

City of Woonsocket, Rhode Island **FIRST HOME**

DOWN PAYMENT ASSISTANCE PROGRAM

PROGRAM INFORMATION & APPLICATION PACKAGE

THIS APPLICATION PACKAGE CONSISTS OF MULTIPLE PAGES AND INCLUDES A NUMBER OF FORMS, WHICH MUST BE COMPLETED AND RETURNED. IN ORDER TO EXPEDITE THE PROCESSING OF YOUR APPLICATION, PLEASE READ ALL PAGES CAREFULLY AND COMPLETE ALL FORMS CLEARLY AND ACCURATELY.

APPLICATION FORM - (SIGNATURE REQUIRED) - 1 OF 2 PAGES

Funded by the US Department of Housing & Urban Development (HUD) through the HOME Investment Partnership Program, the City of Woonsocket (the City) is administering the <u>FIRST HOME Down Payment Assistance Program</u>. The goal of the First Home Program is to <u>provide qualified Woonsocket home buyers with a down payment assistance loan in the amount of **up to \$7,500** to assist with down payment in the purchase of their first home. HOME is authorized under Title II of the Cranston-Gonzalez National Affordable Housing Act, as amended. Program regulations are at 24 CFR Part 92.</u>

The no-interest loan will be partially forgiven (50% of loan forgiven after 5 years) and partially deferred (50% of loan deferred). Repayment of the deferred loan is made at the time of sale, exchange or transfer of title. No portion of the forgivable portion will be prorated prior to expiration of the 5-year period. In case of loan default, the loan is recaptured according the City's Recapture Policy.

Applicants who meet the necessary qualifications will receive their loan on a first-come, first-served basis. There are limited funds available, and the City reserves the right to expand or terminate the program depending on the availability of funds and/or market conditions. The Property must meet the City and HUD's Property Condition Guidelines before closing to receive the assistance.

Privacy Act Notice Statement: The Department of Housing and Urban Development (HUD) is requiring the collection of the information derived from this form to determine an applicant's eligibility in a HOME Program and the amount of assistance necessary using HOME funds. This information will be used to establish level of benefit on the HOME Program; to protect the Government's financial interest; and to verify the accuracy of the information furnished. It may be released to appropriate Federal, State, and local agencies when relevant, to civil, criminal, or regulatory investigators, and to prosecutors. Failure to provide any information may result in a delay or rejection of your eligibility approval. The Department is authorized to ask for this information by the National Affordable Housing Act of 1990.

All applicant information is considered confidential

| Applicant Name(s) | | | | |
|------------------------|------------|----------|--|--|
| Present Street Address | | | | |
| City | State | Zip Code | | |
| Home Phone | Work Phone | Email | | |

APPLICATION FORM Continued – (SIGNATURE REQUIRED) – 2 OF 2 PAGES (APPLICATION TOTAL "PACKAGE" IS MULTIPLE PAGES – SEE BOTTOM OF PAGE FOR PAGE NUMBERS)

| List names and information of a | all pers | on(s) in the hous | sehold begini | ning with th | e head of | household |
|---|--|---------------------|---------------|-------------------------|---------------------|--------------|
| Name Date | ite of Birth Social Security Number Annu | | | ual Income (if over 18) | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| The following information perta- | ins to | the property to b | e purchased: | | | |
| Street Address | | | • | | | # of units |
| Purchase Price \$ | | Appraised Value \$ | | | Year home was built | |
| Down Payment Amount from appl | icant/bi | uyer(s) – not inclu | ding City dow | n payment | | \$ |
| Name of Mortgage Company | | | | | | Phone Number |
| Name of Loan Officer Estimate | | | Estimate | ed Closing Date | | |
| Name of Closing Attorney | | | | | I | Phone |
| Do you have a signed purchase & sales agreement? Yes | | | No | | | |
| Name of Buyer's Realtor | | Realty Company | 1 | | | Phone |
| Name of Listing Agent/Seller's Re- | altor | Realty Company | 1 | | | Phone |
| | | | | | | |

