DEVELOPMENT SERVICES DEPARTMENT
Telephone (909) 931-4300
Facsimile (909) 931-4123

Dear Applicant,

Thank you for your interest in The City of Upland's First Time Home Buyer's (FTHB) Program. The FTHB Program is designed to provide qualified families with down payment assistance necessary to secure financing towards the purchase of a home in Upland. This program provides assistance towards the home purchase price in the form of a deferred second mortgage loan.

By submitting a complete application and **all** required documentation ***(see checklist)*** you will be evaluated for the FTHB Program. This is the first step that must be completed prior to looking for a house or a lender. The Income and Verification form must be signed by you with your employer's name and address printed on the form and returned with the application. We will send it to your employer if necessary.

The City will notify you of your eligibility within two weeks of submitting a completed application. If you receive a preliminary approval letter from the City, it will explain what further steps are to be taken.

A copy of the FTHB Program's latest Program Policies is also attached for your reference. If you have any questions, please call me at (909) 931-4113.

Sincerely,

Deborah Alcorn
Housing Coordinator

EQUAL HOUSING OPPORTUNITY

LOAN APPLICANT'S CERTIFICATION AND AUTHORIZATION

LENDER: City of Upland

APPLICANT(S): _____

PROPERTY: _____

By signing below, I agree to the following:

1. I certify that I have submitted a complete and accurate loan application containing various information including without limitation, the amount and source of any down payment, my employment and income information, and information on my assets and liabilities. I certify that all of the information submitted is true and correct and that I have made no misrepresentation in the loan application or in any other related document, nor did I omit any pertinent information.

2. If my loan request is approved, I authorize the Lender to obtain additional employment, credit or other information in connection with any update, renewal, or extension of the loan or for the solicitation of any loan or insurance products.

3. If I have submitted a loan request under the Lender's Streamline Program, I understand and agree that the Lender reserves the right to change the mortgage loan review process to a full documentation program. This may include verifying the information, which I have provided on my loan application such as employment, income, financial, assets and outstanding obligations.

4. I understand that the Lender, or anyone authorized by the Lender, may inspect the Property securing the proposed loan for the purposes of determining its market value and to make sure that it otherwise meets Lender's property requirements for the type of loan requested and in connection with any post closing audit review.

5. I understand and agree that the Lender, its agents, successors and assigns, may verify and reverify information contained in my loan application and in any and all other documents required in connection with the loan, during loan processing and, if the loan request is approved, after loan closing as part of a post closing audit review.

6. I authorize the Lender, its agents, successors and assigns, to order one or more consumer credit reports and to obtain any and all information pertaining to my income, assets, employment, obligations as well as other information that the Lender may need in order to consider my application for loan financing under the Lender's loan program guidelines.

Applicant Signature:	Date:
Co-Applicant Signature:	Date:

EQUAL HOUSING OPPORTUNITY

HOME Funded
First Time Homebuyer
Applicant Package

CITY OF UPLAND DEVELOPMENT SERVICES DEPARTMENT
First Time Home Buyer's Program

The First Time Home Buyer's ("FTHB") Program makes available a limited number of deferred payment (principal and interest; no monthly payment with 0% or 3% simple interest) second mortgages, in amounts up to 30 percent of the purchase price. (The percentage/Amount of the assistance will change time to time). This program is specifically designed to provide qualified families with down payment subsidy assistance necessary to secure financing towards the purchase of a single family home in Upland.

What are the eligibility requirements?

1. Eligible applicants are households with combined family income which does not exceed 80% of the County median income adjusted by family size. Staff shall determine income eligibility pursuant to the guidelines provided on Attachment I. Program loans may only be made to applicants having a good credit history and who use the property as their principal residence. Mobile-home purchases are ineligible under this Program.

2. Eligible applicants are those who have not owned a home during the last three years immediately previous to the purchase of a home with Program assistance. Notwithstanding the forgoing, eligible applicants also include those who are a "displaced homemaker" or a "single parent" with custody or joint custody of minor children, a person who has not (within the preceding two years) worked on a full time basis as a member of the labor force during a consecutive twelve-months period.

3. Those who own or have owned, as a principal residence during the three-years period before the purchase of a home with HOME assistance, a dwelling unit that is not permanently affixed to a permanent foundation in accordance with the local and state regulations, or does not comply with the state or local building codes and cannot be brought into compliance with such codes for less than the cost of constructing a permanent structure are also eligible.

4. Eligible applicants must be able to contribute a minimum of 1% of the purchase price plus closing costs. Co-owners, other than owner occupants, will not be permitted.

5. City Council Members, Development Services Department members, all Development Department employees and any employee, official or agent of the City or Agency who exercises any policy or program decision-making function in connection with the Program, are ineligible for assistance under the Program.

EQUAL HOUSING OPPORTUNITY

Income Requirements

In order to qualify for mortgage assistance, the applicant's total annual household income must not exceed the current income limits (see attachment II)

Source: State of California Dept. of Housing and Community Development – HCD

Purchase Price Limit

The maximum purchase price permitted under this program shall not exceed 100% of the San Bernardino County single-Family Maximum Purchase Price - 203(b) limits.

How much can I borrow?

The City of Upland can assist with down payment assistance only, in amounts of up to 30 percent of the purchase price of your home. (The percentage may change from time to time as approved by council)

What type of properties are eligible?

Single-family residential properties, and single family residential, condominiums and town home properties located within the City of Upland are eligible. In addition, this program is for existing housing stock and new homes.

