TOWN OF EASTON, MARYLAND

Easton Affordable Housing Purchase Program

First Time Homebuyers

Easton Town Hall
14 South Harrison Street
Easton, Maryland 21601
410-822-2525 www.town-eastonmd.com

Please Read All of These Important Instructions Carefully!

Applications are accepted any time during the year. All required documentation must be submitted before the affordable housing board will be able to consider your application.

Application Processing Time From the date that all required documents are received:

Please allow **4-6 Weeks** before calling to inquire about the status of your application.
Also, processing times may be longer due to the volume of applications received.

ELIGIBILITY

First Time Home Buyers Only:
Persons who have not owned a residential property in the previous five (5) years are eligible to participate in the program.

ASSETS/INCOME LEVEL:

There is an asset cap of $50,000. There are maximum income limits, based on family size. For example, with a family of (4), the maximum annual household income to qualify would be $57,054. Your total household income will include the annualized income for all members of your household (18) years of age and over at time of application. You may contact Susan Filbird @ 410-822-2525 ext.144 if you require additional information.

APPLICATION

For the Affordable Housing Board to determine if you are eligible to participate in the First-Time Homebuyer Program, please complete an application to provide information about your family & your income. Applicants who apply to purchase a home must meet appropriate income & credit history guidelines.

The Easton Affordable Housing Board does not provide any form of financing. You must be able to qualify for a mortgage, make a down payment, and pay settlement and other closing costs necessary to purchase the house. To obtain mortgage financing, you need to have good credit; a steady income and the house must be affordable for your family's income. The sale price of affordable housing units is set by the Housing Board.
The Easton Affordable Housing Board is not involved in the contracting process for affordable housing units. All purchase agreements are negotiated between you and the private seller.

DOCUMENTATION

Required Documentation: You must submit an original signed application and photocopies of all the required documents. Applications without the required documentation will be returned.

* Tax Information: Your two most recent years' Federal income tax returns, with all schedules and W-2 forms, must be included with the application. (Electronic summary, e-File, or Tele Tax is not acceptable.)

* Pay stubs: The four most recent pay stubs for all wage earners.

* Employment Verification Form: To be completed by employer and returned to Board. A separate employment verification form must be completed for all wage earners in each household

* Special Note for Renewal Applications: Please indicate if this is a renewal application by checking the appropriate space on the application and send in your most recent IRS tax form as well as the other information listed on the application (your four most recent pay stubs, W-2 forms, a new credit report, etc.).

* Pre-Qualification Letter: Applicants must submit a pre-qualification letter from a mortgage lender to apply.

Special Conditions Regarding Documentation:

- If divorced or separated, you must provide legal documentation stating this.
- If married and filed separate returns, you must provide both years for you and your spouse. If divorced or separated, you must provide both years of returns.
- If you did not file in either tax year, you must include a letter from the IRS at 1-800-829-1040.
- If you did not file because you were a full-time student, provide a copy of your school transcript or a class schedule showing that you were a full-time student during the applicable tax year.
- If you are newly arrived in the United States and did not file taxes during the previous two years, you must:
    - Include a letter for the IRS certifying that they have on record of you filing a tax return (you may contact the IRS at 1-800-829-1040);
    - Verify your entry date (a copy of the first page of your passport and a copy of the page with the date of entry stamp).

- If you have a newborn child who was not listed on your Federal income tax return, you must provide a copy of the child's birth certificate.
- If a dependent is 18 or older, you must verify whether a student or working. If working, you must provide copies of their four most recent pay stubs from their employer.
- If you are a student, or if your dependent is over 18 and is a student, you must provide a current school transcript or a class schedule. Student identification will not be accepted.
- If you are self-employed, you must provide a year-to-date summary statement of income and expenses.
- If you are a single parent and do not receive child support or alimony, check the appropriate box and mark "0" in the space indicated on the application. If you receive either of the above, put the amount received in the space indicated. If you do not provide this information, processing will be delayed until the information is supplied.

SELECTION

As affordable residential units are made available in each income category, the Housing Board will notify qualified applicants approved through the program. If more qualified applicants exist than available units, a lottery selection will take place. Otherwise, qualified applicants will work with the program coordinators to select from available units. Priority is given to persons who live or work in Talbot County, are active military or are a veteran with an honorable or medical discharge and to those who have been in the program for the longest period. The priority is enforced through a point system.

OCCUPANCY AND RESALE RESTRICTIONS

To ensure affordable housing units serve eligible households and are affordable to future owners, the following restrictions are placed on the program. You must agree to these restrictions to participate in the program.

Occupancy:
The affordable housing unit must be owner occupied. You must occupy the unit as your primary residence.

Control of Resale:
The resale price of the affordable housing unit is controlled for a set period ranging from 7 to 15 years that depends on the development in which the affordable housing unit is located. You may sell your unit during the control period. However, you must sell it at a price determined by the Housing Board. The sale price is limited to the sum of the original price plus the increase in inflation from the date of the original purchase to the date of the resale plus the fair market value of capital improvements made to the unit.

Share of Excess Profit:
To provide funds for producing affordable housing in the future, the Town has established the Easton Affordable Housing Fund. When an affordable housing unit is sold the first time after the control period expires, the seller must pay one-half of the excess profit to the Easton Affordable Housing Fund. The Housing Board must adjust the amount paid into the Fund to ensure that the seller retains at least $10,000 of excess profit. Money contributed to the Easton Affordable Housing Fund is used to finance construction or rehabilitation of other affordable homes in Easton.

Town of Easton, Maryland
Easton Affordable Housing Program (EAHP)

14 South Harrison Street
Easton, MD 21601
(410) 822-2525
www.town-eastonmd.com

Renewal Application?
Yes No

APPLICATION FORM

Please read the instructions. Complete ***ALL*** applicable blanks. The information will be used to determine your eligibility for the program; it will not be used to qualify you for mortgage financing. All information will be kept confidential.