| The following information is for | r informat | tional purposes o | nly, and does not affect ar | n Applicant's eligibility: | |
|---|--------------|-----------------------|----------------------------------|--|-------------------|
| Head of household (check one) | Male | Female | Is any member of the hous | sehold disabled? [Yes No | |
| Ethnicity (check one) | | | Hispanic or Latino | Not Hispanic or Latino | |
| Race (check one) | | | | | |
| □White □BI | ack/Africa | n American DA | sian American Indian/A | Alaskan Native | |
| | ian/Other | Pacific Islander | American Indian/Alaskan | Native & White | |
| | ndian/Alas | kan Native & Black | k/African American | er multi-racial | |
| I have reviewed all parts of the FI | RST HOME | E application packag | e and understand the application | on requirements and eligibility criteria | i. I hereby apply |
| for a loan from the City of Woons | ocket. I agr | ee to comply with all | terms and conditions related to | o the loan. I understand the submiss | on of false or |
| misleading information may result in the rejection of this application. I have also read and understand the Warning statement at the bottom of this | | | | | |
| page. | • | • • | | , and the second | |
| . 0 | | | | | |
| Applicant Signature | | | | Date | |
| Applicant dignature | | | | Date | |
| Co-Applicant Signature | | | | Date | |
| To rippiloditi Olgilature | | | | Dato | |
| | | | | | |

NO CONFLICT OF INTEREST FORM – (SIGNATURE REQUIRED)

| APPLICANT CERTIFICATION | | |
|---|---|-----------------|
| I,, do hereby certify that of obtaining the City or its agent's approval or concurrence | no payment, bonus, commission or fee was given or taken for in connection with the procurement of this Loan. | or the purpose |
| official or appointed official of the participating jurisdiction, S | family or business ties, is an employee, agent, consultant, of State recipient, or subrecipient which are receiving HOME fund spect to activities assisted with HOME funds or are in a position through the threat to these activities. | s, who exercise |
| Applicant Signature | Date | |
| Co-Applicant Signature | Date | |

Release Form - (SIGNATURE REQUIRED)

PURPOSE: Your signature on this HOME Program Eligibility Release Form, and the signatures of each member of your household who is 18 years of age or older, authorizes the City of Woonsocket to obtain information from a third party, relative to your eligibility and/or participation in the **City of Woonsocket FIRST HOME Down Payment Program**.

THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.

| Inquiries may be made about the following items |
|---|
| Income (all sources) |
| Assets (all sources) |
| Child Care Expense |
| Handicap Assistance Expense (if applicable) |
| Medical Expense (if applicable) |
| Other (list) – use additional sheet, if necessary |
| Dependent Deduction |
| Full-Time Student |
| Handicap/Disabled Family Member |
| Minor Children |

AUTHORIZATION: I authorize the City of Woonsocket and HUD to obtain information about me and my household that is pertinent to eligibility for participation in the HOME Program. I acknowledge that:

- (1) A photocopy of this form is as valid as the original.
- (2) I have the right to review the file and the information received using this form (with a person of my choosing to accompany me).
- (3) I have the right to copy information from this file and to request correction of information I believe inaccurate.
- (4) All adult household members will sign this form and cooperate with the Applicant in this process.

| Head of Household—Family Member #1 (Head of Household) | | | | |
|--|--------------|------|--|--|
| Signature | Printed Name | Date | | |
| Other Adult Member of the Household—Family Member #2 | | | | |
| Signature | Printed Name | Date | | |
| OTHER ADULT MEMBER OF THE HOUSEHOLD—FAMILY MEMBER #3 | | | | |
| Signature | Printed Name | Date | | |
| OTHER ADULT MEMBER OF THE HOUSEHOLD—FAMILY MEMBER #4 | | | | |
| Signature | Printed Name | Date | | |

ANTICIPATED INCOME FORM - (SIGNATURE REQUIRED) - READ THE FOLLOWING INSTRUCTIONS.

CITY OF WOONSOCKET PROGRAM INCOME ELIGIBILITY **PLEASE READ THIS SECTION PRIOR TO COMPLETING FORM**Enter the household income expected to be received during the next 12 months. **All household members must fill out a column**. Submit proof of all anticipated income. Income documentation cannot be more than 6 months old. Submit <u>2 months of paystubs</u>, <u>1040 tax return</u>, <u>benefit award letters</u>. If no income, indicate zero in column fields & sign as certification of no income. Thank you.

