

APPLICATION FOR HOUSING ASSISTANCE

Date Stamp Received

Rev. 11.1.16

Borrower Name: _____

Co-Borrower/Spouse Name: _____

*Only list a co-applicant if they are on the first mortgage loan. Circle the one that applies.

Phone Number: _____

Email: _____

DO NOT WRITE BELOW: FOR OFFICE USE ONLY

FILE # _____

INCOME LEVEL:

____ Extremely Low (30%) ____ Very Low (50%) ____ Low (80%) ____ Moderate (120%)

Purchase Price: \$ _____

Maximum Purchase Price limit: \$300,000

3339 East Tamiami Trail, Suite 211, Naples, Florida 34142

Phone: 239-252-HOME (4663)

Fax: 239-252-6542

www.colliergov.net/housing

Re: Collier County SHIP Purchase Assistance Program

Thank you for your interest in the Collier County SHIP Purchase Assistance program. Funds are available on a first come/ first qualified basis, upon funding availability, for first-time homebuyers who meet the program requirements.

Please include all of these items along with your application and deliver or mail to:

**Collier County Community and Human Services
Attn: SHIP Program
3339 East Tamiami Trail, Suite 211
Naples, Florida 34112**

1. First mortgage loan pre-approval letter from lender (if applicable)
2. 30-days pay stubs (For all employed household members)
3. Current Social Security Award letter or any other Benefits received by yourself or family member living in the house. (401K, FRS, IRA, Retirement, Pension, etc.)
4. Six months most recent checking's account bank statements (all pages, even if blank). (For all household members, including minors)
5. One month most current savings account bank statement (all pages, even if blank). (For all household members, including minors)
6. Most current IRS Tax Return and W-2s or 1099 (all pages, even if blank).
7. For Self-employed information: 2 years of IRS 1040 and W-2s or 1099, Schedule C, and Profit & Loss (all pages, even if blank).
8. Copy of your Sales Contract and Escrow check.
9. Proof of Residency- Copy of homeowner's driver's license **and** birth certificate **or one of the following**; US Citizenship Certificate; U.S Passport; Permanent Resident Card (Borrower/Co-borrower and Spouses)
10. Copies of each household member Social Security Card.

Note: Third- Party Verifications must be signed by all adult household members, where applicable.

Note: Dependents: If you show a child as household member, but do not claim them as a dependent on your tax returns, you must provide a court order showing that you are the primary custodian of that child and provide school records that show child resides with you at your current residence.

Note: Explanation of Deposits: If there are additional deposits identified on your bank account statements that do not directly relate to your employment income, CHS staff will require an explanation of deposit form to be completed for each deposit.

Note: Self employed/ 1099 employee: CHS will require you complete a profit and loss statement. You must provide all business bank accounts for the last six months and two years of your business and personal filed tax returns (all schedules).

Additional Forms as applicable;

Zero Income Declaration: an adult household member who has no income.

Child Support Affidavit: when minor children are part of household.

Gift Letter: one time gift payment received from person not part of household.

Regular Cash Contributions: additional cash income earned and not related to employment income.

Same Name Affidavit: different or variation of name on personal documents (tax returns, bank accounts, pay stubs, driver's license)

Student Status Declaration: a full-time student over the age of 18 who is not the head, co-head or spouse.

Collier County Community and Human Services

APPLICATION FOR HOUSING ASSISTANCE

HOUSEHOLD INFORMATION

	Applicant/Head of Household	Co-Applicant/Spouse
Full Name		
Social Security Number		
Date of Birth/Age		
Marital Status		
Race/ Ethnicity		
Current Address		
City	State	Zip
		How long at current address:
Phone Number and E-mail:		

Other Household Members: (Please list all member of the household not on first mortgage loan)

Name(s)	Date of Birth/Age	Last four SS#	Relationship to Head of Household	Full Time Student over 18 years old Yes/No
1.				
2.				
3.				
4.				
5.				
6.				