How much money does the borrower need to qualify?

To qualify for the FTHB assistance the borrower needs to have a minimum of 1% of purchase price plus closing costs in hand. The **First lender's requirements** may vary from this requirement.

What are the repayment terms of this loan?

The FTHB Program loan is secured by a second Deed of Trust. FTHB loans are deferred until sale, or transfer or 30 years. Program loans bear simple interest at 0% or 3% for the first 240 months of the term. Beginning with the 241st month of the 360-month term FTHB loans are interest free.

Lender Requirements

Applicants must have sufficient income and credit worthiness to qualify for primary financing as defined by their selected lender.

HQS Requirements

The home to be purchased will be inspected by the Housing Coordinator of City of Upland prior to final silent second loan approval. The selected home must be in compliance with City's building, zoning, code requirements, health and safety and housing quality standards requirements in conjunction with the City of Upland's uniform building and housing codes.

Flood Insurance Requirements

The entire Upland community is classified as Zone "X", an area of minimal flood risk. No flood insurance is required for HOME eligible applicants.

REAL PROPERTY ACQUISITION REQUIREMENTS

Real Property Acquisition requirements dictate that an "acquisition notice" containing the items listed below is provided to the seller prior to, or at the same time as the purchase offer is presented by the buyer's agent:

THE REAL ESTATE AGENTS RESPONSIBILITY IS TO GIVE THIS NOTICE TO THE SELLER BEFORE PRESENTING ANY PURCHASE OFFER FOR A FTHB AND TO INFORM THE SELLER OF THE FOLLOWING:

1. Buyer does not have the power of eminent domain and, therefore, will not acquire the property if negotiations fail to result in an amicable agreement.

2. Buyer or buyer's agent estimate of the fair market value. (An appraisal is not required; however, the grantee's files must include an explanation, with reasonable evidence, of the basis for the estimate-like comparable.)

3. The buyer shall provide this information to the seller before making the purchase offer.

4. If the buyers Agent does not provide the seller with an acquisition Notice prior to the purchase offer, a provision in the contract should empower the seller to withdraw from the agreement after this information is provided.

Whenever feasible, this information shall be provided to the seller by the buyer before making the purchase offer.

Hazard Insurance requirement

The City requires that the borrower name the City of Upland on their insurances as an Additionally Insured (second mortgage holder) during the term of the FTHB loan. The borrower will instruct their insurance company to provide a copy of their renewed insurance to the City each year.

UPLAND COMMUNITY REDEVELOPMENT AGENCY
First Time Home Buyer's Program

Please fill out the attached application as completely and as accurately as possible. The information provided herein shall be kept confidential and shall be used for the purpose of determining eligibility and collecting statistical data for the City of Upland's FTHB Program.

Please attach ***COPIES*** of the following to your application:

1) Last three years of **signed** federal and state income tax returns (include copy of W-2 Forms). ( )

2) A minimum of three months of current consecutive pay check stubs for all working current members. ( )

3) Verification of **all** other non-working income received by all household members (Social Security/Disability Award letters, etc.) ( )

4) Verification of **all** asset holdings (most recent statements) ( )

5) Provide a photocopy of driver's license, passport, CA Identification, or Resident Alien Card for every applicant. ( )

6) Proof of 1% of purchase price plus closing costs in hand by buyer: i.e. copy of bank statement or other documentation (at least 6 months checking and savings account statements) ( )

7) Pre-qualification letter from a Mortgage lender (First Loan) to include the qualified loan amount. ( )

8) Provide School Class Schedule (including total units) for **all** Full-Time students 18 years or older *(Verification of Full-Time Student Status Form must be signed).* ( )

Other documentation may be required to determine program eligibility.

Please submit these application materials to:

City of Upland- Housing Coordinator
P.O. Box 460
Upland, CA 91785

Incomplete applications will not be processed. W2's are not accepted in lieu of tax returns. In order for application to be processed, all required tax returns must accompany application. If Federal tax returns cannot be located, contact the IRS at 1- 800 - 829-3676 for IRS Summary Form 4506. If this is an emergency contact your local IRS District Office and request and submit IRS Summary Form 1722. The City may process the application when a release form is signed.

If State tax returns cannot be located, contact the State Franchise Board at 1-800-852-5711 for State Form 3516.

EQUAL HOUSING OPPORTUNITY

CONSENT AND DECLARATION

I /We, as undersigned, hereby consent to allow authorized representatives of the City of Upland (the "City") to enter my/our single family residence for the purpose of evaluating the housing structure. This evaluation will be performed jointly by the undersigned and the representatives of the City. In addition, by signing below, I/We declare that the information provided herein is true and accurate to the best of my /our belief and knowledge that I/We made no misrepresentations in the application or other documents, nor did I/We omit pertinent information and that I/We under penalty of perjury have received and read the attached First Time Homebuyer Program Policies.

The undersigned certify the following: I/We have applied for a loan under the First Time Homebuyer Program funded by the City. In applying for assistance, I /We completed an application containing various information for the purpose of obtaining a loan. I/We understand and agree that the City cannot ensure that information provided by me/us or on my/our application will be kept confidential notwithstanding that the City intends to maintain my/our application package in a confidential file.

I/We understand and agree that the City, reserves the right to change the review process to a full documentation program on a case-by-case basis. This may include independent verification of the information provided on the application. I/We expressly consent to and authorize City to verify the information on the application and hereby instruct all persons so requested to fully cooperate with City, including, but not limited to providing further confirmation or documentation as the City may request from time to time.

