



Chaffee Housing Trust Home Ownership Program

Thank you for your interest in home ownership! To better understand our program, please take some time to carefully read the **CHT Description & Homebuyer Scenario**. It should give you a good understanding of the organization and an example of the accounting on a typical transaction over time.

To begin the process, we need to collect some information from you regarding your eligibility. Please fill out the attached **Chaffee Housing Trust Homebuyer Application** form, and scan/email it to claudia@chaffeehousing.org.

Next, we need to know what your eligibility is for getting a mortgage loan. To do this, we need you to go online and pull your credit history. Please go to www.annualcreditreport.com and click the red button “**Request your free credit report.**” Once you get through all the questions (to confirm your identity), please download all the credit agency reports and **save to your computer as a .pdf file**. They can be long, so printing is not advised. You can email those files, or share them with us in person. We need to determine if there are any issues on your credit history that would be barriers to getting a mortgage approved. If there are issues, we can discuss how to resolve them.

To verify your income, we would need your most recent pay stubs covering **60 days period showing year-to-date earnings**. If you are self-employed, we would need the last **2 years profit & loss statements through the most recent calendar quarter**. In addition, **two most recent Federal Tax Returns and matching W-2 or 1099s for all adult household members**.

To verify your assets, we would need your most recent statements covering **6 months of bank accounts** along with statements from **all other assets including investments** (IRA, 401K, retirement, stocks, mutual funds, CDs, etc.)

Once we have reviewed your credit history, and addressed any concerns (this can take some time), you can then **apply for a mortgage loan**. We provide access to and support for application to two lenders:

- USDA Rural Development 502 Direct Loan Program: typically has a lower interest rate, longer term (33 or 38 years), no down payment required (we ask that you have at least \$2,500 up to \$3,500 at the time of closing or home purchase). This program has provisions for monthly payment assistance if needed.
- High Country Bank – Chaffee Housing Trust Loan Program: conventional financing with current market interest rates, 30-year term, similar down payment as described above.

Please review the **CHT Homebuyer Prep Checklist** for a comprehensive list of the documentation you *may* be required. Ask yourself where these documents may be, or how to get them. Having quick access to the documentation required will speed up the process. Additionally, you will need to fill out the **CHT Release of Information** form so that we can speak with lenders about your application (this gives them permission to speak with us about your application).

Once you have an approved mortgage loan, you will be put on our waiting list based on the date of the approval letter. People at the top of the wait list have first choice of available homes. If that home does not fit your needs, you can stay on the list in that ranked position until something comes available.

This program requires that you attend a **HUD-approved Homebuyer Education course** prior to being able to purchase a home through Chaffee Housing Trust. Course information for HUD-certified Homebuyer Training classes is available by clicking this link. [Homebuyer-Education-Course](#)

Please understand that this is an involved process requiring lots of paperwork and time. Patience is needed to pursue your dream of home ownership. We’re here to help you realize your dreams.

Chaffee Housing Trust shall not discriminate against any person or organization based on race, color, religion, sex, handicap, familial status or national origin. As an equal opportunity housing provider, Chaffee Housing Trust provides housing opportunities regardless of race, color, national origin, religion, sex, physical or mental disability, familial status or any other classification protected by applicable federal, state or local law.





CHAFFEE HOUSING TRUST
A Commitment to Community

PO Box 692
Buena Vista, CO 81211
(719) 239-1199
www.chaffeehousing.org
info@chaffeehousing.org

Chaffee Housing Trust has an agreement with Colorado Housing Assistance Corporation, for supervision and oversight of the Chaffee Housing Trust Housing Counseling program. Colorado Housing Assistance Corporation, (CHAC), is a HUD Certified Counseling Agency.

This notice is to inform you that all information provided to Chaffee Housing Trust as part of the Housing Counseling program will be shared with Colorado Housing Assistance Corporation

By Signing below, you agree to allow this sharing of information between the agencies and understand that you may at any time revoke this permission in writing.

Colorado Housing Assistance Corporation (CHAC)
670 Santa Fe Drive
Denver, CO 80204
303 572 9445

CHAC housing counseling staff may be reached during regular business hours for additional information. Please continue to work directly with Claudia Palzkill at Chaffee Housing Trust for your counseling needs and information

Please contact Chaffee Housing Trust, (719) 239 1579 or
Colorado Housing Assistance Corporation, (303) 572 9445

If you have any questions or need additional information.