Is anyone in the household: Elderly Farm Worker Disabled Homeless Developmentally Disabled

Borrower/Co-Borrower/Spouse currently, or in the past three years owned a home? **Circle one: Yes or No**

Are you or is any member of your family an employee of Collier County Board of County Commissioners?

Circle one: Yes or No If yes, please explain (Name/Relationship/Department):

Number of persons in the household who are:

Race	Non-Hispanic	Hispanic
White		
Black or African American		
American Indian or Alaskan Native		
Asian		
Pacific Islander		
Other/Multi-racial		

Female Head of Household: <input type="radio"/> Yes <input type="radio"/> No

Applicant Employment Information: (Please list most recent employment)

Employee Name:	Employer Name:	
Position:	Supervisor:	
Address:		
Phone:	Pay Rate:	Time Employed:
Annual Income (gross salary, overtime, tips, bonuses, etc.	\$	Pay Frequency:

Co-Applicant/Spouse/ Household Member (person included on the first mortgage application) Employment Information: (Please list most recent employment)

Employee Name:	Employer Name:	
Position:	Supervisor:	
Address:		
Phone:	Pay Rate:	Time Employed:
Annual Income (gross salary, overtime, tips, bonuses, etc.	\$	Pay Frequency:

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Other Sources of Income: (For ALL household members 18 and over that are not included on the first mortgage application, list business or rental net income, child support, alimony, Social Security, pension, unemployment or Workers Compensation, welfare, payment, etc)

Name	Type of Income	Gross Annual Income
1.		
2.		
3.		
4.		
Total \$		

Assets and Asset Income: (For ALL household members including minors, list checking and saving accounts, IRS, CD, Bonds, Stocks, Equity in Properties, etc)

Type of Asset (Checking's, Saving, Money Market, 401K, Retirement, IRA accounts, Pension funds, Personal Property, Capital Investments, Stocks, Bonds, Treasury Bills, Whole Life Insurance Policy)	Name of Institution/Bank/Agency	Account #	Current Cash Value (\$)
Total \$			

ASSET ADDENDUM

(One form to be signed by each adult household member)

Assets include: Please check all that apply;

____ Cash held in savings accounts

____ Certificates of Deposit

____ Cash held in checking accounts

____ Money market funds

____ Trust funds

____ IRA accounts

____ Stocks, Bonds, Treasury bills

____ Retirement and pension funds

____ Equity in real estate and other capital investments

____ Whole Life Insurance

____ Lump sum receipts (i.e. lottery winnings, insurance settlements, etc.)

____ Personal property held as an investment (i.e. gem or coin collections, paints, antique cars, etc.). *Do not include necessary personal property such as furniture, automobiles and clothing*

____ Other; please list: _____

____ Other; please list: _____

Sign either A. or Section B.

A. I hereby state that all sources of assets, as indicated above were provided as part of the SHIP Purchase Assistance application

Signature

Print Name

Date

B. I hereby state that I do not have any assets at this time.

Signature

Print Name

Date

AFFIDAVIT OF APPLICANT

APPLICANT NAME: _____

CO-APPLICANT/ SPOUSE/ HOUSEHOLD MEMBER NAME: _____

*Only list a co-applicant if they are on the first mortgage loan. Circle the one that applies.

I/we, applicant(s) for assistance through the Collier County SHIP program, do hereby attest and say that:

- (1) I/we qualify as first-time homebuyer based upon the following statement (**check one**):
 - a. I/we have not had ownership interest in a home during the past three years
 - b. I am a single parent with children under the age of 18 who has been divorced and displaced
 - c. I am a displaced victim of domestic violence
 - d. I/we have been displaced as the result of some governmental action
- (2) I/we have been pre-qualified for first mortgage financing by a bank or lender institution.
- (3) I/we shall complete the required homebuyer education training prior to receiving final approval for participation in the SHIP program.
- (4) I/we have not had any of the following during the previous three years:
 - a. Principal residence or other real property foreclosed upon
 - b. Given a deed-in-lieu of foreclosure
 - c. Filed Chapter 7 or Chapter 13 bankruptcy
 - d. Presently delinquent on a federal tax liability
 - e. Presently delinquent on Collier County property taxes

