

WAYNE COUNTY DPA APPLICATION

DOWNPAYMENT ASSISTANCE APPLICANT:

Thank you for making application for downpayment assistance with National Faith Homebuyers. In order for us to process your request, the following documents are required.

CUSTOMER

- 1. 60 Days Income for ALL Household Members
- 2. Most recent year tax return & W-2
- 3. 3 months of asset verifications (Bank Statements)
- 4. Application for homebuyers assistance (Note: Anyone 18+ must sign page 2)
- 5. Conflict of Interest Form (Exhibit E) Form MUST be Witnessed and Notarized
- 6. Copy of Driver's License: Front and Back of License for anyone 18+
- 7. Copy of Social Security Card for all household members
- 8. Completion of Homebuyer Education
- 9. Signed Lead Disclosure Form
- 10. Signed Freedom to Choose Form

LENDER

- 1. Flood Determination
- 2. Appraisal (1004)
- 3. First Mortgage Application (1003)
- 4. Title Insurance
- 5. Loan Estimate

INSPECTOR

- 1. C of O is required for any municipality that requires this for occupancy (A Private inspection may NOT be used as a substitute)
- 2. Passing HQS inspection if C of O is not required in the city or municipality

REALTOR

- 1. Signed Purchase Agreement & Copy of EMD (Earnest Money Deposit)
- 2. Notice to Seller (Exhibit D) Form must be Signed and Witnessed

When all documents have been received by National Faith Homebuyers; Confirmed for completion, accuracy and eligibility, the material will be submitted to Wayne County for final approval and issuance of a check. There is a 3-4 week county waiting period for final payment. These documents may be faxed in with previous authorization from National Faith Homebuyers.

If you should have any questions or concerns, please do not hesitate to contact me at 313-255-9500.

Thank You,

5460 W. Fort Street | Detroit, MI 48226 OR 32150 Dorsey Street Suite 15 Westland, MI 48186 Office: (313) 255-9500 | Fax: (313) 255-9555

Wayne County Down Payment Information

- You must be a first time homebuyer
- Your household income may not exceed the amount listed by HUD for your household size
- You have to complete the required education
- You must be purchasing in one of the following cities: Allen Park, Belleville, Brownstown, Ecorse, Flat Rock, Garden City, Gibraltar, Grosse Ile Twp., Grosse Pointe, Grosse Pointe Farms, Grosse Pointe Park, Grosse Pointe Woods, Hamtramck, Harper Woods, Highland Park, Huron Twp., Inkster, Melvindale, Plymouth Twp., River Rouge, Riverview, Rockwood, Romulus, Southgate, Sumpter Twp., Northville Twp., Plymouth, Trenton, Van Buren Twp., Wayne, Woodhaven, Wyandotte
- The following communities are NOT ELIGIBLE under the Wayne County program: Canton, Dearborn, Dearborn Heights, Detroit, Lincoln Park, Livonia, Redford, Taylor and Westland.
- Your assets may not exceed \$20,000.00
- The housing ratio must not exceed 35% and the debt to income ratio not exceed 43%
- The program affordability period forgives up to \$13,999 loan after the initial five-year ownership period. A lien will be placed on the property specifying these conditions.
- Each section of the application for assistance must be completed for each household/family member. If the amount for any family member is zero (0), you must enter a zero (0). Your application for assistance will not be processed if any information is missing. All lines that require a signature must be signed. If there is a witness line, it must be signed by a witness before it can be submitted. If there is a notary section, the document must be notarized before it can be submitted.
- All household income must be declared and will be counted toward the income limit for your family size
- NO FILE(S) WILL BE SUBMITTED TO WAYNE COUNTY FOR PAYMENT UNTIL ALL DOCUMENTATION HAS BEEN RECEIVED AND VERIFIED FOR ACCURACY, COMPLETION AND ELIGIBILITY
- If you are unsure how to complete your paperwork, please call or come into our office so a NFH representative can help you complete your paperwork.



Application for Homebuyer Assistance

Please complete this application as accurately as possible. Documentation verifying all sources of income, benefits, and assets must be submitted with this application. If you are unsure of which documents to submit, please contact the application processor. If you wish to provide additional information of explanation, you may use the back of this form. All responses must be provided by the loan applicant(s). Please type or print legibly.

Date:				,	J	,			
Applicant Name(s):									
Current Street Address, City	y, State, Zip Code	:							
Phone Number (Home, Wo	rk & Cell)								
Are you a first-time homeb	uyer? (circle one)	YE	S NO En	nail Ad	ddres	s:			
ALL INFORMA	ATION IS REQUIR	ED F	OR EACH FAMI	LY ME	MBE	R. IF TH	HE AMOUN	T IS Z	ERO (0),
	TE A ZERO (0). YO								
STARTIN Family Mem	IG WITH THE HEAD O	F HO	DUSEHOLD, LIST AID Date of		ONS R				ad of Household
Turning Wierr	ibel 3		Dute of t	J., (1)		- NO	actionsinp	10 110	au or riouscrioiu
		Aı	nnual Wages/	'Salar	ies				
Family Members Gross Base Employment Average Overtime									
		Λ ::-	nual Benefits	/Done	ions				
Family Members	Unemploymer		Social Secur			suranc	e Policy		Disability
Tailing Wellibers	Onemploymen		Social Secul	ity		isurario	e r oncy		Disability
Annual Public Assistance/Other									
Family Members	Public Aid		Alimony	Chil	d Sup	port	Annuiti	es	Other

Assets

Type of Assets	Current Cash Value	Annual Income
Checking Account		
Savings Account		
Money Market Account		
Stocks/Bonds		
Life Insurance Policy		
Additional Property		
Owned Business(es)		