| COMPUTING IRS 1040 SERIES ADJUSTED GROSS INCOME | Each household member completes a column. If no income, please indicate a 0 in appropriate field(s) | | | Subtotal (add a- d) | |
|--|---|----|----|---------------------------|----|
| CLIENT NAME: | a. | b. | C. | d. | e. |
| 1. Wages, salaries, tips | | | | | |
| 2. Taxable interest | | | | | |
| 3. Dividend income | | | | | |
| 4. Taxable refunds/ credits/offsets of state/ local | | | | | |
| 5. Alimony received | | | | | |
| 6. Business income (or loss) | | | | | |
| 7. Capital gain (or loss) | | | | | |
| 8. Other gains (or losses) | | | | | |
| 9. Taxable amount of IRA distributions | | | | | |
| 10. Taxable amount of pensions and annuities | | | | | |
| 11. Rental real estate, royalties, partnerships, | | | | | |
| 12. Farm income (or loss) | | | | | |
| 13. Unemployment compensation | | | | | |
| 14. Taxable amount of Social Security benefits | | | | | |
| 15. Other income | | | | | |
| 16. Subtotal (lines 1-15) | | | | | |
| 17. IRA deduction | | | | | |
| 18. Medical savings account deduction | | | | | |
| 19. Moving expenses for Armed Forces member | | | | | |
| 20. Deductible part of self-employment tax | | | | | |
| 21. Self-employed health insurance deduction | | | | | |
| 22. Keogh and self-employed SEP and SIMPLE | | | | | |
| 23. Penalty on early withdrawal of savings | | | | | |
| 24. Paid alimony | | | | | |
| 25. Educator expenses | | | | | |
| 26. Certain business expenses of reservists, | | | | | |
| 27. Student loan interest deduction | | | | | |
| 25. Subtotal (lines 17-24) | | | | | |
| 26. Subtract line 25 from line 16. This is Adjusted Gross Income as defined by the Internal Revenue Service (IRS) Form 1040 series for individual Federal annual income tax reporting purposes | | | | | |

Your signature on this City of Woonsocket (HOME) Program form, and the signatures of each member of your household who is 18 years of age or older, certifies that all information presented above is complete and accurate. Signatures also authorize the City of Woonsocket to obtain information from any connected third party concerning your eligibility and continued participation in this Program.

| Head of Household (print name) a. | Head of Household Signature | Date |
|---|---|------|
| Other Adult Member of Household (print name) b. | Other Adult Member of Household Signature | Date |
| Other Adult Member of Household (print name) c. | Other Adult Member of Household Signature | Date |
| Other Adult Member of Household (print name) d. | Other Adult Member of Household Signature | Date |

FIRST-TIME HOME BUYER CERTIFICATION FORM – (SIGNATURE REQUIRED)

| I,definition: | _, certify that I (we) are first-time home buyers as described in | the following |
|---|---|---------------|
| • | ndividual, and his or her spouse who have not owned a home duriproperty. The term first-time home buyer also includes a displaced nome with a spouse. | • |
| Signature of Applicant/Home Buyer | Date | |
| Printed Name of Applicant /Home Buyer | | |
| Signature of Co-Applicant/ Home Buyer | Date | |
| Printed Name of Co-Applicant /Home Buye | er | |

LENDER AFFIDAVIT FORM - CREDIT APPROVAL FORM TO BE COMPLETED BY PRIMARY LENDER — (LENDER & NOTARY SIGNATURE REQUIRED) - Page 1 of 2 Pages

| Primary Lender: |
|--|
| , in order to assist in the purchase of a residential property |
| located at, has |
| applied to the First Home Down Payment Assistance Program administered by the City of Woonsocket, RI, and funded by the US Department of Housing & Urban Development HOME Investment Partnership Program |
| To process the application, information from the applicant's primary lender is required. The applicant has signed a form (attached) authorizing the release of pertinent information. |
| Please review and complete this form and return it to: |
| Housing Division, Department of Planning & Development City of Woonsocket, RI, 169 Main Street, PO Box B, Woonsocket, RI 02895 |
| If you have questions, please contact the program manager at 401-767-9228. |
| City of Woonsocket First Home Down Payment Assistance PROGRAM SUMMARY |
| Funded by the US Department of Housing & Urban Development (HUD) through the HOME Investment Partnership Program, the City of Woonsocket (the City) is administering FIRST HOME Down Payment Assistance Program. The goal of the First Home is to provide qualified Woonsocket home buyers with a loan in the amount of up to \$7,500 to assist with down payment in the purchase of their first home. The no-interest loan will be partially forgiven (50% of loan forgiven after 5 years) and partially deferred (50% deferred). Repayment of the deferred loan is made at the time of sale, exchange or transfer of title. No portion of the forgivable portion will be prorated prior to expiration of the 5-year period. In case of loan default, the loan is recaptured according the City's Recapture Policy. Applicants who meet the necessary qualifications will receive their loan on a first-come, first-served basis. There are limited funds available, and the City reserves the right to expand or terminate the program depending on the availability of funds and/or market conditions. |
| Name of primary lender responsible for issuing the purchase money loan (in first position) for the purchase of the above identified residence: |
| NAME |
| Street Address |
| City State Zip |

LENDER AFFIDAVIT CONTINUED.