DECLARATIONS

	Applicant		Co-Applicant/ Spouse/ Household Member	
	Yes	No	Yes	No
a. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you been awarded child support?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is any part of the down payment borrowed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are you a co-maker or endorser on a note?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you a U.S. citizen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Are you permanent resident alien?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Applicant (Please type or print name) (Date)

Co-Applicant (Please type or print name) (Date)

**STATE OF FLORIDA
COUNTY OF COLLIER**

I hereby certify that on this day, before me, an officer duly authorized in the state aforesaid and in the county aforesaid to take acknowledgements, personally appeared _____ and _____ to me to be the person(s) described in and who executed the foregoing instrument and acknowledged be me that (he/she/they) executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State aforesaid this _____ day of _____, 20____.

(Seal)

Notary Public's Signature:

My Commissioner Expires: _____

Collier County SHIP Purchase Assistance Fact Sheet

The Collier County Community and Human Services (CHS) is offering Purchase Assistance under the **State Housing Initiatives Partnership Program (SHIP)** which provides down payment and closing costs assistance to eligible first-time homebuyers interested in purchasing a home within unincorporated Collier County, the City of Naples, the City of Marco Island or Everglades City with a maximum purchase price not to exceed \$265,000. Homebuyer must also meet the following:

- ❖ Complete a County approved HUD certified Homebuyer Education Workshop
- ❖ Must be pre-qualified for a first mortgage loan
- ❖ Must be a first-time homebuyer as defined; an individual and his or her spouse who have not owned a home during the three-year period prior to purchase of a home with assistance under the State Housing Initiatives Partnership Program (SHIP). The term first-time homebuyer also includes an individual who is a displaced homemaker or single parent.
- ❖ Occupy the home being purchase as their primary residence during the term of the loan.

In order to receive this assistance the gross total household income (anticipated for next 12 months) cannot exceed the income limits adjusted for household size set forth below:

2016 Income Limits			
Family Size & Extremely Low Income	Family Size & Very Low Income	Family Size & Low Income	Family Size & Moderate Income
1 Person \$13,080 2 Person \$16,020 3 Person \$20,160 4 Person \$24,300 5 Person \$28,440 6 Person \$32,580	1 Person \$23,000 2 Person \$26,300 3 Person \$29,600 4 Person \$32,850 5 Person \$35,500 6 Person \$38,150	1 Person \$36,800 2 Person \$42,050 3 Person \$47,300 4 Person \$52,550 5 Person \$56,800 6 Person \$61,000	1 Person \$55,200 2 Person \$63,120 3 Person \$71,040 4 Person \$78,840 5 Person \$85,200 6 Person \$91,560

If approved as very-low, low or moderate-income, applicants may be eligible for assistance towards down payment and closing cost for the purchase of a home located within Collier County. **The SHIP award will be dependent on income level and funds available.** Funds are available on a first come/ first qualified basis, upon funding availability, for first-time homebuyers who meet the program requirements.

Award amount can change if more than one funding source is used to assist with the purchase of the home.

Funds will be issued as a zero interest, deferred payment loan, which does not require monthly payments. The SHIP loan is payable and due upon sale or transfer of property. As long as the borrower(s) continue to maintain the assisted property as their primary residence, no repayment is required. No repayment is due if sold after fifteen (15) years.

Applicant Acknowledgment of Terms and General Release Authorization:

I/we acknowledge that my/our application does not guarantee that I/we will be approved for assistance in conjunction with the Collier County SHIP Purchase Assistance Program and/or permanent mortgage financing through the lender making this referral. I authorize the lender or its designated agent to release any information necessary to determine my/our eligibility for the program to Collier County CHS and/or designated agents of such. Any records submitted to the SHIP program will become public record and subject to disclosure.

