



LAKE COUNTY FLORIDA

FLORIDA HOUSING OPPORTUNITY PROGRAM (FHOP)

The Lake County Housing Agency has been approved through the Florida Housing Finance Commission to administer the funds for FHOP. The FHOP strategy is designed to provide subordinate down payment assistance loans to first time homebuyers for owner-occupied primary residences, which can be repaid by the income tax refund the homebuyer is entitled to under the First Time Homebuyer Credit.

The applicant(s) for the FHOP strategy must meet the following income guidelines:

1. the maximum income limit shall be an adjusted gross income of \$75,000 for single taxpayer households; or
2. the maximum income limit shall be an adjusted gross income of \$150,000 for joint-filing taxpayer households.

In order to ensure that the applicant(s) meets the income guidelines, a list of required documents is provided in this packet and must be returned with the application. A delay in providing all the necessary documentation will delay the housing agency's ability to verify household income via third party verification.

The FHOP strategy will allow for assistance to not exceed 10 percent of the purchase price or \$8,000, whichever is less. The applicant(s) shall be expected to use their federal income tax refund to fully repay the loan, and below is the Recapture Agreement that will be implemented with the FHOP strategy for Lake County:

The housing agency's loan will be secured by a ten (10) year mortgage with a 10% per annum interest rate that shall begin accruing at closing. The mortgage and note will provide that if the homebuyer pays the original principal in full within eighteen (18) months from date of closing, that no interest shall be due. If the homebuyer fails to fully repay the loan within 18 months from the date of closing, that all principal and accrued interest shall be due on the first of the following to occur: "upon sale, refinance, rental or lease of the property or at the time that the property is no longer the primary residence of the homebuyer, or 10 years."

The housing agency anticipates a large volume of applications for the FHOP strategy and thus all applications will be placed on a priority list based on the time/date the application is received. The application must be filled out completely and properly notarized in order to be accepted by housing staff and time/date stamped. If there are more applications than the available funding will allow, those applicants will be placed on a waiting list and pulled from the list if prior applicants do not qualify.

The funding for the FHOP strategy has been extended by the federal government and the Florida Housing Coalition until June 30, 2010. The program requires that, in order to be eligible for the funding, an applicant must have a signed Sale Contract in place on or before April 30, 2010 and the closing must take place on or before June 30, 2010.

The Lake County Housing office will accept applications up until April 30, 2010, but the applicant must provide the housing office with a copy of a signed Sale Contract by April 30, 2010, otherwise the application will be denied. Complete applications will be processed for possible funding, if the closing occurs on or before June 30, 2010. The housing agency does not have the authority to provide funding beyond this date.

DEPARTMENT NAME

P.O. BOX 7800 • 315 W. MAIN ST., TAVARES, FL 32778 • P 352.000.0000 • F 352.000.0000

Board of County Commissioners • www.lakecountyfl.gov

JENNIFER HILL
District 1

ELAINE RENICK
District 2

JIMMY CONNER
District 3

LINDA STEWART
District 4

WELTON G. CADWELL
District 5

We hope that you will take advantage of the FHOP funding and that it will provide you the opportunity to become a first time homebuyer in Lake County. We look forward to working with you and your lenders to make this a smooth process. We know that you will understand the regulations we must follow in order to qualify you for the program and that we will move through the process as quickly as possible.

If you have any questions prior to submitting this application, please call the office at (352) 742-6530.

Allison Thall, *Housing Manager*
Stacey Kleinfeld, *Senior Housing Specialist*

LAKE COUNTY AFFORDABLE HOUSING SHIP PROGRAM

PO BOX 7800, TAVARES, FLORIDA 32778

PHONE: 352.742.6530 FAX: 352.742.6535

FLORIDA HOUSING OPPORTUNITY PROGRAM
DOCUMENT CHECKLIST

A COPY OF A SIGNED SALES CONTRACT BETWEEN BUYER AND SELLER MUST BE PROVIDED TO THE HOUSING OFFICE BY APRIL 30, 2010. APPLICATIONS WILL BE DENIED IF A SALES CONTRACT IS NOT PROVIDED BY APRIL 30, 2010.