I /We further acknowledge and understand that by receiving assistance through this program, I (we) consent to abide by all past, present and future State Federal Regulations governing the use of Local State and/or Federal Funds.

I (we) understand and agree that the City reserves the right to change the requirements of this application and program at any time without notice.

_____ _____
Applicant's Name (Print) Date

_____
Applicant's Signature

_____ _____
Co-Applicant's Name (Print) Date

_____
Co-Applicant's Signature

EQUAL HOUSING OPPORTUNITY

CITY OF UPLAND
FIRST TIME HOMEBUYER PROGRAM
460 N. Euclid Avenue, Upland, CA 91786
(909) 931-4300

PROGRAM APPLICATION

Please complete all entries. Where items are non-applicable, enter none or "n/a." Where insufficient space is supplied, attach additional sheets as necessary. Applications must be complete to be considered for program participation.

Address of the Property to be Acquired	
Mailing Address	

APPLICANT			CO-APPLICANT		
Name			Name		
Date of Birth		Gender	Date of Birth		Gender
Status ❑ Married ❑ Single ❑ Separated		Number of Dependents	Status ❑ Married ❑ Single ❑ Separated		Number of Dependents
Day Telephone No.	Evening Telephone No.		Day Telephone No.	Evening Telephone No.	

Household – Please enter the requested information for all property residents (attach additional sheets, if necessary)

Applicant Name	Age	Self	Employment Status	Social Security Number
Co-Applicant Name	Age	Relationship	Employment Status	Social Security Number
Name	Age	Relationship	Employment Status	Social Security Number
Name	Age	Relationship	Employment Status	Social Security Number
Name	Age	Relationship	Employment Status	Social Security Number
Name	Age	Relationship	Employment Status	Social Security Number
Name	Age	Relationship	Employment Status	Social Security Number
Name	Age	Relationship	Employment Status	Social Security Number
Enter Household Size: _____ persons				

Please provide current "School Class Schedule" for all Full-Time students 18 years or older.

EQUAL HOUSING OPPORTUNITY

Employment and Income – Please complete the following

APPLICANT	CO-APPLICANT
Current Employer	Current Employer
Employer Address	Employer Address
Business Phone	Business Phone
Position/Title	Position/Title
Length of Time Currently Employed	Length of Time Currently Employed
Previous Employer (If employed less than three years at current employer)	Previous Employer (If employed less than three years at current employer)
Previous Employer Address (If employed less than three years at current employer)	Previous Employer Address (If employed less than three years at current employer)
Previous Business Phone (If employed less than three years at current employer)	Previous Business Phone (If employed less than three years at current employer)
Current Hourly Rate of Pay ❑ Full Time ❑ Part Time ❑ Self Employment	Current Hourly Rate of Pay ❑ Full Time ❑ Part Time ❑ Self Employment

INCOME EARNED BY OTHER HOUSEHOLD MEMBERS				
Household Member Name	Employer Name	Employer Address	Current Hourly Rate of Pay ❑ Full Time ❑ Part Time ❑ Self Employment	Annual Income
Household Member Name	Employer Name	Employer Address	Current Hourly Rate of Pay ❑ Full Time ❑ Part Time ❑ Self Employment	Annual Income
Household Member Name	Employer Name	Employer Address	Current Hourly Rate of Pay ❑ Full Time ❑ Part Time ❑ Self Employment	Annual Income

All additional sources of income must be disclosed, whether taxable or not. List all additional sources of income within the household:

EMPLOYMENT EARNINGS FROM APPLICANT		Annual Income
EMPLOYMENT EARNINGS FROM CO-APPLICANT		Annual Income
EMPLOYMENT EARNINGS FROM OTHER HOUSEHOLD MEMBERS		Annual Income
Pension/Retirement/Veteran Benefits/Social Security (Specify)	Recipient	Annual Income
Alimony/Child Support/Foster Care (Specify)	Recipient	Annual Income
Unemployment/Disability (Specify)	Recipient	Annual Income
Other (Specify)	Recipient	Annual Income
Other (Specify)	Recipient	Annual Income
Other (Specify)	Recipient	Annual Income

TOTAL ANNUAL INCOME FOR ALL HOUSEHOLD MEMBERS	Annual Income

Financial Information - Please list all applicable Savings and Checking Account Information for each account held

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Name of Bank/Saving and Loan/Credit Union/Other Financial Institution:	Account Number:
Address:	Savings or Checking:
Current Account Balance:	

Please list All Other Asset Accounts and their respective values (checking/savings/stocks/401K/bonds/annuities/pensions/cash value of life insurance policies, etc.)