 Applicant Signature Print Name Date

 Co-applicant/ Spouse/ Household Member's Signature Print Name Date

*Only list a co-applicant if they are on the first mortgage loan. Circle the one that applies.

**PURCHASER(S) ACKNOWLEDGEMENT OF TERMS AND CONDITIONS TO
COLLIER COUNTY
STATE HOUSING INITIATIVES PARTNERHIP PROGRAM**

Purchaser(s) acknowledge by signing this statement that they are fully aware of and intend to abide by the following terms and conditions:

- ❖ Will occupy this property as my/our primary homesteaded residence, maintain said residence and at all times have adequate homeowners/fire coverage and flood insurance, as applicable.
- ❖ Will allow Collier County and/or State Monitors access to this home during normal business hours with a week's notice if selected for monitoring by the State or County to ensure program compliance and owner-occupancy.
- ❖ Purchaser(s) agree to promptly complete and return the survey letters that may be emailed or mailed each year during the term of the Collier County mortgage (Fifteen years from closing).
- ❖ The mortgage may be subordinated only with prior approval of Collier County.
- ❖ Interest shall be zero percent (0%) per annum; except that if I/we fail to comply with the executed Promissory Note, as required, the interest rate shall be twelve percent (12%) per annum from the date when payment of the Promissory Note is due until I/we pay it in full.
- ❖ Funds awarded will be due and payable as follows:
 - Payment in full is due upon sale of the property if sold within the fifteen year term or no longer remains owner-occupied as the primary residence.
 - No repayment of the mortgage or note is required at the end of the fifteen year period even if the property is sold.

/

Applicant Signature Print Name Date

/

Co-Applicant/ Spouse Signature Print Name Date

*Only list a co-applicant if they are on the first mortgage loan. Circle the one that applies.

BUYER'S ACKNOWLEDGEMENT STATEMENT

BUYER ACKNOWLEDGES THAT NEITHER THE STATE OF FLORIDA NOR THE COLLIER COUNTY GOVERNMENT HAS GIVEN ANY LEGAL ADVICE OR MAKES ANY REPRESENTATIONS OR WARRANTIES REGARDING THE CONDITION OR FEATURES OF THE PROPERTY. BUYERS ARE ADVISED TO INSPECT THE PROPERTY, EITHER PERSONALLY OR THROUGH OTHERS OF THE BUYER'S CHOOSING, AND NOT TO RELY ON ANY VERBAL OR PRINTED DESCRIPTION OF THE PROPERTY OR STATEMENTS REGARDING PROPERTY'S CONDITION.

1. HOME INSPECTION. With regard to the purchase of used houses, Buyer acknowledges that there were issues that came up in the home inspection, which means that the burden is on you, the Buyer, to discover and determine any and all conditions of the property important to your decision to purchase the property. Seller and/or Seller's agent must disclose only those conditions, which constitute a health or safety threat and are known to seller and or seller's agent. The Seller and/or Seller's agent must also respond honestly to all questions asked by you, the Buyer, or the Buyer's agent that are a specific, direct inquiry if the Seller's agent has the knowledge of the answer to the question.

2. IN WORKING ORDER. As it pertains to used houses, the words "in working order," with regards to the heating, cooling, plumbing and electrical systems and any built-in appliances do not obligate Seller to repair or replace these components, but only that these items function as intended. Seller is not obligated to repair or replace these items unless agreeing to do so at your written request in the sales contract or an addendum to the contract. Be aware that these components are "used" and not "new," therefore, in "working order" means that they may function less efficiently than when "new."

3. FINAL WALK-THROUGH. You will be allowed and are *strongly encouraged* to perform a "final walk-through" of the property before closing. The two-fold purpose of this inspection is to be determined that the property is in the same condition as at the time of the sales contract, excluding normal wear and tear, and that all repairs and corrections to the property to be performed by Seller, if any, are completed. The "final walk-through" is not another inspection allowing the opportunity to address new or different conditions of the property. After closing, all conditions of the property are the responsibility of the Buyer.

