



Thistle Communities / Community Land Trust (CLT) Ownership at: Mapleton Mobile Home Park

What is CLT homeownership at Mapleton?

Mapleton Mobile Home Park is one of the many affordable ownership opportunities Thistle T offers throughout Boulder County. At Mapleton, Thistle owns the land. The owners' association, Mapleton Home Association (MHA) rents the land from Thistle, and oversees a professional management company to manage the Park and to rent the individual homesites to the mobile home owners. 120 of the 135 homesites at Mapleton are permanently affordable, and have a "rent tier" designation.

How do the affordable rent tiers work?

To apply, complete the Common application which Thistle uses to determine your income and assets.

Based on your income, you may qualify for one or more of the 4 different affordable homesite rent tiers.

REMEMBER: The rent is associated with the homesite, not with the household wishing to purchase a home.

EXAMPLE: If Jane Doe qualifies for the 50% rent tier, but she buys a home on a homesite that is designated as a 60% homesite, then she pays \$445 (60% rent tier level rent) per month to live on this homesite. To keep the home affordable over time, **sellers must sell to someone who qualifies through Thistle for that rent tier.**

How is owning at Mapleton similar to owning at other mobile home parks?

Mapleton owners must maintain their home, pay taxes on it, and sell their home when they choose to, working with Thistle to do so.

Program Criteria for Applicants:

- Be income and asset-qualified:

Household Size	30% AMI rent tier	40% AMI rent tier	50% AMI rent tier	60% AMI rent tier	2011 Liquid Asset Limitations*
One	\$19,750	\$26,280	\$32,850	\$39,420	\$50,240
Two	\$22,550	\$30,040	\$37,550	\$45,060	\$57,360
Three	\$25,350	\$33,800	\$42,250	\$50,700	\$64,560
Four	\$28,150	\$37,520	\$46,900	\$56,280	\$71,680
Five	\$30,450	\$40,560	\$50,700	\$60,840	\$77,440
Six	\$32,700	\$43,560	\$54,450	\$65,340	\$83,800

*In addition, each adult household member may have up to \$50,000 in retirement accounts. Retirees aged 62 and over may each have an additional \$25,000 in retirement assets.

- Determine how you will pay for the mobile home (cash, possible owner-financing, bank or credit union loan, etc.)
- Buyers cannot own other residential property at time of purchase of CLT home
- Priority is given to households that meet the Thistle CLT minimum occupancy guidelines (for example, with a 3 bedroom home, priority is given if there are at least 2 people in your household)
- Priority is given to households that live or work in the city in which the property is located
- Each adult in the household must pass a background check prior to purchasing their home (credit and criminal) through Shockor, 1566 Pearl, Denver, CO 80201. Phone: (303) 861-4667 They will charge a minimal application fee every adult they must check.

Thistle may take 1 - 3 weeks to complete the application process



How will I purchase my mobile home?

Many of the mobile homes at Mapleton are older, and as such, there are few financing options for them.

- Most mobile homes at the Mapleton Mobile Home Park are purchased with cash. Some buyers have used cash gifts from relatives or friends.
- Other options for buyers are:
 - Negotiate a Seller-finance arrangement. A few sellers have been willing to carry the financing for the new buyer, and have recorded a Chattel Mortgage with the Boulder County Clerk and Recorder.
 - A few owners have been able to get a loan through their banks. This would either be a personal loan, or a loan similar to a car loan.
 - Private investors may also loan on mobile homes, but the interest rate is often very high (10% or higher).





Where People Want To Live

Thistle Communities
Mapleton Mobile Home Park
Community Land Trust (CLT) Application
(Supplement to the Boulder County Homeownership Programs Common Application)

For Staff Use: Date/Time rec'd _____ Staff Member's Initials _____
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Please submit this application directly to Thistle Communities.