___ **2009 Income Tax Return (MANDATORY)**

If applicable:

Award letters for: ___ Social Security (Current year)
 ___ Supplemental Security Income (Current year)
 ___ Disability (Current year)
 ___ Other _____(Current year)

___ Proof of any other type of income for current year (if applicable)

___ Proof of divorce - Final Judgment (if applicable)

___ Proof of alimony/child support (if applicable)

___ Verification of Employment for applicant(s) and all household members over the age of 18, signed and filled out with employer's name and address*

___ If self employed, a Self-Employed Affidavit signed and notarized*

___ Verification of Full Time Student Status form*

___ Social Security Notification form*

___ Repayment Agreement form* (one will be provided for either HOME Purchase or HOME Repair/Rehab)

___ If household member and unemployed, an Unemployed Affidavit signed and notarized*

___ All household members listed with age and relationship to applicant(s)*

___ Copy of Social Security card for each household member

___ A list of assets is required including other property. A copy of the tax receipt for that property will be required (if applicable).

___ Application signed by applicant(s)*

___ Application notarized correctly*

___ Copy of the most current six (6) months of checking account bank statements. Please include written explanation for deposits.

___ Copy of the most current savings account bank statement showing current balance. Please include written explanation for deposits.

*** Forms will be provided**

LAKE COUNTY HOUSING AGENCY

FLORIDA HOUSING OPPORTUNITIES PROGRAM (FHOP) APPLICATION

PART A. APPLICANT INFORMATION

Please print the necessary information below. Please notify the office if you have a change of address while waiting for housing assistance. Lake County fully supports equal opportunity housing and does not discriminate on the basis of race, national origin, religion, sex, age, family size, handicap or ethnicity.

Applicant Name: _____ Phone: _____
Co-Applicant: _____ Phone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____

Please indicate the number in household for each race

White/Caucasian # _____ Black/African American # _____ Latino/Hispanic # _____
Asian/Pacific Islander # _____ Native American/Indian # _____ Other (specify) # _____

Special Housing Needs

Disabled or Disabled Minor _____ (Y or N) Farm Worker _____ (Y or N) Other _____

Describe your current living conditions: _____ Own _____ Rent _____ Living with relatives

Are your current living conditions substandard? _____ Yes _____ No

If Yes, describe current conditions: _____

Current marital status of applicant/co-applicant

Applicant: _____ Married _____ Single _____ Divorced _____ Widowed
Co-Applicant: _____ Married _____ Single _____ Divorced _____ Widowed

Please check "Married" if you are separated. Florida does not recognize legal separation. If separated, provide documentation that the estranged spouse is no longer a household member. Acceptable documentation includes a long-term lease in the estranged spouse's name.

Part B: Household Composition/Income

List the full name of all household members, beginning with Applicant, and include Social Security Number, Date of Birth, and age at time of application

Household Member (First Name, Middle Initial, Last Name)	Social Security Number	Date of Birth	Age	Relationship to Applicant
				<i>Applicant</i>

Is any household member 18 years or older and a full-time student? ____ Yes ____ No

If Yes, please list: _____

Income Assessment

Print the full name of the household member receiving income, the type of income, frequency received and estimated gross annual earnings. This includes income received on behalf of minor child(ren) in the household.

Household Member (full name)	Type of Income (Soc Sec, SSI, Wages, Alimony, Court awarded child support, TANF, etc)	How often received (bi-weekly, monthly, weekly, etc)	Estimated gross annual income (income before taxes)
			\$
			\$
			\$
			\$
			\$

Assets and Asset Income

List all assets for all household members, including minors

Bank Account (type)	Account Number(s)	None (mark if not applicable)
Checking		
Savings		
401K/TSA		
Certificate of Deposit		
Stocks: (market value)		
Bonds: (market value)		
Property: (market value)		
Other:		

Provide a detailed description of any real property owned by you now or in the past two years, i.e. describe the lot or parcel by size, location, current use, and appraised value; describe any buildings or dwellings including appraised value. Attach additional pages if necessary: _____

Describe any other assets such as machinery or equipment or any items of value not excluded in the definition of net assets. Provide an estimated value for each item listed. Attach additional pages if necessary: _____

PART C ACKNOWLEDGEMENT AND SIGNATURE(S)

I/We, the Applicant(s), understand that Florida Statute 817.03 provides that willful false statements or misrepresentation concerning income or asset information relating to financial condition is a misdemeanor of the first degree, punishable by fines and imprisonment provided under Statutes 775.082 or 775.083. I/we further understand that any willful misstatement of information will be grounds for either termination of the application process or, if awarded funding assistance, the total amount of the funding assistance originating from the Lake County Affordable Housing "FHOP" Program shall become immediately due and payable by the Applicant(s). I/we certify that the application information provided in this application is true and complete as of the date set forth beside my/our signature on this application. I/we consent to the disclosure of information for the purpose of income verification related to making a determination of my/our eligibility for program assistance. I/we agree to provide any documentation needed to assist in determining eligibility and are aware that all information and documents provided are a matter of public record.