Seller's Title Company:

| \$ |
|---|
| \$ |
| \$ |
| \$ |
| \$ |
| \$ |
| • Yes • No |
| MPLETED BY PRIMARY LENDER — (LEND |
| eting all requirements of our lending institution |
| |
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| e |
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| |
| one |
| |

City of Woonsocket .169 Main Street . PO Box B . Woonsocket, RI 02895 . 401-767-9233 (P) . 401-766-9312 (F) . tskoback@woonsocketri.org

Phone

LENDER AFFIDAVIT, CONTINUED

The above Program Summary has been read. The above financial information is accurate and complete.

| Lending Officer Signature Name of Lending Institution | |
|--|---------------|
| Lending Officer - Print Name Address | |
| Telephone e-mail | |
| City Zip | |
| On this day of, 20, before me personally appeared, wh | o being first |
| duly sworn says that they executed the above instrument and that said person was authorized to representations by the above lending institution, and that said instrument was signed on behalf of lending institution. | make the |
| Subscribed and sworn to before me this day of, 20 | |
| Notary Public (Stamp) | |
| My commission expires: | |

Subsidy Layering Review

BUYER (or Lender) MUST COMPLETE SECTIONS I, II, III and IV OF THIS SUBSIDY LAYERING REVIEW

The City of Woonsocket's subsidy layering process for First Time HOME Buyers is required as part of the First Home Down Payment Assistance Program underwriting requirement. The City must demonstrate that it is not investing any more HOME funds, alone or in combination with other funds, than is necessary to provide quality, affordable, and financially viable housing for at least the duration of the affordability period.

*** THERE WILL BE NO CASH BACK TO BUYER ALLOWED WITH THE EXCEPTION OF BUYER CONTRIBUTIONS (Deposit, Appraisal, Credit, Inspection fees POC) *** Assistance is contingent upon final Settlement Statement evidencing project was not over-subsidized. ***

The Subsidy layering process includes a review of the following:

- I. All Sources and Uses of Funds to ensure a household or family is not receiving excessive subsidy given the need
- II. Front and Back End Ratios
- III. Loan to Value
- IV. Applicant Certification of No Additional Governmental Assistance

Before providing down payment assistance, the City HOME Program Administration must assess if other governmental assistance has been, or is expected to be, made available to the project. The aggregate amount of assistance from HUD and from other sources is considered to ensure the feasibility of the assisted project.

If no such governmental assistance is to be provided at the time of the application or in the future, the applicant(s) should certify to that fact on the <u>Woonsocket Subsidy Layering Certification</u> form in Section IV of this Subsidy Layering Review section.

What is Governmental Assistance?

Governmental assistance includes any loan, grant, (including Community Development Block Grant), guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance from the Federal, State or local government for use in, or in connection with, a specific housing project (including 203k funds).

What are Maximum Per Unit Subsidy Limits

The amount of HOME funds that a PJ may invest on a per-unit basis in affordable housing may not exceed the per unit dollar limits established under section 221(d)(3) of the National Housing Act for elevator-type projects, involving nonprofit mortgagors that apply to the area in which the housing is located.

What if the project is over subsidized?

If the City determines that the total amount of HOME assistance and other governmental assistance exceeds the amount that the City determines is necessary to make the project feasible due to the unreasonableness of the costs and/or the

City of Woonsocket .169 Main Street . PO Box B . Woonsocket, RI 02895 . 401-767-9233 (P) . 401-766-9312 (F) . tskoback@woonsocketri.org

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government

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projected rate of return, the City can reduce the amount of HOME assistance. The City may also consider other adjustment options such as reduce the term of the loan in order to lower the rate of return; or deny HOME assistance if the applicant refuses to make reasonable adjustments or to limit its return/costs.

Subsidy Layering Review, Continued

SOURCES AND USES:

1) Sources proposed (funds to pay costs, both private and public) of funds and the dollar amount(s) for each respective source, 2) Uses of all funds (one-time costs, including acquisition costs, rehabilitation/or construction costs, financing costs and professional fees) associated with the project.

Sources of Funds

The following documents are required to assess sources of all funds and their commitments:

- (1)Commitment letters with all terms and conditions for all sources including:
- -Mortgages, Grants, Subordination agreements, bridge (interim) loans and investment tax credits (historical, low-income, if applicable) and
- (2)Bank Loan Application (Form 1003)
- (3)If the applicant is a partnership, a copy of the partnership agreement, which will indicate the cash contributions by the general partner(s) and/or limited partner(s).