Account Category	Current Cash Value
Total Value of Checking/Savings/Other Cash Accounts Indicated Above	$
Stocks/Bond/Other Investment Accounts	$
Life Insurance Net Cash Value	$
Net Worth of Business	$
Other Assets (IRA/Roth IRA):	$
Other Assets (401K):	$
Other Assets (Pension/Veteran Benefits):	$
Other Assets (list):	$
Total Assets	$

Do you currently own, or have an interest in any real estate (residential, commercial, or other real property), other than the property which you are seeking to acquire under this program?	❑ Yes ❑ No If YES, you must complete and submit the attached Schedule of Real Estate Owned

List applicable information regarding all of your Loan Obligations - (Attach additional sheets as necessary)

Creditor / Financial Institution	Account Number	Monthly Payment Amount	Current Outstanding Balance
Creditor:			
Creditor:			

Creditor:			
Creditor:			
Creditor:			
Creditor:			
Creditor:			
Creditor:			
Creditor:			

Please answer all of the following:

	Applicant	Co-Applicant
Have you owned a residential property within the last three years of this application?	❑ Yes ❑ No	❑ Yes ❑ No
Do you have any judgments currently outstanding against you?	❑ Yes ❑ No	❑ Yes ❑ No
Have you declared bankruptcy within the last seven years?	❑ Yes ❑ No	❑ Yes ❑ No
Have you has a property foreclosed on, or given a deed-in-lieu in the last 7 years?	❑ Yes ❑ No	❑ Yes ❑ No
During the preceding 5 years, have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure or judgment, or which resulted in a loan default (eg.: mortgages, SBA loans, home improvement loans, any financial obligation, bond or loan guaranty, etc.) ?	❑ Yes ❑ No	❑ Yes ❑ No
Are you presently delinquent or in default on any debt to the Federal Government (e.g.: Federal Guaranteed Student Loan, Public Health Service, etc,)?	❑ Yes ❑ No	❑ Yes ❑ No
Are any members of your household disabled?	❑ Yes ❑ No	❑ Yes ❑ No

Ethnicity/Head of Household (For Statistical Purposes Only) - Demographic information will be held strictly confidential, and is not considered as a factor in the review of your grant application. However, in accordance with Department of Housing and Urban Development (HUD) requirements, this information must be collected for your participation in this program. Please complete the following:

HEAD OF HOUSEHOLD
Female Head of Household ❑ Yes ❑ No

RACIAL BACKGROUND	
SINGLE CATEGORIES	**DOUBLE CATEGORIES**
❑ American Indian/Alaska Native	❑ American Indian or Alaska Native and White
❑ Asian	❑ Asian and White
❑ Black/African American	❑ Black or African American and White
❑ Native Hawaiian/Other Pacific Islander	❑ American Indian or Alaska Native and Black or African American
❑ White	
❑ Other – For individuals that do not identify with any of the above	

ETHNIC BACKGROUND
❑ Not Hispanic/Latino ❑ Hispanic/Latino Ethnicity ❑ Mexican-American ❑ Puerto Rican ❑ Cuban ❑ Other Hispanic/Latino _____

Complete this section for the property to be acquired, if known at the time of the application.

Property Street Address:			
APN:			
Purchase Price:	$	Amount of First Loan Commitment:	$
Company Name of First Lender:			
First Lender Contact Person:			
First Lender Telephone No.:	( )		
FTHB Loan Request Amount:	$		
Title is held by Seller in What Name(s):			
Manner in which Title will be held:			

I hereby certify that the aforementioned statements are true. If at any time this information is found to be false or incorrect, and it is then determined that I do not qualify for the First Time Homebuyer Program, I understand that I am liable for all costs incurred through the program.

Applicant Signature:	Date:
Co-Applicant Signature:	Date:

PLEASE REMEMBER TO ATTACH <u>ALL</u> INFORMATION REQUESTED IN THE GENERAL QUALIFICATIONS SHEET.
DO <u>NOT</u> SEND ORIGINALS.

EQUAL HOUSING OPPORTUNITY

ATTACHMENT "C"

Certification

The undersigned certify the following:

1. I/We have applied for a loan from the City of Upland (the "City"). In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, employment and income information, and assets and liabilities. I/We certify under penalty of perjury that all of the information is true and complete and that I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.

2. I/We understand and agree that the City, reserves the right to change the loan review process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.

3. I/We fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage/trust deed, as applicable under the provisions of Title 18, United States Codes, Section 1014.

Authorization to Release Information

To Whom it may concern:

1. I/We have applied for a loan from the City. As part of the application process, the City may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.

2. I/We authorize you to provide to the City, 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.

3. The City may address this authorization to any party named in the loan application, (credit reporting bureau, etc.).

4. A copy of this authorization may be accepted as an original.

5. Your Prompt reply to the City is appreciated.

Applicant's Signature	Date	Social Security Number
Co-Applicant's Signature	Date	Social Security Number

EQUAL HOUSING OPPORTUNITY

CITY OF UPLAND
FIRST TIME HOMEBUYER PROGRAM
460 N. Euclid Avenue, Upland, CA 91786
(909) 931-4300

REQUEST FOR VERIFICATION OF EMPLOYMENT **ATTACHMENT "E" - APPLICANT**

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and/or permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37(if VA); by 12 USC, Section 1701 et seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq. or 7 USC, 1921 et seq. (if USDA/FmHA).

Instructions: Lender complete items 1 through 7. Have applicant complete item 8. Forward directly to employer named in item 1.

Employer Please complete either Part II or Part III as applicable. Complete Part IV and return directly to lender named in item 2.

Part I - Request

1. To (Name and Address of Employer)

_____
_____
_____
_____

2. From (Name and Address of Lender)

Development Services Dept. – Housing Div.
CITY OF UPLAND
460 North Euclid Avenue
Upland, CA 91786

I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other party.

3. Signature of Lender _____ **4. Title** _____ **5. Date** _____ **6. Lender's No. (Optional)** _____

I have applied for a mortgage loan and stated that I am now or was formerly employed by you. My signature below authorizes verification of this information.

