

NORTON CITY/COUNTY ECONOMIC DEVELOPMENT

Norton County Housing Rehab Program

Application for Down Payment Assistance Plan

Program Description: Buy a home within Almena, Lenora or Norton, and we'll help with the down payment and closing costs through a one-time \$2000 closing cost grant and a 0% down-payment loan up to \$8,000. Home must be a primary residence to qualify.

Parameters:

1. Home located within city limits of Almena, Lenora or Norton within Norton County.
2. Two components available to qualified recipients of Home Ownership Program:
 - a. Five year, 0% interest loan & Up to \$2,000 in grant funds.
 - b. The down payment amount awarded is based upon 10% of the purchase price, maximum of \$10,000. The grant amount is split 80/20, maximum grant of \$2,000.
3. Eligibility:
 - a. Owner occupied existing home within city limits of Almena, Lenora or Norton
 - b. Home purchase price over \$35,000
 - c. Primary loan with a qualified local bank within Norton County, qualified banks:
 - i. First State Bank
 - ii. Solutions North Bank
 - iii. Equity Bank
 - iv. Mid-America Bank
 - v. UNWFCU
 - d. Meet primary bank qualifications for mortgage loan
 - e. No income guidelines, need based upon primary lender recommendation
 - f. Borrower with 625+ credit score from national credit bureau source
 - g. 0% interest, loan term meets primary bank term, not to exceed 20 years.
 - h. Borrower must complete/submit application to NC/CED Housing Rehab Committee.
4. Subject to availability of funds, available on first come first serve basis. Primary lender will check with NC/CED office for availability of funds.
5. Example:

\$ 8,000	8%	Norton Down Payment Assistance Loan
\$ 10,000	10%	Borrower cash down payment
\$ 82,000	82%	Primary Bank Loan
\$100,000	100%	Purchase Price of Home
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\$2,000	2%	One Time Grant for Closing Costs

Process:

1. Primary lender identifies qualified borrower and completes application for borrower's signature
2. Application submitted to NC/CED, reviewed by Norton County Housing Rehab Committee
3. Borrower and Primary Lender notified in writing by NC/CED if approved
4. Promissory and mortgage agreements executed between Borrower and NC/CED
5. Primary lender will execute a 3rd Party Escrow Agreement for Borrower with NC/CED Down Payment Assistance Loan
6. Primary lender will blend Down Payment Assistance Loan into primary mortgage payment plan
7. NC/CED prepares closing cost grant check for closing date

APPLICATION

PROPERTY ADDRESS:

PURCHASE PRICE:

\$

- Borrower's personal capital: \$
- Funds from primary lender: \$
- Other financial assistance: (Specify) \$
- Down payment assistance loan request: \$
- Tentative Closing Date:
- Confirm Intentions of borrower to occupy property as primary residence: Yes No

1. Applicant Name:

Current Mailing Address:

Phone:

E-Mail:

How Long have you been at this address?

2. Applicant Background

Employer: (Spouse A)

Wage/Salary: \$

Credit Score:

Employer: (Spouse B)

Wage/Salary: \$

Credit Score

Owned property before? Y/N

If YES, address:

Relocating for employment? Y/N

If Yes, please specify:

How many in your household?

of Adults: _____ # of Children: _____

Please describe you need for down payment assistance: _____

THIS IS AN APPLICATION FOR PARTICIPATION. THE INFORMATION PROVIDED WILL BE CONSIDERED FOR POSSIBLE INCLUSION OF YOUR PROJECT AS ONE THAT IS ELIGIBLE FOR THE HRP. ACCEPTANCE OF YOUR APPLICATION FOR CONSIDERATION IS NOT A PROMISE OF APPROVAL OR ELIGIBILITY.

Your application will be considered by the Norton County Housing Rehab Committee ("Committee") appointed solely at the discretion of the Norton City/County Economic Development ("NC/CED"). The Committee review will include, but not be limited to accuracy and eligibility with the information provided. You may be asked to provide additional information after initial review. The statements you have made in this application will be relied upon by NC/CED and the Committee in evaluating your application.

OFFICE USE ONLY: Appr / Rej by: _____ Date _____

signature: _____

CERTIFICATION

I/we hereby certify that all of the information that is submitted on this application and in conjunction with it is true and accurate to the best of my/our knowledge. I/we understand that failure to disclose all information or the submission of incorrect information may result in denial of assistance and participation in the Norton County Housing Rehab Program. I/we understand that whether or not the application is approved is a decision that is at the sole discretion of NC/CED its representatives, officers, agents, and assigns.

_____ Date: _____
Applicant's Signature

_____ Date: _____
Co-Applicant's Signature (if applicable)