Uses of Funds:

The following documents are required:

- (1) Earnest money agreement, Purchase & Sales Agreement, option or closing statement for land and/or building(s).
- (2)Construction cost estimate;
- (3)Construction contract or preliminary bid(s);
- (4) Agreements governing the various reserves which are capitalized at closing (to verify that the reserves cannot be withdrawn later as fees or distributions);
- (5)Appraisal to substantiate the value of the land and the value of the property after rehabilitation or the structure being built; Loan to Value is typically no more than 60-80%. and
- (6)if low-income housing tax credits are utilized, documentation on the syndication costs (legal, accounting, tax opinion, etc.) from the organization/individual who will syndicate and sell the offering to ensure that the project can support the fees necessary to syndicate/fund the project. All assumptions in the offering should be verified in the supporting documentation.

I. COMPLETE THE FOLLOWING SOURCES AND USES STATEMENT BY INDICATING AMOUNTS:

| SOURCES (Where funds are coming from) | | USES (Needed by Buyer) | | |
|---------------------------------------|----------|-------------------------------|----|--|
| Principal Mortgage | \$ | Purchase Price (P&S) | \$ | |
| Secondary Mortgage | \$ | Settlement Charges (from GFE) | \$ | |
| Seller Concession/Credit \$ | 5 | Other | \$ | |
| Grants (EXCLUDE Woon.) | \$ | | | |

| Buyer's Deposit | \$ | _ | |
|--------------------------------|------------------------------|---|---|
| Appraisal Cost | \$ | _ | |
| Credit Check Cost | \$ | _ | |
| Other Buyer Costs | \$ | _ | |
| | ENTER TOTAL | L OF ALL SOURCES LISTED | |
| EN | ENTER TOTAL | L OF ALL SOURCES LISTED OF ALL USES TO DEDUCT FROM SOURCES RED OR REMAINING | = |
| - EN dy Layering Review, | ENTER TOTAL TER TOTAL REQUII | OF ALL USES TO DEDUCT FROM SOURCES | = |

Provided by lender on Lender Affidavit Form found on Pages 8 and 9 of the City Down Payment Assistance Application:

The review of these ratios is to help the City determine a buyer's ability to pay.

II. COMPLETE THE FOLLOWING FRONT AND BACK END RATIO AMOUNTS

- AS PROVIDED BY LENDER ON CITY OF WOONSOCKET APPLICATION PAGES 8 AND 9:

| FRONT END: |
|--|
| Housing expenses to Income |
| 3 - 1 - 1 - 1 |
| ENTER FRONT END RATIO: % |
| (Typical Front end ratio range of 25-33%) |
| (Typisai Tient Sha Tang Si 20 3076) |
| BACK END RATIO: |
| Total debt to income |
| |
| ENTER BACK END RATIO: % |
| (Back end ratio, typical 36-41%) |
| (Back end ratio, typical so 4170) |
| |
| LOAN TO MALLIE (LTM) |
| LOAN TO VALUE (LTV): |
| Loan to Value (LTV) is determined to consider risk and assess the project debt and collateral. |
| The LTV is calculated by Loan amount divided by appraised value. |
| LTV is typically no more than 95-97% for affordable housing |
| |
| III. COMPLETE THE FOLLOWING LTV CALCULATION AND PROVIDE THE LTV %: |
| |
| Divide the Loan Amount by the Appraisal Value: |
| • • • • |

LTV = _\$ Enter Loan Amount (principal mortgage)

LTV = _____% Enter

Enter Value (Sales Comp Value from Appraisal)

SUBSIDY LAYERING REVIEW FORM – (SIGNATURE REQUIRED)

APPLICANT CERTIFICATION

| governmental assista application or in the fu | nce provided or to be provided t | ill obtain a formal certification from each applicant concerning the othe project. If no such assistance is to be provided at the time of certify to that fact. The applicant must also certify that should other City will be notified promptly. |
|---|----------------------------------|---|
| I (print name) in the project being ur | ndertaken at | hereby certify as Borrower and Applicant that |
| - | | overnmental assistance is being provided or will be provided in the is sought in the future, the City will be notified promptly. |
| SIGNED | DATE | |

WATCH OUT FOR LEAD BASED PAINT POISONING NOTIFICATION FORM – Page 1 of 2 pages (Signature Required)

TO: OWNERS AND TENANTS OF HOUSING CONSTRUCTED BEFORE 1978

If a property was constructed before 1978, there is a possibility it contains lead-based paint.

PLEASE READ THE FOLLOWING INFORMATION CONCERNING LEAD PAINT POISONING.