7. Name and Address of Applicant (include employee or badge number)

_____
_____
_____

8. Signature of Applicant

_____

Part II – Verification of Present Employment

9. Applicant's Date of Employment _____ **10. Present Position** _____ **11. Probability of Continued Employment** _____

12A. Current Gross Base Pay (Enter Amount and Check Period)

Pay Grade _____

$ _____ ☐ Annual ☐ Hourly ☐ Monthly ☐ Other (Specify) ☐ Weekly _____

12B. Three Years Gross Earnings

Type	Year-to-Date	Last Year	Prior Year
Base Pay	$ _____	$ _____	$ _____
Overtime	$ _____	$ _____	$ _____
Commissions	$ _____	$ _____	$ _____
Bonus	$ _____	$ _____	$ _____
Total	$ _____	$ _____	$ _____

13. For Military Personnel Only

Type	Monthly Amt.
Base Pay	$ _____
Rations	$ _____
Flight or Hazard	$ _____
Clothing	$ _____
Quarters	$ _____
Proficiency Pay	$ _____
Overseas or Combat	$ _____
Variable Housing	$ _____

14. If Overtime or Bonus is Applicable

Overtime ☐ Yes ☐ No
Bonus ☐ Yes ☐ No

15. If paid hourly, average hours/wk _____

16. Date of Applicant's next pay increase _____

17. Projected Amount of pay increase $ _____

18. Date of Applicant's last pay increase _____

19. Amount of last pay increase $ _____

20. Remarks (if employee was off work for any length of time, please indicate time period and reason).

_____

Part III - Verification of Previous Employment

21. Date Hired _____ **23. Salary/Wage at termination per (year) (month) (week)**

22. Date Terminated _____ Base $_____ Overtime $ _____ Commissions $ _____ Bonus $ _____

24. Reason for Leaving _____ **25. Position Held** _____

Part IV - Authorized Signature - Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer _____ **27. Title (please print or type)** _____ **28. Date** _____

29. Print or type name signed in Item 26 _____ **30. Phone number** _____

REQUEST FOR VERIFICATION OF EMPLOYMENT **ATTACHMENT "E" – CO-APPLICANT**

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and/or permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37(if VA); by 12 USC, Section 1701 et seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et seq. or 7 USC, 1921 et seq. (if USDA/FmHA).

Instructions: Lender complete items 1 through 7. Have applicant complete item 8. Forward directly to employer named in item 1.

Employer Please complete either Part II or Part III as applicable. Complete Part IV and return directly to lender named in item 2.

Part I - Request

1. To (Name and Address of Employer)

_____
_____
_____
_____

2. From (Name and Address of Lender)

Development Services Dept. – Housing Div.
CITY OF UPLAND
460 North Euclid Avenue
Upland, CA 91786

I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other party.

3. Signature of Lender _____ **4. Title** _____ **5. Date** _____ **6. Lender's No. (Optional)** _____

I have applied for a mortgage loan and stated that I am now or was formerly employed by you. My signature below authorizes verification of this information.

7. Name and Address of Applicant (include employee or badge number)

_____
_____
_____

8. Signature of Applicant

_____

Part II – Verification of Present Employment

9. Applicant's Date of Employment _____ **10. Present Position** _____ **11. Probability of Continued Employment** _____

12A. Current Gross Base Pay (Enter Amount and Check Period)

Pay Grade _____

$ _____ ☐ Annual ☐ Hourly ☐ Monthly ☐ Other (Specify) ☐ Weekly _____

12B. Three Years Gross Earnings

Type	Year-to-Date	Last Year	Prior Year
Base Pay	$ _____	$ _____	$ _____
Overtime	$ _____	$ _____	$ _____
Commissions	$ _____	$ _____	$ _____
Bonus	$ _____	$ _____	$ _____
Total	$ _____	$ _____	$ _____

13. For Military Personnel Only

Type	Monthly Amt.
Base Pay	$ _____
Rations	$ _____
Flight or Hazard	$ _____
Clothing	$ _____
Quarters	$ _____
Proficiency Pay	$ _____
Overseas or Combat	$ _____
Variable Housing	$ _____

14. If Overtime or Bonus is Applicable

Overtime ☐ Yes ☐ No
Bonus ☐ Yes ☐ No

15. If paid hourly, average hours/wk _____

16. Date of Applicant's next pay increase _____

17. Projected Amount of pay increase $ _____

18. Date of Applicant's last pay increase _____

19. Amount of last pay increase $ _____

20. Remarks (if employee was off work for any length of time, please indicate time period and reason).

_____

Part III - Verification of Previous Employment

21. Date Hired _____ **23. Salary/Wage at termination per (year) (month) (week)**

22. Date Terminated _____ Base $_____ Overtime $ _____ Commissions $ _____ Bonus $ _____

24. Reason for Leaving _____ **25. Position Held** _____

Part IV - Authorized Signature - Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer _____ **27. Title (please print or type)** _____ **28. Date** _____

29. Print or type name signed in Item 26 _____ **30. Phone number** _____

ATTACHMENT "F"

California Fair Lending Notice

Under the Housing Financial Discrimination (Holden) Act of 1977, it is unlawful to discriminate in the provision of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood of geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business; or

2. Race, color, religion, sex, marital status, national origin or ancestry.

It is unlawful to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographical area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change, in appraising a housing accommodation or in determining whether or not, or under what terms and conditions, to provide financial assistance.
These provisions govern financial assistance for the purpose of the purchase, construction, rehabilitation or refinancing of one-to-four unit family residences occupied by the owner and for the purpose of the home improvement of any one-to-four unit family residence.