Head of Household Signature

Date

Co-Head/Spouse Signature

Date

State of Florida
County of Lake

The foregoing instrument was acknowledged before me this _____ day of _____, 2009, by _____, who produced _____ as identification or _____ (type of identification) _____ is personally known by me.

Signature of Notary
(Seal)

First-Time Homebuyer Credit

▶ Attach to Form 1040

Name(s) shown on return

Your social security number

Part I General Information

- A** Address of home qualifying for the credit (if different from the address shown on return)
- B** Date acquired (see instructions)
- C** If you are choosing to claim the credit on your 2008 return for a main home bought after December 31, 2008, and before December 1, 2009, check here (see instructions)

Part II Credit

<p>1 Enter the smaller of:</p> <ul style="list-style-type: none"> • \$7,500 (\$8,000 if you purchased your home in 2009), but only half of that amount if married filing separately, or • 10% of the purchase price of the home. <p>If someone other than a spouse also held an interest in the home, enter only your share of this amount (see instructions)</p>	1	
<p>2 Enter your modified adjusted gross income (see instructions)</p>	2	
<p>3 Is line 2 more than \$75,000 (\$150,000 if married filing jointly)? No. Skip lines 3 through 5 and enter the amount from line 1 on line 6. Yes. Subtract \$75,000 (\$150,000 if married filing jointly) from the amount on line 2 and enter the result</p>	3	
<p>4 Divide line 3 by \$20,000 and enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000</p>	4	X .
<p>5 Multiply line 1 by line 4</p>	5	
<p>6 Subtract line 5 from line 1. This is your credit. Enter here and on Form 1040, line 69</p>	6	

General Instructions

Section references are to the Internal Revenue Code.

Purpose of Form

Use Form 5405 to claim the first-time homebuyer credit. The credit may give you a refund even if you do not owe any tax.

For homes purchased in 2008, the credit operates much like an interest-free loan. You generally must repay it over a 15-year period. For homes purchased in 2009, you must repay the credit only if the home ceases to be your main home within the 36-month period beginning on the purchase date. See *Repayment of Credit* on page 2.

Who Can Claim the Credit

In general, you can claim the credit if you are a first-time homebuyer. You are considered a first-time homebuyer if:

- You purchased your main home located in the United States after April 8, 2008, and before December 1, 2009.
- You (and your spouse if married) did not own any other main home during the 3-year period ending on the date of purchase.

If you constructed your main home, you are treated as having purchased it on the date you first occupied it.

Main home. Your main home is the one you live in most of the time. It can be a house, houseboat, house trailer, cooperative apartment, condominium, or other type of residence.

Who Cannot Claim the Credit

You cannot claim the credit if any of the following apply.

1. Your modified adjusted gross income is \$95,000 or more (\$170,000 or more if married filing jointly). See the instructions for line 2.
2. You are, or were, eligible to claim the District of Columbia first-time homebuyer credit for any tax year. This rule does not apply for a home purchased in 2009.
3. Your home financing comes from tax-exempt mortgage revenue bonds. This rule does not apply for a home purchased in 2009.
4. You are a nonresident alien.
5. Your home is located outside the United States.
6. You sell the home, or it ceases to be your main home, before the end of 2008.
7. You acquired your home by gift or inheritance.
8. You acquired your home from a related person.

A related person includes:

- a. Your spouse, ancestors (parents, grandparents, etc.), or lineal descendants (children, grandchildren, etc.).
- b. A corporation in which you directly or indirectly own more than 50% in value of the outstanding stock of the corporation.
- c. A partnership in which you directly or indirectly own more than 50% of the capital interest or profits interest.

For more information about related persons, see *Nondeductible Loss* in Chapter 2 of Pub. 544, *Sales and Other Dispositions of Assets*. When determining whether you acquired your main home from a related person, family members in that discussion (except item 7) include only the people mentioned in 8a above.

Amount of the Credit

Generally, the credit is the smaller of:

- \$7,500 (\$8,000 if you purchased your home in 2009), but only half of that amount if married filing separately, **or**
- 10% of the purchase price of the home.