Name

Date

Name

Date





CHAFFEE HOUSING TRUST
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Chaffee Housing Trust Homebuyer Application

Submit to: PO Box 305, Salida, CO 81201 or claudia@chaffeehousing.org

Please fill out this application as completely as possible. If a question does not apply to you, write N/A in the space provided. If you need more space to answer questions, please use additional paper. If you have any questions, please contact Claudia Palzkill (719) 239-1579 or email claudia@chaffeehousing.org

Name(s) _____ DOB _____

Address _____ City _____ State _____ Zip _____

Phone: _____ Email _____

1. How long have you lived, and/or worked in Chaffee or Lake County? _____ / _____

2. Family (or Household) Composition and Income (include **you & anyone** living in your home)

Please list **all household members** including children (members do not have to be related):

Household Member	DOB	Gross Annual Income
		\$
		\$
		\$
		\$
		\$

3. Current Employment Information. Please list employment from **all household members**

Household Member	Employer Name (if applicable)	Start Date	Pay Schedule (monthly, 2xmonth, biweekly, weekly)

4. Do you own or have you owned a home in the last three years? Yes No

If yes, please explain _____

5. Do you have childcare expenses? Yes No If yes, how much? \$ _____ /month

6. Do you have medical or disability expenses beyond health insurance and regular co-pays?

Yes No If yes, how much? \$ _____ /month

7. Do you have any debt? Yes No If yes, please fill out the following for each one:

Debt #1: balance owed = \$ _____ Current minimum monthly payment = \$ _____

Debt #2: balance owed = \$ _____ Current minimum monthly payment = \$ _____

Debt #3: balance owed = \$ _____ Current minimum monthly payment = \$ _____

Debt #4: balance owed = \$ _____ Current minimum monthly payment = \$ _____

If you are applying with a co-applicant, we will need information on both of you (see backside).

Do you have a repayment plan in place? Yes No

8. Do you have Student Loans? Yes No If yes, please fill out the following for each one:

Total Student Loan balance owed = \$ _____ Min. monthly payment = \$ _____

Is your loan in deferral? Yes No Was it forgiven? Yes No Are you current on payments? Yes No

Are you participating in an Income-based Repayment program? Yes No

9. Do you receive SNAP benefits? Yes No If yes, how much? \$ _____ /month

10. Do you receive Social Security / Disability payments? Yes No If yes, how much? \$ _____ /month
11. Have you been divorced? Yes No If yes, what is the date of the decree? ____ / ____ / ____
12. Do you receive or pay alimony payments? Yes No If yes, how much? \$ _____ /month
13. Do you receive or pay Child Support payments? Yes No If yes, how much? \$ ____ /month
14. Do you own or have an interest in any real estate, stocks, bonds, inheritance, or other assets?
Yes No If yes, please describe _____
15. Have you attended a HUD Approved Homebuyer Education Class? Yes No
16. Have you currently been pre-qualified by a Mortgage Lender? Yes No
If yes, who is the lender? _____ Loan Amount? \$ _____
17. Do you or could you have the funds available for a down payment of \$1,000 or more?
Yes No How much can you put towards down payment? \$ _____
18. Are you working with a Realtor? Yes No
If yes, who? _____ Company _____ Phone _____
19. Have you attended a CHT workshop? Yes No If yes, Name of Workshop: _____
20. Current Living Situation: Rent Own Live with Parents/Friends Other: _____
Rent \$ _____ /month Utilities \$ _____ /month
21. How did you hear about CHT? Check one: Website CHT Homeowner Social Media
CHT Flyer/Sign Friends or Family Community Event Other: _____

OPTIONAL: Federal funding agencies require the collection of ethnicity and race data to track Fair Housing performance. This information will not be used to determine housing eligibility.

Applicant 1 Ethnicity: Hispanic <input type="checkbox"/> or Not Hispanic <input type="checkbox"/> Race: American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Multiple Race <input type="checkbox"/> Prefer not to answer <input type="checkbox"/>		Applicant 2 Ethnicity: Hispanic <input type="checkbox"/> or Not Hispanic <input type="checkbox"/> Race: American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Multiple Race <input type="checkbox"/> Prefer not to answer <input type="checkbox"/>	
Gender: _____	Veteran: Yes <input type="checkbox"/> No <input type="checkbox"/>	Gender: _____	Veteran: Yes <input type="checkbox"/> No <input type="checkbox"/>
Education: No Grad <input type="checkbox"/> HS Diploma <input type="checkbox"/> Assoc <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> PHD <input type="checkbox"/>		Education: No Grad <input type="checkbox"/> HS Diploma <input type="checkbox"/> Assoc <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> PHD <input type="checkbox"/>	

Please provide any additional information or comments that are pertinent to your application, including co-applicant information that does not fit on the first page:

The information I (we) have provided here is true and correct to the best of my (our) knowledge. Verification may be obtained from any source named in this application. I (we) understand that more detailed information about my (our) finances, employment, and/or housing situation may be required before my (our) eligibility can be determined.