4. MOLD. Although mold has always been present in our environment, recent studies have indicated that certain types of mold may be a health hazard to certain individuals. Potentially, when three elements-oxygen, water and certain building materials come together, mold can be produced. Buyer understands that the presence of mold and its impact upon habitability of the property is your responsibility and that you will not rely on the Sales Associate for advice.

5. CHINESE DRYWALL. This tainted wallboard, which was imported from China, often gives off a foul odor, corrodes copper, electrical wiring and other metal surfaces, and may cause serious health problems with prolonged exposure. If you, the Buyer, are considering occupying a home either built or renovated since 2001, ask the home inspector to check for this drywall problem, or hire an inspector specifically trained in discovering this defective drywall.

6. EIFS. (Exterior Insulation Finishing System). EIFS has become an increasing problem in home construction. Synthetic stucco(EIFS), when improperly installed, can cause major structural problems. If the subject has synthetic stucco, you, the Buyer, should absolutely have the synthetic stucco inspected by a licensed EIFS inspector before moving forward with the purchase of the property.

7. WOOD INFESTATION. Buyer acknowledges that he/ she has the right to request a wood infestation report provided by an authorized termite company. Buyer understands that the presence of termites and its impact upon habitability of the property is your responsibility and that you will not rely on the Sales Associate for advice.

8. SEWER/SEPTIC SYSTEM. Almost all waste disposal systems in this marketplace are either sewer or septic systems. You need to determine which system is present on the property. If on sewer, you should determine that the property is connected and that all impact and connection fees have been paid. If on septic system, you should determine if it is operational, that it should be inspected, and acknowledge that it requires periodic cleaning.

9. VERMIN INFESTATION. Buyer acknowledges that homes sometimes have been invaded by vermin (rodents, reptiles, animals and insects) and that their presence and/or residue could be deterrent to purchasing. If this is a problem for you, you should consider strongly and inspection by a pest control expert.

Borrower Signature

Print Name

Date

Co-Borrower/Spouse

Print Name

Date



**NOTICE OF COLLECTING SOCIAL SECURITY NUMBERS
FOR GOVERNMENT PURPOSES**

Collier County collects your social security numbers under the SHIP program for a number of different purposes. The Florida Public Records Law (specifically, section 119.071(5), Florida Statutes (2007), requires the City/County to give you this written statement explaining the purpose and authority for collecting your social security number.

	Form	Purpose	Authorization
1.	Housing Assistance Application	SHIP Program	Chapter 420 , Section 420 .9071, Florida Statutes; Chapter 67-37 .007, Florida Administrative Code SHIP Program Manual (rev.7/2015)
2.	Verification of Unemployment Benefits	SHIP Program	Chapter 420 , Section 420 .9071, Florida Statutes; Chapter 67-37 .007, Florida Administrative Code SHIP Program Manual (rev.7/2015)
3.	Verification of Social Security Benefits	SHIP Program	Chapter 420 , Section 420 .9071, Florida Statutes; Chapter 67-37 .007, Florida Administrative Code SHIP Program Manual (rev.7/2015)
4.	Verification of Employment	SHIP Program	Chapter 420 , Section 420 .9071, Florida Statutes; Chapter 67-37 .007, Florida Administrative Code SHIP Program Manual (rev.7/2015)
5.	Verification of Child Support	SHIP Program	Chapter 420 , Section 420 .9071, Florida Statutes; Chapter 67-37 .007, Florida Administrative Code SHIP Program Manual (rev.7/2015)
6.	Verification of Assets	SHIP Program	Chapter 420 , Section 420 .9071, Florida Statutes; Chapter 67-37 .007, Florida Administrative Code SHIP Program Manual (rev.7/2015)

RECEIVED BY: _____ / _____
 PRINT NAME SIGNATURE DATE

_____/_____
 PRINT NAME SIGNATURE DATE