Date: _____

Name: _____

Social Security #: _____

Address: _____

City/State/Zip Code: _____

Phone: Home: _____ work: _____

Fax: _____ cell: _____

E-mail: _____

Program Requirements:

Your application for a Thistle home will be complete only after Thistle has received your Boulder County Homeownership Programs Common Application and supporting documents (either directly from you OR from the other agency to which you submitted the Common Application and documents), your income and assets have been evaluated and all of the following program requirements are met. Please answer the following questions regarding our program requirements. This information will help us determine your eligibility for a Thistle CLT home. In addition to this Thistle CLT Application, you must also complete the Boulder County Homeownership Programs Common Application. Have you submitted the Common Application and supporting documents to one of the participating agencies (City of Boulder, City of Longmont, or Thistle)?

Yes No

- City of Boulder
- City of Longmont
- Thistle

1. If you answered yes to question 1, to which agency did you submit the Common Application and supporting documents?



Your Housing Preferences:

Earliest date that you could move: _____ Latest date that you could move: _____

Household size (including yourself and those who would be living in the home): _____

Number of bedrooms you want (mark all that apply): 1 2 3 4+

Please note:

- Priority is given to applicants that meet the Thistle CLT minimum occupancy guidelines (e.g., with a 3 bedroom home, priority is given if there are at least 2 people in your household)
- Priority is given to households that live or work in the city in which the property is located.

Reasonable Accommodation: If you or a member of your household is an individual with a disability, you have the right to request reasonable accommodation for that disability. Thistle is committed to assuring that each individual has an equal opportunity to use and enjoyment of the benefits of this program. For more information, please call (303) 443-0007.

I/we certify the following: the information provided in this Thistle CLT Application is true and complete to the best of my/our knowledge. I/we are aware that any misrepresentation/omission will result in the forfeiture of my/our right to be eligible for a CLT home. Inquiries may be made to verify this information. I/we authorize representatives from Thistle to supply and receive information to/from the City and County of Boulder, the City of Lafayette, the City of Longmont housing programs, other housing programs, down payment assistance sources/programs, my/our employer(s), my/our financial institutions, my/our Realtor, and/or my/our Mortgage Lender to verify information contained in this Application and/or for applicant's qualification for other programs. I/we understand that the income I/we use to qualify for a mortgage loan must be the same as the income I/we claim in this Application. I/we understand that information in this Application may be shared with program funders for the purposes of Thistle's funding compliance.

The completion of this Thistle CLT Application form and/or completing the CLT program requirements in no way guarantees a home. Thistle Community Housing is committed to a fair and equitable process for each applicant.

Signature

Date

Signature

Date

Thistle Communities
1845 Folsom Street • Boulder, Colorado 80302
303-443-0007 • fax 303-443-0098
www.thistlecommunities.org



2011 Boulder County Homeownership Programs

Common Application

Welcome -- The Boulder County Homeownership Programs are committed to making affordable housing a reality in Boulder County. We look forward to helping you pursue your homeownership goals.

By completing this single application, you may apply to any and all of the Boulder County homeownership programs listed below. Each program offers different opportunities, has different eligibility requirements and may have additional criteria that need to be completed as part of its application process. Please review the detailed charts describing these programs in this packet, check **all** of the programs below to which you would like to apply **and return this cover sheet with your application.** (see the *Contact Information* attached.)

Spanish Translation Is Available Upon Request/A Ser Pedido, Se Provee La Información en Español

City of Boulder Homeownership Programs



www.boulderaffordablehomes.com

The City of Boulder's Homeownership programs provide affordable housing opportunities within the city limits of Boulder. New homes and resales are sold at below market-rate prices. The City also offers down payment assistance programs to help with the purchase of a market-rate home.

City of Longmont Community Housing Program



www.ci.longmont.co.us/cdbg

The City of Longmont Community Housing Program provides affordable opportunities in new housing developments in Longmont, offering new homes and resale properties at below market-rate prices. The City also offers down payment assistance to help with the purchase of either an affordable or a market rate home.

Boulder County Down Payment Assistance Program



administered by the City of Longmont

www.ci.longmont.co.us/cdbg

Down Payment Assistance is available for first-time homebuyers who purchase properties in Boulder County, outside of the city of Boulder.