Applicant 1 signature _____ Date _____

Applicant 2 signature _____ Date _____





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Authorization for Release of Information **Autorización para Entrega/Obtención de Información**

_____ SS# _____

_____ SS# _____

Loan/Account # - Numero de Préstamo/Cuenta _____

I/We hereby authorize the Chaffee Housing Trust (CHT) and its representatives to obtain any and all records, reports and any other information pertinent to my possible participation in the CHT's programs. I consent to release this information and any supporting documents to Colorado Housing Assistance Corporation (CHAC) and the Department of Housing and Urban Development (HUD).

Agencies that I authorize the CHT to obtain information from, include, but are not limited to: lending institutions/mortgage companies, creditors, and home inspectors. Requests may involve, but are not limited to: information regarding finance terms, down payment, credit reports, and the results of home inspections.

By signing this release, I am granting unlimited communication that will not be terminated until I am no longer considering, applying to, or participating in the CHT's programs. This authorization is valid until rescinded in writing. A copy of this authorization may be accepted as an original.

Por este medio, autorizo a Chaffee Housing Trust (CHT) y a sus representantes a obtener todos y cada uno de los registros, informes y cualquier otra información pertinente a mi posible participación en los programas de CHT. Doy mi consentimiento para compartir esta información y cualquier documento de respaldo al Colorado Housing Assistance Corporation (CHAC) y al Departamento de Vivienda y Desarrollo Urbano (HUD, siglas en ingles).

Las agencias a las que autorizo al CHT para obtener información incluyen, entre otras: instituciones de crédito/compañías hipotecarias, acreedores e inspectores de viviendas. Las solicitudes pueden incluir, entre otras: información sobre términos financieros, anticipo, informes de crédito y los resultados de las inspecciones de viviendas.

Al firmar este comunicado, estoy otorgando una comunicación ilimitada que no se terminará hasta que ya no esté considerando, solicitando o participando en los programas de CHT. Esta autorización es válida hasta que se rescinda por escrito. Se puede aceptar una copia de esta autorización como original.

Applicant/Participant – Solicitante/Participante

Date/Fecha

Applicant/Participant – Solicitante/Participante

Date/Fecha





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Service Referrals

Chaffee and Lake Counties have a variety of services available to you as a client of Chaffee Housing Trust. If you are interested in any of these services please check the box beside the service and referral information will be provided.

- Financial Education and or Credit Counseling, provided by Chaffee Housing Trust.
- Education and or Training Programs provided by Colorado Mountain College.
- Behavioral Health Services provided by Solvista Health.

I acknowledge that the above services were offered to my household.

Name

Signature

Date



EQUAL HOUSING
OPPORTUNITY



CHAFFEE HOUSING TRUST
A Commitment to Community

Chaffee Housing Trust Homebuyer Prep Checklist

Keep this to track your documents for applying to lenders for a mortgage loan.
Not all documents may be required, just be prepared to provide them.

If you have any questions, please contact Claudia Palzkill
(719) 239-1579 or email claudia@chaffeehousing.org

INCOME INFORMATION

- Last two year's complete federal tax returns, including all schedules and attachments;
- All W-2s for the past two years;
- Most recent pay stubs covering 60 days period showing year-to-date earnings **or**
- Verification of Employment form (CHT provides) filled out by employer, mailed directly to CHT;
- If you are self-employed, please bring the following:
 - Sole Proprietor – Last 2 years profit & loss statements through the most recent calendar quarter;
 - Partnership - Last 2 years partnership (1065) tax returns, profit & loss, balance sheet thru most recent quarter;
 - S Corp - Last 2 years complete S Corp (1120) tax returns, profit & loss, balance sheet thru the most recent quarter;
 - Corporation - Last 2 fiscal years corporate tax returns (1120s), profit & loss, balance sheet thru the most recent quarter.

ASSET/DEBT INFORMATION

- Credit Report – go to www.annualcreditreport.com, 1 free copy per year from each of the three reporting agencies.
- Bank statements for all accounts for the past six months, including all pages provided;
- Current statements for any investments, stocks, bonds, mutual funds, money market funds, CD's, retirement/pension account, 401K, or IRA. Also, be sure to include names of financial institutions, mailing addresses, account numbers, account balances.
- Vehicles, including year, make, model, approximate value, and any loan information if applicable.
- Any other debt information, including student loans, child support, alimony, or other obligations.
- If applicable, information on any divorce and/or declaration of bankruptcy.
- Amount of cash you can provide for down payment and closing costs.
- If you own your own business, information on net worth of company.