If you have questions about your rights, or if you wish to file a complaint, contact:

Department of Real Estate
2201 Broadway
P.O. Box 187000
Sacramento, CA 95808-7000

Equal Credit Opportunity Act (ECOA) Notice

To: All borrowers for a real property secured loan to purchase, construct, rehabilitate, improve or refinance an owner-occupied one- to four-family residence; and all owner-applicants for a real property secured home improvement loan to improve a one- to four-family residence (whether or not owner-occupied)

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derive from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. In addition to your rights under federal law, you may also have other rights afforded under state law. The federal agency that administers compliance with this law concerning this lender is the:

Consumer Response Center
Federal Trade Commission
Washington, DC 20580.

Acknowledgment of Receipt

I/We have received a copy of the California Fair Lending Notice and the Equal Credit Opportunity Notice.

Borrower Name (Printed)	Borrower Signature	Date
Borrower Name (Printed)	Borrower Signature	Date

ATTACHMENT "G"

SCHEDULE OF REAL ESTATE OWNED

Property Address	Type of Property (Residential/ Commercial/ Vacant)	Market Value	Outstanding Mortgage/ Loan Amounts	Monthly Gross Rents	Monthly Loan Payments	Taxes and Insurance	Other Monthly Operating Expenses	Monthly Income
TOTALS								

ATTACHMENT "A"

Revised: August 2013

CITY OF UPLAND
FIRST TIME HOMEBUYER PROGRAM POLICIES
FUNDING SOURCE: HOME Grant.

I. PROGRAM DESCRIPTION

HOME Grant founding source:

The First Time Homebuyer Program, ("Program") is designed to assist lower income persons **(whose household income does not exceed 80% of the area median income as adjusted by household size as promulgated by HUD)** who wish to purchase a home in the City of Upland, but are unable to secure a sufficient down-payment to qualify for a primary loan. **Only applicants, whose combined household income does not exceed the HCD income limits, qualify for this Program.** The intent of the Program is to offset some of the impact of high housing costs on lower-income households, while encouraging investments in the community and helping qualified applicants purchase a first home. The Program provides an applicant with a loan to assist with down payment only. Program loans are evidenced by a Promissory Note secured by a Second deed of trust. For those who meet the eligibility requirements, this program may be utilized together with any other housing program offered by the City of Upland or its Development Services Dept.

II. ASSISTANCE TYPES AND PROGRAM LIMITS

Currently the Maximum of 30% of the purchase price is the limit (Sales Price/ Value Limit) per program year and available to an eligible applicant for down payment only if the applicant has assets to provide a minimum 1% down payment of the purchase price plus closing costs under this Program. The percentage of the assistance may change in the future to provide the necessary Gap financing required by CalHome or LMI underwriting guidelines. The maximum purchase price limit shall be no more than the annual single-family maximum purchase price/value limit for the County of San Bernardino 203(b) limits, provided that the applicant can remain within the affordability ratios applicable to the funding source. Program loans are deferred until sale or transfer or 30 years. Program loans bear simple interest at 0 or 3% for the first 240 months of the term. Beginning with the 241st month of the 360 month loan term, the Program loans are interest free.

III. PROGRAM LOANS

Program loans will be evidenced by a Promissory Note secured by a Deed of Trust. Program loans are due and payable upon sale or transfer of title. For the purposes of this Program, the term "sale or transfer" shall mean any sale or transfer that will cause the assisted property to be reassessed by the San Bernardino County Assessor's Office pursuant to Article "XIII A" of the California Constitution (commonly referred to as Proposition 13).

In the event the assisted property is refinanced and the said refinancing requires the City to subordinate its Program loan lien and the refinancing produces net proceeds (i.e., beyond the amount needed to pay off the existing first loan (secured loan) and/or make further capital improvements to the assisted property), then any such net proceeds of the refinancing shall first be applied to reducing the principal amount of the Program loan. Refinancing of the Primary Loan shall be allowed when the refinancing does not exceed the then outstanding balance (plus refinancing and closing costs) of the existing senior loan (Primary Loan). Only one Subordination per Program loan is allowable. At the City's sole discretion, the City may consider the subordination of its Program loan lien based on the Program loan recipient's unique hardship condition. An assisted property shall not be sold for less than the sum of the existing liens and encumbrances, including property tax liability, without the express written consent of the City. After subordination, the combination of the first and second loans may not exceed 95% of the Fair Market Value of the property. At the time of the refinancing an appraisal must be conducted to establish the market rate value of the property.

IV. ELIGIBILITY CRITERIA

1. Eligible applicants

- Eligible applicants are those whose combined family income does not exceed HCD income limits (80% income for low income applicants) adjusted by household size. Staff shall determine income eligibility pursuant to the guidelines provided on Attachment I. Program loans may only be made to applicants having a good credit history and who are planning to use the property as their principal residence. Mobile-home purchases are ineligible under this Program.

- Eligible applicants are those who have not owned a home during the last three years immediately previous to the purchase of a home with the Program assistance. Notwithstanding the forgoing, eligible applicants also include those who are a "displaced homemaker" or a "single parent" with custody or joint custody of minor children, a person who has not (within the preceding two years) worked on a full time basis as a member of the labor force during a consecutive twelve-months period, been unemployed or underemployed, experienced difficulty in obtaining or upgrading employment, or worked primarily without remuneration to care for his or her home and family.