Owned Business(es)				
Household Information: This information is for record keeping purposes only and will not be used to approve or deny assistance. Head of Household: (circle one)				
Single, Non-Elderly Elderly	Related/Single Parent	Related/Two Parents	Other	
Race/Ethnicity: Hispanic ()Yes () No (Circle One)				
White Black/African American Black/Af	frican American & White Asia	n Asian & White Asian/Pac	fic Islander	
American Indian/Alaskan Native America	n Indian/Alaskan Native & Whit	e Native Hawaiian/Other Pac	ific Islander	
American Indian/Alaskan Native & Black/African American Other Multi-Racial				
A signature and date are required in order for this application and statement of income to be considered valid. The applicant(s) certifies that all of the information in this application and all the information furnished in support of this application is given for the purpose of obtaining a loan and is true and complete to the best of the Applicant's knowledge and belief. Verification of any of the information contained in this application may be obtained from any source named herein. PENALTY FOR FALSE OR FRAUDULUENT STATEMENT: U.S.C. Title 18, Section 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies or makes any false, fictitious or fraudulent statements, representations, or makes or uses any false writing or document knowing the same or contain any false, factious or fraudulent statement or entry, shall be fined not more than \$10,000.00 or imprisoned no more than five years or both." All household members				

above the age of eighteen (18) are *REQUIRED* to sign this application, and submit all necessary employment/asset documentation.

Signature of Applicant	Date
Signature of Co-Applicant/Other House-Hold Member	Date
Signature of Other House-Hold Member	Date

For Office Use Only

Verified Annual Household Income Amount: \$	Approval for Assistance: YES NO
Reviewed By:	Date:
Lender Company Name:	Contact Person:
Telephone Number:	FAX Number:
Purchase Property Address, City, State, Zip Code:	

APPENDIX A **REVISED 1/2024**

PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME

May, 1995

After carefully reading the Lead Based Paint pamphlet, please detach this sheet and return it to your local housing authority, landlord, management office or community development office.

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Recei	
	м,

I HAVE RECEIVED A COPY OF THE PAMPHLET ENTITLED:

Protect Your Family From Lead In Your Home

Print Full Name	
Signature	
Address and apt#	
Date	

Revised 1/2024



WAYNE COUNTY HOMEBUYER PROGRAM

FREEDOM TO CHOOSE

The Wayne County First-Time Homebuyers Program services are designed to provide education and support towards the purchase of your first home. It's our goal to help you learn as much as possible about your housing options so you can go forward and make the best decision for yourself. When you're educated, you make informed decisions for you and your family.

You are encouraged to thoroughly evaluate mortgage loan products and lenders. You are free to choose the home, lender and realtor, regardless of any recommendations made by the County and the County's contractors. We're happy to refer you to others we know who do honest, fair work. Ultimately you choose who you want to work with.

Homebuyer	Date
Homebuyer Counselor	Date

Revised 1/2024

EXHIBIT D

NOTICE TO SELLER OF RESIDENTIAL PROPERTY OF THE UNIFORM RELOCATION ASSISTANCE AND REAL PROPERTY ACQUISITION POLICIES ACT OF 1970, AS AMENDED

Da	Date of Notice:	
1.	I, (We) property located at that no tenants have been living in this property within	I (We) hereby certify
2.	 I (We) have been notified that this property is downpayment and/or closing cost assistance from the l funded by the U.S. Department of Housing and Urban I 	Nayne County Homebuyer Assistance Program
3.	3. The sale of this property is not a result of acquisition Federal, State, County, or municipal agency and I (we (our) own free will.	,
4.	 I (we) hereby agree that I (we) am (are) not being disp have no right to Relocation Assistance provided for in t the above statement. 	
WI	WITNESSES: SE	LLER(S):

EXHIBIT E

AFFIDAVIT REGARDING CONFLICT OF INTEREST

I (we) the undersigned, being duly sworn, do certify that, to the best of my (our) knowledge: My (our) income is less than or equal to 80% of the area median income for a household of person(s) which is the first requirement to be a recipient of Wayne County Homebuyer Assistance. I (we) have not granted any gratuitous funds to any related party of Wayne County and are not related to any employee or officer of Wayne County or of the U.S. Department of Housing and Urban Development (HUD) who has a decision-making or monitoring relationship with the Wayne County HOME Program. I (we) understand the following citation from 24 CFR Part 92.356(b) and, to the best of my (our) knowledge none of the following situations or relationships applies to me (us): 24 CFR Part 92.356(b) Conflicts prohibited. No persons described in paragraph (c) of this section who exercise or have exercised any functions or responsibilities with respect to activities assisted with HOME funds or who are in a position to participate in a decision making process or gain inside information with regard to these activities, may obtain a financial interest or benefit from a HOME-assisted activity, or have an interest in any contract, subcontract or agreement with respect thereto, or the proceeds thereunder, either for themselves or those with whom they have family or business ties, during their tenure or for one year thereafter. 24 CFR Part 92.356 (c) Persons covered. The conflict of interest provisions of paragraph (b) of this section apply to any person who is an employee, agent, consultant, officer, or elected official or appointed official of the participating jurisdiction, State recipient, or sub recipient which are receiving HOME funds. WITNESSES: HOMEBUYER(S): STATE OF MICHIGAN))ss COUNTY OF WAYNE _____, before me, a Notary Public in_____County, personally appeared, , who acknowledged and executed this document.

Notary Public, _____ County, MI

My Commission Expires:

Acting in _____ County

Revised 1/2024