Sources of Lead Based Paint

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

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

Symptoms of Lead-Based Paint Poisoning

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

Advisability and Availability of Blood Lead Level Screening

If you suspect that your child has eaten chips of paint or someone told you this, you should take your child to the doctor or clinic for testing. If the test shows that your child has an elevated blood lead level, treatment is available Contact your doctor or local health department for help or more information. Lead screening and treatment are available through the Medicaid Program for those who are eligible. If your child is identified as having an elevated blood lead level, you should immediately notify the Community Development or other agency to which you or your landlord is applying for rehabilitation assistance so the necessary steps can be taken to test your unit for lead based paint hazards. If your unit does have lead-based paint, you may be eligible for assistance to abate that hazard.

Precautions to Take to Prevent Lead-Based Paint Poisoning

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

- (a)Cover all furniture and appliances;
- (b)Get a broom or stiff brush and remove all loose pieces of paint from walls woodwork, window wells and ceilings;
- (c) Sweep up all pieces of paint and plaster and put them in a paper bag or wrap them in newspaper. Put these packages in the trash can. DO NOT BURN THEM.
- (d)Do not leave paint chips on the floor or in window wells. Damp mop floors and windowsills in and around the work area to remove all dust and paint particles. Keeping these areas clear of paint chips, dust and dirt is easy and very important; and

(e)Do not allow loose paint to remain within your children's reach since children may pick loose paint off the lower part of the walls.

Homeowner Maintenance and Treatment of Lead-Based Paint Hazards

As a homeowner, you should take the necessary steps to keep your home in good shape. Water leaks from faulty plumbing, defective roofs and exterior holes or breaks may admit rain and dampness into the interior of your home. These conditions damage walls and ceilings and cause paint to peel, crack or flake. These conditions should be corrected immediately. Before WATCH OUT FOR LEAD BASED PAINT POISONING NOTIFICATION FORM – PAGE 2 OF 2 PAGES (SIGNATURE REQUIRED)

repainting, all surfaces that are peeling, cracking, chipping or loose should be thoroughly cleaned by scraping or brushing the loose paint from the surface, then repainted with two (2) coats of non-leaded paint.

Instead of scraping and repainting, the surface may be covered with other material such as wallboard, gypsum or paneling. Beware that when lead-based paint is removed by scraping or sanding, a dust is created, which may be hazardous. The dust can enter the body either by breathing or swallowing it. The use of heat or paint removers could create a vapor or fume which may cause poisoning if inhaled over a long period of time. Whenever possible, the removal of lead-based paint should take place when there are no children or pregnant women on the premises.

SIMPLY PAINTING OVER DEFECTIVE LEAD-BASED PAINT SURFACES DOES NOT ELIMINATE THE HAZARD. REMEMBER THAT YOU CAN AS AN ADULT PLAY A MAJOR ROLE IN THE PREVENTION OF LEAD POISONING. YOUR ACTIONS AND AWARENESS ABOUT THE LEAD PROBLEM CAN MAKE A BIG DIFFERENCE.

Tenant and Home buyer Responsibilities

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

| I have reviewed the notice entitled "Watch Out for Lead Paint Poisoning." | | | | |
|---|------|--|--|--|
| Print Full Name | Date | | | |
| Signature | | | | |
| Print Full Name | Date | | | |
| Signature | | | | |

APPLICANT ELIGIBILITY, APPLICATION INSTRUCTIONS, AND UNDERWRITING STANDARDS

Eligibility Criteria

Applicant must be 18 years of age or older

Applicant must meet income eligibility for his/her household size as determined by HUD (included in the application package)

Real property must not exceed HUD's Homeownership value limits for Providence County (included in the application package)

Applicants must be a first-time home buyer. A first-time home buyer is an individual, and his or her spouse who have not owned a home during the 3-year period ending on the date of purchase of property. The term first-time home buyer also includes a displaced homemaker or a single parent who has only owned a home with a spouse.

Applicants must occupy the home as their primary and principal residence for the affordability period.

The condition of the property must meet HUD Property Standards BEFORE ACQUISITION (Guidelines include Uniform Physical Condition Standards definitions).

Applicants must receive an approved FHA, VA, or conventional loan. The applicant's Title Company or closing agent must be willing to execute and provide the City with all the real estate documents (detailed within this application package).

Eligible properties must be zoned for residential use only and are limited to Single Family (1-4 units).

An Environmental Review (24 CFR 92.352) must show there is no environmental adverse impact.

According to 24 CFR part 58. No funds may be committed to a HOME activity or project before the completion of the environmental review and approval of the request for release of funds and related certification, except as authorized by 24 CFR part 58.

The City loan must be targeted toward down payment (and later indicated as such on the HUD-1 Settlement Statement as Woonsocket Down Payment Loan).