Thistle Communities



www.thistlecommunities.org

Thistle Communities Community Land Trust Program provides affordable homeownership opportunities throughout Boulder County. New homes and resales at below market-rate prices are available in Boulder, Longmont and other areas. Various down payment assistance programs are available to Thistle's applicants, including the Boulder County/Longmont Down Payment Assistance Program (above). Thistle also has affordable rental opportunities in Boulder County and the surrounding areas. (A separate application is required.)

Boulder County Homeownership Programs Common Application

PART 1: HOUSEHOLD INFORMATION

Section A - Please complete the following section for all household members age 18 or older who will occupy the property.

For household members younger than 18 years old, complete the information requested in Section B, on the next page. Make copies, if necessary, for any additional household members.

Primary Applicant – Name: _____

Current Address (street, city, state, zip): _____

Phone: W) _____ H) _____ Cell) _____ Email: _____

Birthdate _____ Gender _____ Number of people to live in your household _____

Are you a full-time student? Y N Are you currently employed? Y N

Do you receive any other income? Y N In what city do you hold your primary job? _____

How long have you consecutively worked in this city? _____ Number of years living in your current city? _____

OPTIONAL Federal funding agencies require the collection of ethnicity and race data to track Fair Housing performance. This information will not be used to determine housing eligibility.

Ethnicity (please choose one):

Hispanic or Latino **OR** Not Hispanic or Latino

Race (please check *one or more* of the following):

American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White

Adult Household Member #2 – Name: _____

Current Address and Phone (if different from above): _____

Relationship to Primary Applicant _____ Birthdate _____ Gender _____

Ethnicity _____ Race _____ (See text box under Primary Applicant section for ethnicity/race options)

Are you a full-time student? Y N Are you currently employed? Y N

Do you receive any other income? Y N In what city do you hold your primary job? _____

How long have you consecutively worked in this city? _____ Number of years living in your current city? _____

Adult Household Member #3 – Name: _____

Current Address and Phone (if different from above): _____

Relationship to Primary Applicant _____ Birthdate _____ Gender _____

Ethnicity _____ Race _____ (See text box under Primary Applicant section for ethnicity/race options)

Are you a full-time student? Y N Are you currently employed? Y N

Do you receive any other income? Y N In what city do you hold your primary job? _____

How long have you consecutively worked in this city? _____ Number of years living in your current city? _____

Section B - Please complete the following section for all household members younger than 18 who will occupy the property.

For Household Members 18 years old and older, please complete the information requested on the previous page.

Name	Birthdate	Gender	Ethnicity	Race	# of months during the year the child lives with you?
			See text box in Section A for details		

Section C - Other Information

- Are you currently married, have a domestic partner, or in a common law marriage? Yes No
- Do you or any household member own or have owned within the last 3 years any residential property/real estate or have interest in the same, including real estate in foreign countries? Yes No
If so, list address and state: _____ Market Value _____
Have you sold the property? Yes No If you have sold the property, list the date of sale: _____

If you have not sold your home please tell us about your mortgage:

Lender/Company: _____ Unpaid Balance: _____

Do you have a second loan on this property? _____ if so, what is the unpaid balance? _____

- Have you been separated or divorced w/in the last 3 years? Yes No
- Do you incur child care costs so you can work? Yes No
- Do you have medical expenses (excluding insurance costs) that are over 3% of your household gross annual income? Yes No
- Are you or your domestic partner if you have one over 62 yrs of age? Yes No
- Are you or your domestic partner if you have one disabled? Yes No
- If you have a lender or real estate agent to work with, please complete the following:

Lender:

Loan Officer Name Company Name Phone Fax Email address (if appl)

Agent:

Agent Name Company Name Phone Fax Email address (if appl)



PART 2: INCOME, DEBT AND ASSET INFORMATION

Please complete a separate Income and Asset Section for EACH individual in the household who receives income or holds assets or debts. Make copies of this part of the application if necessary. You do not need to provide employment income information for household members younger than 18. You do need to include assets held by children, or benefit income received by children.

On the following list, check YES if you receive the particular income, and check NO if you do not receive the income. You will need to provide verification for each item checked YES. (Refer to the *Required Documentation Checklist* in this packet.)

