MAYOR'S OFFICE OF HOUSING AND COMMUNITY DEVELOPMENT

CITY AND COUNTY OF SAN FRANCISCO



LONDON N. BREED MAYOR

ERIC D. SHAW DIRECTOR

CITY SECOND LOAN PROGRAM (CSLP) Pre-Approval Application Packet

Dear CSLP Applicant:

Thank you for your interest in the City Second Loan Program (CSLP) administered by the Mayor's Office of Housing and Community Development (MOHCD) of the City and County of San Francisco.

Applying for your CSLP property will require you to complete this Pre-Approval Application Packet in its entirety, and submit it along with all required documentation listed below. Applicants that submit complete packets are considered on a first come, first serve basis.

Required Supporting Documents:

(No application fee is required for the Pre-Approval submission)

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	CSLP Pre-Approval Application (attached)
	Signed and dated HomeownershipSF Consent Form (attached)
	Verification of Homebuyer Education Completion
	First Mortgage Loan Pre-approval Letter
	Borrower(s) three most current and consecutive paystubs
	Verification of Employment provided by the employer (only applicable to FRCSLP and Educators-CSLP)
	Borrower(s) signed & dated Federal Tax Returns for the past three years with all schedules and W-2s
	Borrower(s) three most current and consecutive months of bank statements
	Gift letter and evidence of donor availability of funds (if applicable)
	For self-employed borrower: a) copies of borrower's Federal Income Tax Returns (both individual return
	and business returns) that were filed with the IRS for the past three years with all schedules; b) profit &
	loss statement(s) to date from last tax filing; and c) copies of all invoices and payments made to the
	borrower as a part of self-employment in the current calendar year (if applicable).

MOHCD may request additional documents to verify information provided in support of your income and assets eligibility for the CSLP Program. We may contact other government agencies, education institutions, employers, or other entities in order to verify information.

How to Submit Your Complete Application Packet:

Please note that, applications are first come for serve. Once you have completed and gathered all of the required documents, into one PDF file, upload the PDF file via this secure link ShareFile.

CITY AND COUNTY OF SAN FRANCISCO MAYOR'S OFFICE OF HOUSING AND COMMUNITY DEVELOPMENT CITY SECOND LOAN PROGRAM (CSLP)

HOMEOWNERSHIP COUNSELING CONSENT FORM

The Mayor's Office of Housing and Community Development requires every adult household member applying for a City-administered homeownership assistance program, in connection with the purchase of a residential unit, to:

- 1. Attend Pre-Purchase Homeownership workshop(s) for a cumulative minimum of 6 hours. Please visit www.homeownershipsf.org for current list of approved housing counseling agencies.
- 2. Meet with a counselor and complete a 2-hour one-on-one counseling session at the same agency.
- 3. Receive a Verification of Homebuyer Education or a Certificate of Homebuyer Education once requirements 1 and 2 noted above are completed.

I (We) understand the homebuyer education requirement is in place to ensure first-time homebuyers are educated about the eligibility criteria and policies of the various City-administered homeownership assistance programs AND:

- Assessing readiness to buy a home
- Financing a home
- Maintaining a home and finances
- Budgeting and credit
- Selecting a home
- Home-buying process

I (We) understand and authorize the Mayor's Office of Housing and Community Development, its participating nonprofit housing counseling agencies and HomeownershipSF to exchange information about my application, including information about my/our final settlement statement, which shall be used for statistical information or funder reports only.

I (We) agree to be contacted by HomeownershipSF and/or its member, non-profit housing counseling agencies for additional services including post purchase counseling which includes budgeting, home maintenance and foreclosure prevention topics. I (We) agree to be contacted by HomeownershipSF and/or its member, non-profit housing counseling agencies for referral/counseling services in case of any financial hardship or loan default.

Property to be purchased (insert "TBD" if the property is to be determined)

Street No.	Street Name:	Unit No.:	City, State
			San Francisco, CA
·			•
Applicant's Signa	ture	Applicant's Printed No.	ame Date
Applicant's Signature		Applicant's Printed No.	Date

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CITY SECOND LOAN PROGRAM (CSLP) PRE-APPROVAL APPLICATION

This is <u>not</u> an application for a final City Second Loan Program (CSLP). The information provided is to be used to make a preliminary determination if the applicant(s) meet the income and assets eligibility requirements of the Program. CSLP funding is subject to final loan approval. This form must be completed accurately in its entirety.

I. Property Info	ormation							
Property Address:			_					
Contract Ratification	Date (indicate N/A	if not applicat	ole):					
Offer Price \$				Down payment and cl	Down payment and closing cost source:			
CSLP Loan Amount S	\$			☐ Savings \$				
Pre-Approved First M	lortgage \$			☐ Gifts \$	☐ Gifts \$			
Intended Down Paym				☐ Other \$		ain:		
II. Lender Infor								
Lender Name:	mation	Lender Addr	ъсс.					
Loan Agent:		Email:	C33.	Dh	none:			
Louit Agent.		Eman.			ione.			
III. Borrower In	formation ("HH #"	= Household	Membe	r Number)				
Borro	wer (HH#1)			Co-Borrower (H	H#2)			
Name (Last, First):				Name (Last, First):				
Date of Birth:			Date	Date of Birth:				
Marital Status:			Mar	Marital Status:				
☐ Married				☐ Married				
Registered Domestic Partner			□ F	☐ Registered Domestic Partner				
☐ Unmarried ☐ Unmarried								
Present Address:								
Mailing Address (if di	fferent from Prese	nt Address):						
Contact Phone #:			Con	tact Phone #:				
Email:	Emai		ail:					
Employer Name:	loyer Name: Empl		oloyer Name:					
Fitle/Position: Title/		/Position:						
Years at Employer: Year		rs at Employer:						
Household Size #:			Relationship to Borrower:					
IV. Dependents	Information (list a	II persons or dep	endents o	other than named borrowers v	who will o	occupy the residence)		
Name		Age		Relationship to Borro	wer	Occupation		