The purchase of said property must not lead to the displacement of any individual other than the seller and his/her immediate family.

Applicant must pass all City underwriting standards, which includes but is not limited to a review of primary lender application and commitment, as well as other financial resources.

INSTRUCTIONS

Review, complete, and submit the following forms, which are found in this application package:

Application Form

No Conflict of Interest Certification Form

Eligibility Release Form

Income Eligibility Form

Subsidy Layering Review Form

First-Time Buyer Certification Form

Primary Lender Preliminary Credit Approval Form

Watch Out For Lead Based Paint Poisoning Notification Form

City of Woonsocket .169 Main Street . PO Box B . Woonsocket, RI 02895 . 401-767-9233 (P) . 401-766-9312 (F) . tskoback@woonsocketri.org

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government

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Collect and submit the following documents:

- Income verification (check stubs, tax returns, other documentation). Two (2) months of current pay stubs and copy of CURRENT or last filed tax return (IRS Form 1040 and Form 4506) and verification for any other source of income for applicant/co-applicant and any family member 18 years or older. If an applicant/co-applicant did not file a previous year's tax return, they must submit a letter stating why there was no tax return filed for the previous year, as well as an original letter from current employer, on company letterhead, stating expected rate of pay and expected number of scheduled hours for the upcoming year
- Copy of Driver's License (if license is unavailable, provide a picture ID)
- Real Estate Purchase and Sales Contract
- Seller's Lead Disclosure
- Preliminary title report/commitment stating property appears free and clear for sale to applicant
- Real estate appraisal
- Home buyer counseling course certificate from a HUD approved course or counseling agency
- Copy of bank loan application (primary lender)

If applicable, provide written information of any participation by a co-applicant, co-owner, co-borrower, or cosigner that will be participating in the purchase of the home whose name does not appear on the initial city application. Include name, relationship to applicant, and in what capacity they will be participating in the purchase. The city must be informed and approve of their participation before closing.

TIMING

Upon approval of the application (includes Program property condition assessment), and a signed Loan Agreement, the City upon request will issue a Letter of Commitment, and start the accounting processes and issue a check made payable to the escrow agent, which will be disbursed according to the Letter of Commitment.

The City must be notified at least 14 working days prior to the date of closing.

After closing, the escrow agent is to return to the City all the completed documents required by Program.

These documents include:

- Mortgage (recorded copy; currently 4 pages including Exh. A) This document states the City is a beneficiary whereby the City has a lien on the purchased property until the loan is repaid.
- Closing Disclosure/Settlement Statement and Loan Estimate
- Promissory Note This document states that the Applicant agrees to pay the City the loan amount if they should move, sell or refinance the HOME-Assisted Property.
- Copy of the final Title Report or copy of Title Insurance policy issued to Applicant/Buyer.
- Copy of home owner's insurance certificate listing the City as a named insured, as well as a certificate of flood insurance, if property is in a designated flood plain.

PROGRAM-RELATED POLICIES

Program Property Condition Policy

The condition of the property must meet HUD Property Standards BEFORE

<u>CLOSING/ACQUISITION</u>. (Guidelines include Uniform Physical Condition Standards definitions and RI Property Maintenance Code). The Program Construction Supervisor will perform a Buyer Program Inspection and provide a report to the buyer based on observed deficiencies which must be corrected before closing. It is recommended that the City Program inspection be conducted within the agreed upon inspection period to assist in negotiating repairs.

The Property Condition Assessment will be completed by the City on all homes for health and safety concerns and for Lead Based Paint hazards for homes built prior to 1978. Buyer is responsible for obtaining and providing the City with an "Acceptable Clearance Certificate" by a licensed lead inspector if required and correcting all repairs noted on the Program inspection.

Property Condition/Standards Inspection – to be conducted by the City. NOTE! The Program Inspection does not replace a formal home inspection completed by a professional. A home inspection is recommended by the Program in addition to the city's program inspection.

*** It is recommended (but not required) for all parties involved to have the City's HOME Program inspection at the same time as your professional home inspection within the period allowed. ***

Equal Housing Opportunity Policy

The City of Woonsocket HOME Program is funded through the US Dept. of Housing & Urban Development Home Investment Partnership Program. In the administration of all City programs, the City of Woonsocket makes every effort to ensure non-discriminatory treatment, outreach and access to program resources.

Please let us know if your program participation requires specific accommodations for a disability, or if you need an interpreter and/or other auxiliary aid for effective communication.

Flood Insurance Policy

HOME-Assisted property owners are mandated to purchase and maintain flood insurance for structures located within the Special Flood Hazard Area or 100-year floodplain and submit policy documentation, as requested.