The following information is for: (Name) _____

A. Income Information

Gross income is the combined household income which includes, but is not limited to, job earnings, Social Security and Social Services income (for all in household), TANF, VA benefits, unemployment income, military pay, worker's compensation payments, child support, alimony/maintenance payments, income from pensions or retirement plans, stocks, etc. Failure to report household income is considered fraud and can have serious consequences.

Employment Income (Do not include employment income of children younger than 18)

Self-Employment	Receive?		Type of Income	Anticipated Net Income for the Next 12 Months	Clarification (as necessary)
	YES	NO			
Name of Business:	<input type="checkbox"/>	<input type="checkbox"/>	Self-Employment	\$	
Employer #1	Receive?		Type of Income	Anticipated Gross Annual Income for the Next 12 Months	Clarification (as necessary)
	YES	NO			
Name and Address of Employer:	<input type="checkbox"/>	<input type="checkbox"/>	Wages/Salaries	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Overtime Pay	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Commissions	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Fees/Tips	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Bonuses	\$	
Avg # hours work/week: _____					
Employer #2	Receive?		Type of Income	Anticipated Gross Annual Income for the Next 12 Months	Clarification (as necessary)
	YES	NO			
Name and Address of Employer:	<input type="checkbox"/>	<input type="checkbox"/>	Wages/Salaries	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Overtime pay	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Commissions	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Fees/Tips	\$	
	<input type="checkbox"/>	<input type="checkbox"/>	Bonuses	\$	
Avg # hours work/week: _____					
PLEASE ADD ALL EMPLOYMENT INCOME AND RECORD THE TOTAL HERE				\$	_____



Benefit Payments

Type of Income	Receive?		Anticipated Gross Annual Income for the Next 12 Months	Clarification (as necessary)
	YES	NO		
Social Security	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Supplemental Security Income (SSI)	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Supplemental Security Disability Income (SSDI)	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Worker's Comp/Disability Pay/Benefits	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Unemployment Insurance/Severance Pay	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Insurance Policy Payments/Annuities	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Pension/Retirement Benefits	<input type="checkbox"/>	<input type="checkbox"/>	\$	

PLEASE ADD ALL BENEFIT INCOME AND RECORD THE TOTAL HERE \$ _____

Alimony and Child Support

Provide a copy of the court order for each type of support and indicate whether you are actually receiving it/them

Type of Support	Receive?		Anticipated Gross Annual Income for the Next 12 Months	Clarification (as necessary)
	YES	NO		
Alimony/Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Child Support	<input type="checkbox"/>	<input type="checkbox"/>	\$	

PLEASE ADD ALL SUPPORT INCOME AND RECORD THE TOTAL HERE \$ _____

Other Sources of Income

Type of Other Income	Receive?		Anticipated Gross Annual Income for the Next 12 Months	Clarification (as necessary)
	YES	NO		
Money or gifts regularly given by persons not living in the home	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Lottery winnings paid in periodic payments	<input type="checkbox"/>	<input type="checkbox"/>	\$	
Other Income (pls specify):	<input type="checkbox"/>	<input type="checkbox"/>	\$	

PLEASE ADD ALL "OTHER" INCOME AND RECORD THE TOTAL HERE \$ _____

B. DEBT – Do you have any debt? Yes No If so, please list below.

Creditor's Name	Unpaid Balance	Monthly Payment
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

C. Asset Information

Name _____

An asset is cash or no cash item that can be converted to cash.

Report the following assets: Cash held in savings accounts, checking accounts, safe deposit boxes, homes, etc. Equity in rental property or other capital investments. Cash value of stocks, bonds, Treasury bills, certificates of deposit and money market accounts. Individual retirement and Keogh accounts (even though withdrawal would result in a penalty). Retirement and pension funds. Cash value of life insurance policies available to the individual before death. Personal property held as an investment such as gems, jewelry, coin collections, antique cars, etc. Lump sum or one-time receipts, such as inheritances, capital gains, lottery winnings, victim's restitution, insurance settlements and other amounts not intended as periodic payments. Mortgages or deeds of trust held by an applicant.

Do Not Report necessary personal property such as clothing, furniture, cars and vehicles specially equipped for persons with disabilities.