- Those who own or have owned, as a principal residence during the three-years period before the purchase of a home with HOME assistance, a dwelling unit that is not permanently affixed to a permanent foundation in accordance with the local and state regulations, or does not comply with the state or local building codes and cannot be brought into compliance with such codes for less than the cost of constructing a permanent structure are also eligible.

- Eligible applicants must be able to contribute a minimum of 1% of the purchase price plus closing costs. Co-owners, other than owner occupants, will not be permitted.

- City Council Members, Development Agency members, all Development Department employees and any employee, official or agent of the City or Agency who exercises any policy or program decision-making function in connection with the Program, are ineligible for assistance under the Program.

2. Eligible Properties

New and existing single-family homes, condominiums, PUD homes located within the City of Upland with sales prices that do not exceed the Program Limit. Mobile home purchases are not eligible under the program. All of the properties proposed for acquisition by an eligible applicant must be either owner occupied or vacant. At the time of the purchase. the subject property must be in compliance with the health and safety and housing quality standards. Prior to final loan approval, staff will inspect each home, to ensure that, it is in compliance with the city's building, zoning and other code requirements.

V. IMPLEMENTATION

Administration

The Upland Redevelopment Department Housing Staff ("Staff") shall administer the Program. As used herein, the term "Staff" may include either employees or consultants of the Redevelopment Department. The administration of the Program is including, without limitation, application evaluation procedures, inspection and disbursement of Program funds.

Application

Applications for participation in the Program must be obtained from and returned to the Redevelopment Department at City Hall located at 460 N. Euclid Avenue or alternative location within the City of Upland designated by the City. Applications will be accepted on a first-come, first-serve basis from eligible applicants consistent with funding availability. The application must be completed in its entirety and submitted together with the following documentation ***(See Checklist on page 7 of this application package)***

- Other documentation as may be required to determine Program eligibility.

Staff shall place the applicant's name on a list of eligible applicants in order of the receipt of the signed Application and the above noted documentation. Therefore, those applicants who submit all requested documents with the Application in the shortest time frame will have the highest priority for assistance under the Program. **Application approval is subject to funding availability.**

Pre-qualification

- Pre-qualification – Each application filed will be date marked, and will be processed in that order. Staff will review applications for completeness and verify the applicant's eligibility for this program. Incomplete applications will not be processed until all requested information is submitted. Staff shall notify all ineligible applicants of their status by letter.

- LRC Review – The LRC shall consist of the Development Services Director, City Manager and Administrative Services Director or their designees. Complete application packages will be reviewed by the LRC members for approval or disapproval based upon the Program underwriter's recommendations. In order to proceed, all LRC members must approve all Program loans and requests to subordinate Program loan liens.

Loan Documents

- Promissory Note
- Deed of Trust
- Request for Copy of Notice of Default or Sale

The City of Upland shall not be committed to fund a Program loan prior to the Buyer's execution of the Program Loan Documents.

Approval of legal documents

All Program legal documents shall be approved as to form by the legal counsel prior to their use.

Authority to Administer

The preparation and use of all required Program procedure manuals, forms, documents and agreements shall be administered by the City Manager, Administrative Director, Development Services Director or their designees in accordance with these Program policies.

-oOo-

EQUAL HOUSING OPPORTUNITY

DETERMINATION OF ADJUSTED GROSS INCOME

In calculating income, all of the income of all adult household members shall be considered and determined as delineated within 24 CFR Part 5 - Annual Income Inclusions And Exclusions, as detailed below:

24 CFR Part 5 ANNUAL INCOME INCLUSIONS AND EXCLUSIONS

Part 5 Inclusions

This table presents the Part *5* income inclusions as stated in the HUD Technical Guide for Determining Income and Allowances for HOME Program (Third Edition; January 2005).

General Category	(Last Modified: January 2005)
1. Income from wages, salaries, tips, etc.	The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services.
2. Business Income	The net income from the operation of a business or profession, Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight-line depreciation, as provided In Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested In the operation by the family.
3. Interest & Dividend Income	Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation is permitted only as authorized in number 2 (above). Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of $5,000, annual income shall Include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate, as determined by HUD.
4. Retirement & Insurance Income	The full amount of periodic amounts received from Social Security, annuities, Insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sum amount or prospective monthly amounts for the delayed start of a periodic payment (except for certain exclusions, listed in Income Exclusions, number 14).
5. Unemployment & Disability Income	Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay (except for certain exclusions, listed in Income Exclusions, number 3).

6. Welfare Assistance	Welfare Assistance. Welfare assistance payments made under the Temporary Assistance for Needy Families (TANF) program are included in annual income: • Qualify as assistance under the TANF program definition at 45 CFR 260.31; and • Are otherwise excluded from the calculation of annual income per 24 CFR 5.609(c). If the welfare assistance payment Includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance income to be included as income shall consist of: • the amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus: • the maximum amount that the welfare assistance agency could in fact allow the family for shelter and utilities. If the family welfare assistance Is reduced from the standard of need by applying a percentage, the amount calculated under 24 CFR 5.609 shall be the amount resulting from one application of the percentage.
7. Alimony, Child Support, & Gift Income	Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from organizations or from persons not residing in the dwelling.
8. Armed Forces Income	All regular pay, special day, and allowances of a member of the Armed Forces (except as provided in number 8 of Income Exclusions).

