

HOMEOWNERSHIP PROGRAM



APPLICATION

PERSONAL INFORMATION

This section must be completed by each person to be listed on the mortgage application.

Name of Applicant #1:
Name of Apartment Community:
Street Address:
City, State, Zip:
Phone number: (H) (W)
Email:
Date of Birth: Social Security Number:

Name of Applicant #2:
Name of Apartment Community:
Street Address:
City, State, Zip:
Phone number: (H) (W)
Email:
Date of Birth: Social Security Number:

ESSAY

On a separate sheet of paper, please write a brief (one-page) essay addressing the following questions:

- What does homeownership mean to you?
Why are you applying for the HOP?

STATEMENT OF COMMITMENT

By signing below, I/we acknowledge that I/we am/are committed to homeownership. I/We understand that in order to receive HOP funds, I/We must successfully complete the following: i) complete a homebuyer's training course ii), qualify for a first and/or second mortgage, and iii) contribute a minimum of \$750 towards the purchase of a home.

Signature of Applicant Date

Signature of Co-Applicant Date

RESIDENCY VERIFICATION & RECOMMENDATION- for property/site manager

I certify that HOP Applicant's Name has been listed on the lease since Date of Lease.

By signing below, I certify that the applicant(s) is/are in good standing and I support his/her/their participation in the Homeownership Program.

Signature of Property/ Site Manager Date