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V. Household Income (list gross annual income and add additional pages if necessary)						
	e Sources	HH#1	HH#2	Other HH m	nembers	Total
Base I	Employment Income					\$
Overtime						\$
Comm	issions/Bonuses					\$
Interes	st/Dividends					\$
Social	Security/Pension					\$
Child S	Support/Alimony					\$
Other	Income					\$
				Total Househ	old Incon	ne \$
VI	. Household Assets					
HH#	Name of Financial	(Cavinas Ch	Type of As		\:f4 _4_ \	Current Cash
	Institution	(Savings, Ch	ecking, CD, Mutual f	und, Trust fund, G	offt, etc.)	Value of Asset
						\$
						\$
						\$
						\$
		Total Househ	old Liquid Assets (d	do not include re	tirement)	\$
						•
VII.	Declarations (the following	ng questions app	ly to the entire hou	sehold)	Borrowe	r Co-Borrower
A)	Have you had any owner		residential unit in th	ne past 3 years?	☐ Yes	□Yes
	If yes, date of ownership: No					□ No
B)	Do you intend to occupy	the property as yo	our primary residen	ce within 60	Пу	Пу
٥,	days of close of occrew?					
	days of close of escrow?					
C) Will you be receiving gift funds for the purchase of the property? If yes, gift Yes Yes						☐ Yes
funds amount: \$ \int No \int No						□ No
D)	D) Do you own a commercial business? If yes, enter name(s) \ Yes [
,						
If you answer "Yes" to any of the following questions, please provide explanation.						
E) Are there any outstanding judgments against you?					☐ Yes	
					□ No	□ No
F)	Have you declared bankr	upt within the pas	st 4 vears, and/or h	ad a property	☐ Yes	☐ Yes
. ,	F) Have you declared bankrupt within the past 4 years, and/or had a property foreclosed (deed in lieu) with the past 7 years?					<u> </u>

VIII. Authorization to Release Information

IX. Acknowledgment and Certification

I have applied for a City Second Loan Program from the Mayor's Office of Housing and Community Development (MOHCD) of City and County of San Francisco. As part of the application process, MOHCD may verify information contained in my application and in other documents required in connection with my application loan, either before the transaction is closed or as part of its quality control program. I hereby authorize to provide to MOHCD, 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 tax returns.

By signing below I acknowledge, accept and certify the following: | I understand that all applications are accepted on a first-come, first-served basis. | I understand and agree that MOHCD is not responsible for the loss of any earnest money deposits or any other monetary loss with my purchase transaction or incurred as a result of this application being either approved or denied. | I understand that once my application is submitted, I will not be permitted to make any changes that will affect my ratios, household size, income and assets for qualifying purposes. It is my responsibility to verify the completeness and accuracy of my application before its submittal to MOHCD. | I understand that MOHCD reserves the right to reverse any pre-approvals based on additional information discovered that proves the applicant is not eligible for the Program. | I certify that the information contained in this application is true and complete as of the date below. | I certify that the information contained in this application is true and complete as of the date below. | I ANY INFORMATION IS WITHHELD, FALSIFIED, OR WILLFULLY MISREPRESENTED, MOHCD RESERVES THE RIGHT TO REFUSE YOUR APPLICATION.

Co-Borrower's Signature

Date

Date

Borrower's Signature

Mayor's Office of Housing and Community Development

City and County of San Francisco

San Francisco Below Market Rate (BMR) Homeownership Program

How did you hear about this listing? ☐ Newspaper ☐ MOHCD W☐ Email Alert ☐ Housing Co	ebsite Developer Website Flyer Friend unselor Radio Ad Bus or Billboard Ad Other			
Help us ensure we are meeting o	our goal to serve all people			
These OPTIONAL questions will <u>not</u> affect your eligibility for housing in any way. Your individual answers are kept completely confidential and used only for statistical purposes.				
What best describes your race and ethnicity? (select all that apply) Asian Chinese Filipino Japanese Korean Mongolian Central Asian South Asian Southeast Asian Other Asian African African American Caribbean, Central American, South American or Mexican Other Black Indigenous American Indian/Native American (Specific Group: Indigenous from Mexico, the Caribbean, Central America or South America (Specific Group: Other Indigenous	Latino Caribbean Central American Mexican South American Other Latino Middle Eastern/West Asian or North African North African West Asian Other Middle Eastern or North African Pacific Islander Chamorro Native Hawaiian Samoan Other Pacific Islander European Other White			
What is your gender? (Check one that best describes your current gender identity) Female Genderqueer/Gender Non-binary Trans Female Not listed – please specify: How do you describe your sexual orientation or sexual identity? (Check one) Bisexual Gay/ Lesbian/Same-Gender Loving Questioning/Unsure Straight/ Heterosexual Not listed - please specify:	Which primary language is spoken at home? (select one) Chinese – Cantonese Chinese – Mandarin English Filipino Russian Spanish Vietnamese Other Language Spoken at Home For Service Rending: Pronouns and Chosen Name She/Her/Hers He/Him/His They/Them/Theirs Not listed. Please specify:			