You are allowed the full amount of the credit if your modified adjusted gross income (MAGI) is \$75,000 or less (\$150,000 or less if married filing jointly). The phase-out of the credit begins when your MAGI exceeds \$75,000 (\$150,000 if married filing jointly). The credit is eliminated completely when your MAGI reaches \$95,000 (\$170,000 if married filing jointly).

Repayment of Credit

Homes purchased in 2008. You generally must repay the credit over a 15-year period in 15 equal installments. The repayment period begins in 2010 and you must include the first installment as additional tax on your 2010 tax return.

If your home ceases to be your main home before the 15-year period is up, you must include all remaining annual installments as additional tax on the return for the tax year that happens. This includes situations where you sell the home, you convert it to business or rental property, or the home is destroyed, condemned, or disposed of under threat of condemnation.

If you and your spouse claim the credit on a joint return, each spouse is treated as having been allowed half of the credit for purposes of repaying the credit.

Example 1. You claimed a \$7,500 credit on your 2008 tax return. You must include \$500 ($\$7,500 \div 15$) as additional tax on your 2010 tax return and on each tax return for the next 14 years.

Example 2. You claimed a \$7,500 credit on your 2008 tax return. In 2009, you sold the home to your son. You must include \$7,500 as additional tax on your 2009 tax return.

Exceptions. The following are exceptions to the repayment rule.

- If you sell the home to someone who is **not** related to you, the repayment in the year of sale is limited to the amount of gain on the sale. (See item 8 under *Who Cannot Claim the Credit* for the definition of a related person.) When figuring the gain, reduce the adjusted basis of the home by the amount of the credit you did not repay.
- If the home is destroyed, condemned, or disposed of under threat of condemnation, and you acquire a new main home within 2 years of the event, you continue to pay the installments over the remainder of the 15-year repayment period.
- If, as part of a divorce settlement, the home is transferred to a spouse or former spouse, the spouse who receives the home is responsible for making all subsequent installment payments.

- If you die, any remaining annual installments are not due. If you filed a joint return and then you die, your surviving spouse would be required to repay his or her half of the remaining repayment amount.

Homes purchased in 2009. You must repay the credit only if the home ceases to be your main home within the 36-month period beginning on the purchase date. This includes situations where you sell the home, you convert it to business or rental property, or the home is destroyed, condemned, or disposed of under threat of condemnation. You repay the credit by including it as additional tax on the return for the year the home ceases to be your main home. If the home continues to be your main home for at least 36 months beginning on the purchase date, you do not have to repay any of the credit.

If you and your spouse claim the credit on a joint return, each spouse is treated as having been allowed half of the credit for purposes of repaying the credit.

Exceptions. The following are exceptions to the repayment rule.

- If you sell the home to someone who is **not** related to you, the repayment in the year of sale is limited to the amount of gain on the sale. (See item 8 under *Who Cannot Claim the Credit* for the definition of a related person.) When figuring the gain, reduce the adjusted basis of the home by the amount of the credit.
- If the home is destroyed, condemned, or disposed of under threat of condemnation, and you acquire a new main home within 2 years of the event, you do not have to repay the credit.
- If, as part of a divorce settlement, the home is transferred to a spouse or former spouse, the spouse who receives the home is responsible for repaying the credit.
- If you die, repayment of the credit is not required. If you filed a joint return and then you die, your surviving spouse would be required to repay his or her half of the credit.

Specific Instructions

Part I General Information

Line B. Enter the date you acquired the home. This is the date you purchased it (or the date you first occupied it if you constructed your main home).

Line C. You can choose to claim the credit on your 2008 Form 1040 for a main home purchased after December 31, 2008, and before December 1, 2009. If you make this choice, check the box.

Part II Credit

Line 1. If two or more unmarried individuals buy a main home, they can allocate the credit among the individual owners using any reasonable method. The total amount allocated cannot exceed the smaller of \$7,500 (\$8,000 if you purchased your home in 2009) or 10% of the purchase price. See *Purchase price* on page 3.

Note. A reasonable method is any method that does not allocate all or a part of the credit to a co-owner who is not eligible to claim that part of the credit.

Purchase price. The purchase price is the adjusted basis of your home on the date you purchased it. This includes certain settlement or closing costs (such as legal fees and recording fees) and your down payment and debt (such as a first or second mortgage or notes you gave the seller in payment for the home). If you build, or contract to build, a new home, your purchase price can include costs of construction. For more information about adjusted basis, see Pub. 551, Basis of Assets.