Bank Accounts

Have?		Name of Institution	Type of Account	Current Balance
YES	NO			
<input type="checkbox"/>	<input type="checkbox"/>		Checking	\$
<input type="checkbox"/>	<input type="checkbox"/>		Checking	\$
<input type="checkbox"/>	<input type="checkbox"/>		Checking	\$
<input type="checkbox"/>	<input type="checkbox"/>		Savings	\$
<input type="checkbox"/>	<input type="checkbox"/>		Savings	\$
<input type="checkbox"/>	<input type="checkbox"/>		Money Market	\$
<input type="checkbox"/>	<input type="checkbox"/>		Money Market	\$
<input type="checkbox"/>	<input type="checkbox"/>		Other (pls specify)	\$
PLEASE ADD ALL BANK ACCOUNT BALANCES AND RECORD THE TOTAL HERE				\$

Other Assets

Have?		Name of Institution	Type of Investment	Current Value of Assets	Clarification Notes
YES	NO				
<input type="checkbox"/>	<input type="checkbox"/>		Individual Stocks	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Bonds	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Mutual Funds	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Trust Funds	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Retirement Accounts (ie, IRA, Keogh, 401K, 403B, PERA)	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Cash value of life insurance policy	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Gift Money for down payment - <i>provide a copy of the gift letter</i>	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Estimated Proceeds from Sale of Home	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Value of Other Property (pls specify)	\$	
<input type="checkbox"/>	<input type="checkbox"/>		Other Asset (pls specify)	\$	
PLEASE ADD VALUE OF ALL OTHER ASSETS AND RECORD THE TOTAL HERE				\$	

PART 3: CERTIFICATIONS

It is our policy to verify all information contained in this application. In acknowledgement of this policy, please sign your name(s) where indicated.

I/We certify the following:

- All the information contained and submitted in support of this application is true and complete to the best of my/our knowledge and belief.
- I/We are aware that any misrepresentation will result in the forfeiture of my/our right to participate in any of the Boulder County Homeownership Programs and may result in legal action against me/us.
- Consent to Release Information:
I/We authorize representatives from any of the Boulder County Homeownership Programs to supply and receive information to/from all other Boulder County Homeownership programs that I/we have applied to, my/our employer(s), my/our financial institution(s), other housing/down payment assistance programs, my/our Realtor and/or my/our Mortgage Lender to verify the information contained in this application. This information includes, but is not limited to bank statements, employment status, income, outstanding debts and other financial information. I also authorize representatives from any of the Boulder County Homeownership Programs to allow inspection and reproduction of any financial records or information in their possession. I/We understand that information in this application may be shared with funders for the purpose of funding compliance.

I/We understand that the income I/we use to qualify for a mortgage loan amount must be the same as the income I/we claim in this application.

I release all representatives from any of the Boulder County Homeownership Programs from any and all liability arising from release of such information. This authorization is limited solely to information requested for the processing of my application for the Boulder County Homeownership Programs.

- If I/we purchase a home under any of the Homeownership Programs listed in this application, I/we will occupy the home and agree to use the home as my/our primary and principal residence.
- I understand that completion of this application does not guarantee that my/our eligibility for the programs and/or that I/we will successfully purchase a home through the Boulder County Homeownership Programs.

Signature

Date



Signature

Date

Equal Opportunity: In accordance with the provisions of the Equal Opportunity Act and the Boulder County Homeownership Programs’ policies, there will be no discrimination against an applicant for these benefits on the basis of age, source of income, sex, race, marital status, sexual orientation, national origin, religion or handicap. If you or a member of your household is an individual with a disability, you have the right to request reasonable accommodation for that disability. The Boulder County Homeownership Programs are committed to assuring that each individual has an equal opportunity to the use and enjoyment of the benefits of this program. For more information, please contact the individual programs to which you are applying. Spanish translation is available. TDD service for those individuals with hearing and speech disabilities is available through Colorado Relay Service at 1-800-659-3656.

Confidentiality: In order to process an application, Boulder County Homeownership Programs may supply and receive information as detailed in the “Consent to Release” clause above. Information may also be released to comply with the auditing requirements of program funders. With these two exceptions, all personal and identifying information on an application remains fully confidential.