Refinancing / Subordination Policy

The City of Woonsocket is not legally required to agree to subordinate its mortgage to any new financing position. However, the City will consider the subordination of its mortgage(s) for refinancing proposals that adhere to the policy guidelines as detailed in the Subordination Request Application, available from the City of Woonsocket. The City will subordinate TO A SECOND POSITION ONLY.

Predatory Lending Policy

The City of Woonsocket opposes predatory lending. A predatory loan is an unsuitable loan designed to exploit vulnerable and unsophisticated borrowers. Predatory loans are a subset of sub-prime loans. A predatory loan

has one or more of the following features: 1) charges more interest and fees than is required to cover the added risk of lending to borrowers with credit imperfections; 2) contains abusive terms and conditions that trap borrowers and lead to increased indebtedness; 3) does not take into account the borrower's ability to repay the loan; and 4) often violates fair lending laws by targeting women, minorities, and communities of color. Call The Housing Network at 1-800-4363180 for more information. The Housing Network offers public education aimed at stopping predatory lending practices in the state. They educate families and individuals about how to avoid predatory lending scams and about available community resources. The Housing Network offers families a safe place to call before they sign anything that puts their home at risk. Additional lending information is available at www.consumerfinance.gov.

Recapture Policy

If the loan falls into default or the assisted owner elects to sell prior to the expiration of the affordability period, the entire amount of HOME assistance becomes due. The forgivable loan portion is forgiven in one lump sum upon the expiration of the affordability period.

However, if the owner elects to sell and there are no net proceeds from the sale, or the net proceeds are insufficient to repay the HOME investment due, 24 CFR Part 92 Interim Rule revised 92.254 clarifies that recaptures are limited to the amount of net proceeds (sale price minus loan repayment (other than HOME funds) and any closing costs).

Conflict of Interest Policy

No payment, bonus, commission or fee will be given or taken for the purpose of obtaining the City or its agent's approval or concurrence in connection with the procurement of this Loan.

No persons described in paragraph below titled "Persons Covered" 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.

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 subrecipient which are receiving HOME funds.

Uniform Relocation Act

Because the Applicant, not the City, will take responsibility for the selection and negotiation of a dwelling unit, the requirements of the Uniform Relocation and Real Property Acquisition Policies Act of 1970 (URA) are not triggered. The City reserves the right to deny assistance in circumstances in which compliance with the URA may be required.

HUD APPROVED AGENCY HOME BUYER COUNSELING COURSES

Buyers receiving the DPA must complete a First Time Buyer class with a HUD agency.

Offered by:

WNDC/NeighborWorks 719 Front Street, Suite 103 Woonsocket, RI 02895 401-762-0074 x 208

Housing Network of RI 1070 Main Street Pawtucket, RI 02860 401-521-1461

RI Housing 44 Washington Street Providence, RI 02903 401-457-1130

HUD Income Limits and HOME Purchase Price Limits (SUBJECT TO CHANGE)

MAXIMUM ANNUAL HOUSEHOLD INCOME (effective 6/2021 and subject to change) – Adjusted gross income as defined by the Internal Revenue Service (IRS) Form 1040 series for individual Federal annual income tax reporting purposes.

| Household Size | | | | | | | |
|----------------|----------|----------|----------|----------|----------|----------|----------|
| 1 PERSON | 2 PERSON | 3 PERSON | 4 PERSON | 5 PERSON | 6 PERSON | 7 PERSON | 8 PERSON |
| 48,450 | 55,400 | 62,300 | 69,200 | 74,750 | 80,300 | 85,850 | 91,350 |

The above figures represent 80% Area Median Income Limits (AMI) and are subject to change.

HOME PURCHASE PRICE LIMITS

Real property must not exceed HUD's Homeownership value limits for existing homes in Providence County. The following **existing HOME Purchase Price limits are effective 2021**

| | 1 unit/SF | 2 units | 3 units | 4 units |
|-------------------|-----------|-----------|-----------|-----------|
| EXISTING Homes | \$254,000 | \$325,000 | \$394,000 | \$488,000 |
| NEW CONSTRUCTION | \$315,000 | \$404,000 | \$489,000 | \$606,000 |

If you have any questions or concerns regarding the application process, please call the Program Manager at

401-767-9233.

MAIL OR DELIVER DOCUMENTS TO:

City of Woonsocket, 169 Main Street, PO Box B Housing Division Department of Planning and Development Woonsocket, RI 02895 FAX (401) 766-9312, email: tskoback@woonsocketri.org