Line 2. Your modified adjusted gross income is the amount from Form 1040, line 38, increased by the total of any:

- Exclusion of income from Puerto Rico, and
- Amount from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For the estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

LAKE COUNTY AFFORDABLE HOUSING SHIP/HHR PROGRAMS

PO BOX 7800 TAVARES, FLORIDA 34778

PHONE: 352.742.6530 FAX: 352.742.6535

Please return form to: _____

VERIFICATION OF EMPLOYMENT

Employee: _____
Address: _____

Social Security No. _____

Employer: _____
Address: _____

AUTHORIZATION: State and Federal Regulations require us to verify employment income for all members of the household applying for assistance. We ask your cooperation in supplying this information. This information will be used only to determine the eligibility status of the household.

Your prompt return of the requested information will be appreciated.

RELEASE: I hereby authorize the release of the requested information.

Signature of Applicant

Date: _____

Date of Employment _____
Occupation _____

Salary:
Base Pay Rate:
Hr. _____; or Wk _____; or Mo _____

Average Hrs/Wk at Base Pay Rate: _____ Hours _____
_____ weeks or _____ months worked per year

Overtime Pay Rate: _____ per hour

Is overtime expected? Yes _____ No _____

Expected average number of hours overtime worked per week during next 12 months _____

Any other compensation not included above (specify for commission, bonuses, tips, etc.):

For _____ \$ _____ per _____

Does the employee participate in and have access to a retirement account? Yes _____ No _____

If yes, what type of account. _____
(401K, IRA, TSA, etc.)

Employer Signature _____

Title: _____

Date: _____

Telephone: _____

LCAH/SHIP/ 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.

LAKE COUNTY AFFORDABLE HOUSING SHIP/HHR PROGRAMS
PO BOX 7800 TAVARES, FLORIDA 34778
PHONE: 352.742.6530 FAX: 352.742.6535

SELF EMPLOYED AFFIDAVIT

In submitting an application for SHIP assistance from Lake County, I acknowledge that I am self-employed in _____ and have been engaged in this kind of work for _____ years. I anticipate earning \$ _____ during the next twelve months.

Attached is documentation (previous years' **signed** tax return, audited or unaudited financial statement of business, or a statement of net income from a bookkeeper or accountant) of my past income history.

Signature

Date

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who produced _____ as identification, or _____ is personally known to me:

Notary Public
State of Florida at Large

My Commission Expires:

LCAH/SHIP/ 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.

LAKE COUNTY AFFORDABLE HOUSING SHIP/HHR PROGRAMS

PO BOX 7800 TAVARES, FLORIDA 34778

PHONE: 352.742.6530 FAX: 352.742.6535

Please return form to: _____

VERIFICATION OF FULL TIME STUDENT

Student: _____
Address: _____

Individual claiming to be a Full-Time student: _____

Name of School or Institution: _____

Address: _____

AUTHORIZATION: State and Federal Regulations require us to verify Full-Time student status of all members of the household applying for assistance. We ask your cooperation in supplying this information. This information will be used only to determine the eligibility status of the household.

Check the Applicable Box:

The above referenced individual is in good standing with this institution

Your prompt return of the requested information will be appreciated. Please mail the original form to: Lake County Housing, PO Box 7800 Tavares, FL 32778 and fax a copy to 352.742.6535

The above referenced individual is NOT in good standing with this institution

RELEASE: I hereby authorize the release of the requested information.

Years remaining to complete Degree or Program: _____

Signature of Applicant

Signature of Authorized Representative

Date

Printed Name of Authorized Representative

Title

Date

Telephone

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



LAKE COUNTY
FLORIDA

FLORIDA HOUSING OPPORTUNITY PROGRAM (FHOP)

NOTIFICATION

COLLECTION OF SOCIAL SECURITY NUMBERS

PLEASE NOTE: The Lake County Department of Community Services collects social security numbers for the following purposes: classification of accounts; identification and verification; credit worthiness; billing and payments; data collection; reconciliation; tracking; benefit processing; and tax reporting. Social security numbers are also used as a unique numeric identifier and may be used for search purposes.

Acknowledgement of notification:

Head of Household Signature

Date

Witness Signature

Date



LAKE COUNTY FLORIDA

HOUSING AND COMMUNITY DEVELOPMENT FLORIDA HOUSING OPPORTUNITY PROGRAM REPAYMENT AGREEMENT

I/We, the Applicant(s), have entered into this Repayment Agreement, hereinafter referred to as "Agreement", with full understanding that any monetary assistance originating from the Lake County Affordable Housing "FHOP" Program shall be repaid by me/us in accordance with the terms and conditions of this Agreement.