PART 4: REQUEST FOR VERIFICATION OF EMPLOYMENT

SECTION A: APPLICANT - Please fill out Section A then give this form to your employer to complete Sections B and C.

Applicant's Name: _____	Employer's Name: _____	
Address: _____ _____	Address: _____ _____	
City, State, Zip Code _____	City, State, Zip Code _____	
Phone: _____	Phone: _____	Fax: _____

Applicant - please check the box of the program that your employer should fax this completed form to (choose one):

<input type="checkbox"/>	City of Boulder Housing Program	Phone 303/ 441-3157	Fax 303/ 441-4368
<input type="checkbox"/>	City of Longmont Community Housing Program/Boulder County/Broomfield Down Payment Assistance Program	Phone 303/ 651-8530	Fax 303/ 651-8590
<input type="checkbox"/>	Thistle Communities	Phone 303/ 443-0007	Fax 303/ 443-0098

I authorize you to release my employment information to the program checked above.

Employee's Signature: _____ Date: _____

SECTION B: EMPLOYER - Please provide the following information for the above listed employee, then fax the completed form to the program indicated in Section A. Please call the same program with any questions that you may have.

Present Position: _____	Dates of employment: _____
Probability of Continued Employment: _____	
Current Gross Pay (Enter amount per Pay Period): \$ _____	
Please circle frequency: hourly weekly 2x/month (24x/yr) bi-weekly (26/yr) monthly Other: _____	
Average regular hours worked per week: _____	
Overtime rate per hour: \$ _____	Average number of overtime hours per week: _____
Commissions earned per week: \$ _____	
Tips earned per week: \$ _____	Annual Bonuses: \$ _____
Date and amount of applicant's last pay increase: _____	Date _____ Amount _____
Date and projected amount of applicant's next pay increase: _____	Date _____ Amount _____
Additional information (please explain seasonal work cycles and other pertinent information): _____ _____	
Employee's Total Gross Annual Income: \$ _____	

SECTION C: EMPLOYER - Authorized Signature

Signature _____	Title _____	Date _____
Printed Name _____	Phone _____	



Applying for Mapleton Mobile Home Park
Thistle Community Housing

If you are applying to Thistle's Community Land Trust homeownership program and are only interested in living in the Mapleton Mobile Home Park, you don't need to complete all of the steps required in the Common Application to apply for Mapleton. Requirements for a complete Mapleton MHP application are:

- Complete the Common Application (sign, date, and include the cover page showing the programs to which you are applying)
- A completed Employer Verification form OR a letter from your employer, on letterhead, indicating your annual gross wages, start of employment, pay schedule, expected wage increases and any overtime, bonuses, tips or commissions
- Copies of one month's worth of your most recent pay stubs
- Verification of all other sources of income (Social Security, Social Security Disability, pension, etc.)
- Complete copies of 2 years of your most recent Federal tax returns, all corresponding W2's and attached schedules
- If you are self-employed (full or part-time), submit a year-to-date profit/loss statement AND three years of federal income tax returns. Please also submit your estimate of the income you will receive for the next 12 months and an explanation as to how you came to that number.
- A copy of your most recent savings account statement, including the interest rate
- A copy of the most recent statement from all other assets (IRA, 401K, cash value of life insurance policy, etc.) verifying the current balance and interest rate or annual dividend payment
- If you are receiving any other form of down payment assistance (a personal gift and/or aid another program), submit a letter from the 3rd party offering the assistance describing the amount and type of assistance*
- If you have been separated or divorced within the past 3 years, submit a copy of your divorce decree AND verification of the division of marital assets, court-ordered custody arrangements and child and/or alimony payments (this information is often documented in your separation agreement)*
- If you currently own a home, submit a recent appraisal of that home or most recent Assessor's statement and your most recent mortgage statement*
- If you had joint ownership in a property within the last 3 years and are no longer on the Title, submit a Quit Claim Deed showing the termination of your interest in the property*
- If you have signed a contract to buy a home, submit a copy of the contract*
- If you currently own other real property, such as vacant land and/or commercial property, submit a recent appraisal or Assessor's statement and a recent mortgage statement*