Part 5 Exclusions

This table presents the Part 5 income exclusions as stated in the HUD Technical Guide for Determining Income and Allowances for HOME Program (Third Edition; January 2005).

General Category	(Last Modified: January 2005)
1. Income of Children	Income from employment of children (including foster children) under the age of 18 years.
2. Foster Care Payments	Payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone).
3. Inheritance and Insurance Income	Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains, and settlement for personal or property losses (except for certain exclusions, listed in Income Inclusions, number 5).
4. Medical Expense Reimbursements	Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member.

5. Income of Live-In Aides	Income of a live-in aide (as defined m 24 CFR5.4Q3),
6. Income from a Disabled Member	Certain increase in income of a disabled member of qualified families residing in HOME-assisted housing or receiving HOME tenant-based rental assistance (24 CFR 5.671 (a)).
7. Student Financial	The full amount of financial assistance paid directly to the student or to the educational institution.
8. "Hostile Fire" Pay	The special pay to a family member serving in the Armed Forces who is exposed to hostile fire.
9. Self-Sufficiency Program Income	a. Amounts received under training programs funded by HUD. b. Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set side for use under a Plan to Attain Self-Sufficiency (PASS). c. Amounts received by a participant in other publicly assisted programs that are specifically for, or in reimbursement of, out-of-pocket expenses incurred (special equipment, clothing, transportation, childcare, etc.) and which are made solely to allow participation in a specific program. d. Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed $200 per month) received by a resident for performing a service for the PHA or owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, resident initiatives coordination, and serving s a member of the PHA's governing board. No resident may receive more than one such stipend during the same period of time. e. Incremental earnings and benefits resulting to any family member from participation in qualifying state or local employment training programs (including training not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment-training program.
10. Gifts	Temporary, nonrecurring, or sporadic income (including gifts).
11. Reparation Payments	Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era.
12. Income from Full-time Students	Earnings in excess of $480 for each full-time student 18 years old or older (excluding the head of household or spouse).
13. Adoption Assistance Payments	Adoption assistance payments in excess of $480 per adopted child,
14. Social Security &	Deferred periodic amounts from supplemental security income and social security benefits that are received in a lump sum amount or in prospective

SSI Income	monthly amounts,
15. Property Tax Refunds	Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit.
16. Home Care Assistance	Amounts paid by a state agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep this developmentally disabled family member at home.
17. Other Federal Exclusions	Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24 CFR 5-609(c) apply, A notice will be published in the Federal Register and distributed to housing owners identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary. The following is a list of income sources that qualify for that exclusion: > The value of the allotment provided to an eligible household under the Food Stamp Act of 1977; > Payments to volunteers under the Domestic Volunteer Service Act of 1973 (employment through AmeriCorps, VISTA, Retired Senior Volunteer Program, Foster Grandparents Program, youthful offender incarceration alternatives, senior companions); > Payments received under the Alaskan Native Claims Settlement Act; > Income derived from the disposition of funds to the Grand River Band of Ottawa Indians; > Income derived from certain submarginal land of the United States that is held in trust for certain Indian tribes; > Payments or allowances made under the Department of Health and Human Services' Low-Income Home Energy Assistance Program; > Payments received under the Maine Indian Claims Settlement Act of 1980 (25 U-S.C, 1721); > The first $2,000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the U.S. Claims Court and the interests of individual Indians in trust or restricted lands, including the first $2,000 per year of income received by individual Indians from funds derived from interests held in such trust or restricted lands; > Amounts of scholarships funded under Title IV of the Higher Education Act of 1965, including awards under the Federal work-study program or under the Bureau of Indian Affairs student assistance programs;

	> Payments received from programs funded under Title V of the Older Americans Act of 1985 (Green Thumb, Senior Aides, Older American Community Service Employment Program); > Payments received on or after January 1, 1989, from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement in the In Re Agent Orange product liability litigation, M.D.L. No. 381 (E.D.N.Y.); > Earned income tax credit refund payments received on or after January 1, 1991, including advanced earned Income credit payments; > The value of any child care provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990; > Payments received under programs funded in whole or in part under the Job Training Partnership Act (employment and training programs for Native Americans and migrant and seasonal farm workers, Job Corps, veterans employment programs, state job training programs and career intern programs, AmeriCorps); > Payments by the Indians Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation; > Allowances, earnings, and payments to AmeriCorps participants under the National and Community Services Act of 1990; > Any allowance paid under the provisions of 38 U,S,C, 1805 to a child suffering from spina bifida who is the child of a Vietnam veteran; > Any amount of crime victim compensation (under the Victims of Crime Act) received through crime victim assistance (or payment or reimbursement of the cost of such assistance) as determined under the Victims of Crime Act because of the commission of a crime against the applicant under the Victims of Crime Act; and > Allowances, earnings, and payments to individuals participating in programs under the Workforce Investment Act of 1998.

EQUAL HOUSING OPPORTUNITY

ATTACHMENT II

2014 Income Limits
(HOME FUNDED PROJECT)

HOUSEHOLD SIZE	MEDIAN-INCOME (80% of Area Median)
1	**$34,000**
2	**$38,850**
3	**$43,700**
4	**$48,550**
5	**$52,450**
6	**$56,350**
7	**$60,250**
8	**$64,100**

Source: State of California Dept. of Housing and Community Development – HCD (Effective May 1, 2014)