I/We, the Applicant(s), further understand and expressly agree that I/we are jointly and severally liable for the repayment of monies originating from the Lake County Affordable Housing "FHOP" Program.

I/We, the Applicant(s), agree to all the terms and conditions set forth in this Agreement for the repayment of the funding assistance and furthermore agree that if the property is held by my/our estate or my/our heirs, the estate or heirs shall repay the loan in accordance with the terms and conditions of this Agreement.

The terms and conditions for repayment of the funding assistance are as follows:

1. If prior to the tenth (10th) year anniversary of my/our execution of the _____ mortgage held in favor of Lake County against my/our property as described above, I/we, the Applicant(s), refinance with a payout, sell the property, transfer, give away, or otherwise convey any part of interest in the property, whether by voluntary act or involuntary act, by operation of law or otherwise, if the property is otherwise occupied by a person or household other than the person or household for which the assistance was intended, or if I/we, the applicant(s), is/are divested of title by judicial sale, levy or other proceeding, or if foreclosure action is instituted against the property, or if the property is leased or rented, the total sum of the awarded funding assistance originating from the Lake County Affordable Housing "FHOP" Program shall become immediately due and payable in full, without notice to the recipient.
2. While maintaining compliance with the legislative intent of the program the recapture requirement states that the Lake County loan will be secured by a ten (10) year mortgage with a 10% per annum interest rate that shall begin accruing at closing. The mortgage and note will provide that if the homebuyer pays the original principal in full within eighteen (18) months from date of closing, that no interest shall be due. If the homebuyer fails to fully repay the loan within 18 months from the date of closing, that all principal and accrued interest shall be due on the first of the following to occur: "upon sale, refinance, rental or lease of the property or at the time that the property is no longer the primary residence of the homebuyer, or 10 years."

I/We, the Applicant(s), have fully read and understand and expressly agree to the terms and conditions of this Agreement and furthermore agree to be legally bound to repay any funding assistance awarded to me/us from the Lake County Affordable Housing "FHOP" Program. I/We also agree to execute a mortgage contract and/or other documents as deemed necessary by the County to insure repayment of awarded funds and I/we, the Applicant(s), understand that these documents shall be legally recorded as a lien against the property as described by address and legal description above.

Certification

I/We, the Applicant(s), understand that Florida Statute 817.03 provides that willful false statements or misrepresentation concerning income or asset information relating to financial condition is a misdemeanor of the first degree, punishable by fines and imprisonment provided under Statutes 775.082 or 775.083. I/we further understand that any willful misstatement of information will be grounds for either termination of the application process or, if awarded funding assistance, the total amount of the funding assistance originating from the Lake County Affordable Housing "FHOP" Program shall become immediately due and payable by the Applicant(s). I/we certify that the application information provided in this application is true and complete as of the date set forth beside my/our signature on this application. I/we consent to the disclosure of information for the purpose of income verification related to making a determination of my/our eligibility for program assistance. I/we agree to provide any documentation needed to assist in determining eligibility and are aware that all information and documents provided are a matter of public record.

Applicant

Date Signed

Applicant

Date Signed

State of Florida
County of Lake

The foregoing instrument was acknowledged before me this _____ day of _____, 2009, by _____, who produced _____ as identification or

(type of identification)

_____ is personally known by me.

Signature of Notary
(Seal)

LAKE COUNTY AFFORDABLE HOUSING SHIP/HHR PROGRAMS
PO BOX 7800 TAVARES, FLORIDA 34778
PHONE: 352.742.6530 FAX: 352.742.6535

UNEMPLOYED AFFIDAVIT

Before me this _____ day of _____, 20____, personally appeared

_____ who, being dully sworn, deposes and says:

1. I have made application for housing assistance from the Lake County Affordable Housing (SHIP) Program.

2. Check (a) or (b) as applicable:

_____ (a) I am not presently employed but receive unemployment.

_____ (b) I am not presently employed and do not receive unemployment.

Household Member Signature

STATE OF FLORIDA

COUNTY OF _____

Before me personally appeared _____ who
acknowledged to me that he/she executed the foregoing instrument this _____ day
of _____, 20_____.

Notary Public
State of Florida at Large

My Commission Expires: