MAYOR'S OFFICE OF HOUSING AND COMMUNITY DEVELOPMENT

CITY AND COUNTY OF SAN FRANCISCO



LONDON N. BREED MAYOR

DANIEL ADAMSACTING 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)

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

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 purcha	irchased (insert "TBD" if the property is to be determined)			
Street No.	Street Name:		Unit No.:	City, State	
				San Francisco, CA	
l			l		
Applicant's Signature		Applicant's Printed Name		me Date	
,,		, ,			
Applicants Ciana	tura.	Annline	antia Drintad Na	Data	
Applicant's Signa	rture	Арриса	nnt's Printed Nai	me Date	
Applicant's Signa	ture.	Applica	ant's Printed Nai	me 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 Information						
Property Address:							
Contract Ratificat	ion Date (indicate N/A	if not applica	able):				
Offer Price \$				Down payment and closing cost source:			
CSLP Loan Amount \$				☐ Savings \$			
Pre-Approved First Mortgage \$				☐ Gifts \$			
Intended Down Payment \$				☐ Other \$	_ Expl	ain:	
II. Lender I							
Lender Name:		Lender Add	dress:				
Loan Agent:		Email:		Ph	one:		
Ü	Zamani						
III. Borrower Information ("HH #" = Household Member Number)							
	orrower (HH#1)			Co-Borrower (HH#2)			
Name (Last, First	:):			Name (Last, First):			
Date of Birth:				Date of Birth:			
Marital Status:				Marital Status:			
☐ Married				☐ Married			
☐ Registered Domestic Partner			D F	☐ Registered Domestic Partner			
☐ Unmarried			□ ı	☐ Unmarried			
Present Address:			Pres	Present Address:			
Mailing Address (if different from Prese	ent Address):					
Contact Phone #:			Con	tact Phone #:			
Email:	Email:			Email:			
Employer Name: E			Emp	oloyer Name:			
Title/Position:			Title	Title/Position:			
Years at Employer: Years			Yea	rs at Employer:			
Household Size #: Relationship to Borrower:							
IV. Dependents Information (list all persons or dependents other than named borrowers who will occupy the residence)							
Name		Age		Relationship to Borro	wer	Occupation	

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Income Sources	V. Household Income (list gross annual income and add additional pages if necessary)							
Overtime \$ Commissions/Bonuses \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			HH#1	HH#2	Other HH m	embers	Tota	ı
Commissions/Bonuses \$ Interest/Dividends \$ Social Security/Pension \$ Child Support/Alimony \$ Other Income \$ VI. Household Assets HH # Name of Financial Institution Ins	Base E	Employment Income					\$	
Interest/Dividends \$ Social Security/Pension \$ Child Support/Alimony \$ Other Income \$ Total Household Income **Total Household Income* **Total Household Income* **Total Household Income* **Total Household Income* **Type of Assets** Current Cash Value of Assets* (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.) **Type of Assets* **Current Cash Value of Assets* **Value of Asset* **Value of A	Overtin	ne					\$	
Social Security/Pension \$ Child Support/Alimony \$ Other Income \$ VI. Household Assets HH # Name of Financial Institution Name of Assets (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.) Current Cash Value of Asset	Comm	issions/Bonuses					\$	
Child Support/Alimony \$ Other Income \$ Total Household Income \$ VI. Household Assets HH # Name of Financial Institution	Interes	t/Dividends					\$	
Other Income \$ Total Household Income \$ VI. Household Assets HH # Name of Financial Institution (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.) (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.)	Social	Security/Pension					\$	
Total Household Income \$ VI. Household Assets HH # Name of Financial Institution (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.) Current Cash Value of Asset	Child S	Support/Alimony					\$	
VI. Household Assets HH # Name of Financial Institution	Other I	ncome					\$	
HH# Name of Financial Type of Assets Current Cash (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.) Value of Asset					Total Househ	old Incon	ne \$	
Institution (Savings, Checking, CD, Mutual fund, Trust fund, Gift, etc.) Value of Asset	VI.	Household Assets						
	HH#		(0 : 0)					
Ψ		Institution	(Savings, Ch	ecking, CD, Mutual t	fund, Trust fund, G	iff, etc.)		set
\$								
Total Household Liquid Assets (do not include retirement) \$		·					·	
VII. Declarations (the following questions apply to the entire household) Borrower Co-Borrower	VII.	VII. Declarations (the following questions apply to the entire household) Borrower Co-				r Co-Borro	ower	
A) Have you had any ownership interest in a residential unit in the past 3 years? ☐ Yes ☐ Yes	A)						□Yes	
If yes, date of ownership: No	If yes, date of ownership:				□ No	□ No		
B) Do you intend to occupy the property as your primary residence within 60 Yes					Пу			
days of close of occrew?				oc within oo				
No No							□ NO	
C) Will you be receiving gift funds for the purchase of the property? If yes, gift Yes					ty? If yes, gift	☐ Yes	☐ Yes	
funds amount: \$	funds amount: \$					□ No	□ No	
D) Do you own a commercial business? If yes, enter name(s)	D)	,,,,					Пуос	
	,							
If you answer "Yes" to any of the following questions, please provide explanation.								
E) Are there any outstanding judgments against you?	E)	Are there any outstanding	g judgments agair	nst you?		☐ Yes	☐ Yes	
□ No □ No		□ No □ No					□ No	
F) Have you declared bankrupt within the past 4 years, and/or had a property Yes	F) Have you declared bankrupt within the past 4 years, and/or had a property					Пусс		
forcelesed (doed in liqu) with the past 7 years?						l		

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

Help us ensure we are meeting 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.

Which best describes your gender? (Check one	that V	Which best describes your sexual orientation or sexual	
best describes your current gender identity)	ic	dentity? (Check one)	
Female		Bisexual	
Male		Gay/ Lesbian/Same-Gender Loving	
Genderqueer/Gender Non-binary		Questioning/Unsure	
☐ Trans Female		Straight/ Heterosexual	
Trans Male		Not listed. Please specify:	
Not listed. Please specify:			
Which best describes your ethnicity? (select o	ne)		
O Hispanic/Latino	O Not Hispar	nic/Latino	
AsianBlack/African AmericanNative Hawaiian/Other Pacific IslanderWhite	AmericanAsian <u>and</u>Black/AfrOther/Mu	rican American <u>and</u> White	
How did you hear about this listing?	Newspaper	☐ MOHCD Website ☐ Developer Website ☐ Flyer ☐ Friend	
☐ Email Alert ☐ Housing Counselor ☐ Radio Ad ☐ Bus Ad ☐ Other			