help determine the decision on assistance.

This information will be for the confidential use of Taylor County Housing Authority in determining my/our eligibility for a mortgage loan, housing assistance or to confirm information I/We have supplied. Please complete the attached verification request.

A photo or fax copy of this document may be deemed to be the equivalent of the original and may be used as a duplicate original. The original signed release of information form will be kept on record with Taylor County Housing Authority.

\_\_\_\_\_  
Last, First, M.I

\_\_\_\_\_  
Last, First, M.I.

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

X \_\_\_\_\_  
Signature

X \_\_\_\_\_  
Signature

## NOTICE TO BORROWERS:

This notice to you is required by the Right to Financial Privacy Act of 1978. The Department of Housing and Urban Development, Federal Housing Administration or Veterans Administration have a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transactions will be available to HUD, FHA, or VA without further notice or authorization but will not be disclosed or released by this institution to another government agency without your consent except as required by law.