THIS APPLICATION MUST HAVE PHOTOCOPIES OF THE FOLLOWING ITEMS ATTACHED (please check off each attachment – incomplete applications will be returned):

- Copies of your two most recent Federal Income Tax Returns together with all supporting schedules, attachments, and W-2 forms (***Electronic Summary, e-File, or TeleFax are not acceptable***). If this is a renewal, only the most recent year tax form and W-2 are required.
- Copies of the two most recent pay stubs for every wage earner in the household.
- Employment verification form for each wage earner in the household.

APPLICANT Social Security Number: ☐☐☐-- ☐☐-- ☐☐☐☐

Name: _____
Current Address: _____
_____
Home Phone:_____Work Phone: _____
Employer: _____
City/State:_____Employer Phone: _____ Current Base Salary: $
_____Overtime: $_____Bonuses $_____
Other Income (explain and verify):_____
_____ Alimony/Child Support Received?:_
Yes No $ _____
Email address: _____

CO-APPLICANT* Social Security Number: ☐☐☐-- ☐☐-- ☐☐☐☐

Name: _____
Current Address: _____
_____
Home Phone:_____Work Phone: _____
Employer: _____
City/State:_____Employer Phone: _____ Current Base Salary: $
_____Overtime: $_____Bonuses $_____
Other Income (explain and verify):_____
_____ Alimony/Child Support Received?:_
Yes No $ _____
Email address: _____

* - spouses must be included on this application

FAMILY INFORMATION: Provide the requested information for each household member who will be living with you.

Name	Relationship	Gender	Date of Birth
	Head of Household	Male Female	
		Male Female	
		Male Female	
		Male Female	
		Male Female	
		Male Female	
		Male Female	

(Any dependent listed above who is 18 years of age or older must document if he/she is employed or a student)

Please complete the following to assist in the analysis of the affirmative marketing of units under this program.

Race Category:____Asian ___Black ___Hispanic ___White Other _____

MARITAL STATUS:
Check all that apply:
Are you currently_____single or_____married? Are you_____divorced or_____legally separated?
If you are divorced or separated, you must provide legal documentation stating this.

CERTIFICATIONS:
By signing below:

- I certify that no one on this application has owned residential property within the last five (5) years.
- I agree to allow the Easton Affordable Housing Board to review my application and supporting documents to determine my/our present and continuing eligibility.
- I certify that the information provided on this application is true and complete to the best of my knowledge. I am aware that any misrepresentation will result in the forfeiture of my rights to be eligible for the Easton Affordable Housing Program (EAHP), and that inquiries may be made to verify this information.
- I certify that I have read, understand, and will comply with the EAHP

Applicant Signature_____ ***Date*** _____

PLEASE SUBMIT COMPLETED APPLICATION AND SUPPORTING DOCUMENTATION TO:

Town of Easton Affordable Housing Program
14 South Harrison Street
Easton, MD 21601

FAXED APPLICATIONS WILL NOT BE ACCEPTED

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

__NEW
__REVISED (Date:_____)
__DELETE FROM DATABASE

_____
(Prepared By)

_____
(Date)

___INCOMPLETE (Date:_____)

___READY TO PURCHASE

___REFERRED TO CREDIT COUNSELING

___APPROVED BY LENDER

TOTAL ANNUAL INCOME $_____

___ELIGIBLE FOR:

___PURCHASE # BR_____

___INELIGIBLE:
Reason:

Employment Verification Form

In order to determine eligibility for the Easton Affordable Housing Program, we must verify both employment and income on the below listed applicant.

I hereby authorize and request you to furnish information regarding my employment. I understand that this information will be kept confidential and will be used only for the program purposes.

Name and Address: _____

_____

Applicant Signature: _____ Date: _____

We ask your cooperation in providing the following information and returning it to:
Easton Affordable Housing Program, 14 S. Harrison Street, Easton, MD 21601

Your prompt return of this information will help to assure timely processing of the application.

Section I – General Information: (To be completed by employer)

Employee Name:_____ SS#_____

Employee Address: _____

Type of work performed by employee: _____ Hire Date: _____

Number of hours worked per week: _____ Number of Days per week: _____

Employee Paid: $_____ [ ] Weekly [ ] Bi-Weekly [ ] Semi-monthly [ ] Monthly [ ] Other

Does employee receive commission /tips? [ ] Y [ ] N (if yes, indicate amount): $_____
Annual Bonus (Indicate amount): $_____

Is employment year round? [ ] Y [ ] N (If No, specify: 12 mos ___ 11½ mos ___ 11 mos ___
10½ mos ___ 10 mos ___ 9½ ____ 9 mos ____ or _____mos

Section II – Employer Information: (To be completed by employer)

Employer Name: _____ Title:_____

Business Name: _____ Phone: _____

Business Address: _____

Section III – Employer Verification:

This form should be completed and signed by a bona fide representative of the employer such as the human resources personnel, bookkeeper or accountant. Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy.

The information provided on this form is true and complete to the best of my knowledge. I know that if I give false information on purpose, I may be subject to prosecution for fraud.

_____	_____	_____
Employer Signature	Title	Date

TOWN OF EASTON
P.O. Box 520
Easton, Maryland 21601

CERTIFICATION OF ASSETS

I _____ (applicant) attest that I do not have assets that exceed Fifty Thousand Dollars $50,000. Assets include but are not limited to; bank accounts, investment accounts, 401ks, pensions or other retirement benefits, real estate, business interests, etc.).

_____

Signature

_____

Printed Name

_____

Date