EMPLOYMENT INFORMATION

- Employment history for the last two years, including: any current signed contracts or work agreements, employer name, contact information, your position, date started/ended, # years in this type of position or industry, hourly wages & hours worked weekly and/or monthly wage & annual gross earnings (before taxes), year-to-date earnings.

RESIDENCE AND LANDLORD INFORMATION

- Name and address, phone numbers of landlords for the past 12 months
- Location of rental, time period rented, rent amount for the past 12 months
- If you owned a home in the last 3 years, information including dates owned, purchase & sale prices.
- If applicable, any information on foreclosures or evictions.

CITIZENSHIP INFORMATION

- Copy of Social Security Card (front & back)
- Copy of Driver's License or Colorado ID card (front & back)
- Proof of U.S. citizenship, permanent legal status or residency.

OTHER DOCUMENTS

- Signed Chaffee Housing Trust Release of Information form
- Copy of Homebuyer Education Class Certificate of Completion dated within the last 12 months





CHAC Pre-Purchase and/or Financial Counseling Intake

CHAC Counseling Policy

1. Intake and additional documents for phone appointments should be sent prior to phone call. Fax #303-573-9214 or email (see email address below for your counselor).
2. No originals, only copies
3. Remember to submit the completed intake packet, record of any income, budget, copy of credit report (if you have one), recent utility bills, and any other relevant documentation. Photo ID
4. Clients are encouraged to maintain contact with CHAC.
5. If no response from client after three attempts, file will be closed.

CHAC Appointment Date, Time and Phone or Face to Face: _____

CHAC Counselor & email: _____

Client Information:

Buyer #1: _____ **Gender (circle):** M F

SS#: _____ DOB: ____/____/____ **US CITIZEN (circle):** Y N

Buyer #2: _____ **Gender (circle):** M F

SS#: _____ DOB: ____/____/____ **US CITIZEN (circle):** Y N

Address: _____

Home #: _____ Cell: _____ Wk.: _____

Email: _____

Household type: (circle)

1. Single adult;
2. Female single parent;
3. Male single parent;
4. Married w/out children
5. Married w/children;
6. Two or more unrelated adults;
7. Other

Education: (circle)

1. No grad;
2. HS diploma;
3. Assoc;
4. Bachelors;
5. Masters;
6. PHD

Client's signature _____ Date _____

Client's signature _____ Date _____



BUDGET

1. <u>Source of Income:</u>			
Gross Income:		Net Monthly Income:	
2. <u>Source of Income:</u>			
Gross Income:		Net Monthly Income:	
3. <u>Source of Income:</u>			
Gross Income:		Net Monthly Income:	
4. <u>Source of Income:</u>			
Gross Income:		Net Monthly Income:	

Household Monthly Expenses:

<u>Rent/Mortgage:</u>				
<u>Gas:</u>		<u>Electricity:</u>		<u>Water:</u>
<u>Trash:</u>		<u>Cable:</u>		<u>Internet:</u>
<u>Phone:</u>				
<u>Medical Rx:</u>		<u>Drs Appts:</u>		
<u>Credit Card #1:</u>		<u>Credit Card #1 Balance:</u>		
<u>Credit Card #2:</u>		<u>Credit Card #2 Balance:</u>		
<u>Student Loans:</u>				
<u>Groceries:</u>		<u>Eating Out:</u>		
<u>Auto:</u>		<u>Auto Insurance:</u>		<u>Gas:</u>
		<u>Auto Maintenance:</u>		
<u>Other Expenses:</u>	(ex: Pets, Travel, Memberships, Transportation (Uber), Donations, Entertainment)			
a.				
b.				
c.				

Net monthly income: _____ - monthly debts _____ = _____ Residual Income

Client initials _____ Counselor initials _____ Date _____



BUYING INFORMATION (Pre-purchase only):

I (We) have attended a CHFA approved Homebuyer Education Class: _____

Goal date you would like to purchase a home: _____

Do you have a realtor or lender?:

Lender Information: _____

Realtor Information: _____

What do you believe to be your challenge in buying at this time?

_____ credit issues _____ lack of down payment _____ budget issues _____ affordability

Explanation of what you want to accomplish with counseling:

Money saved at this time: \$ _____

Referred to CHAC by: _____



Consent Form

1. I/We understand that Colorado Housing Assistance Corporation (CHAC) provides foreclosure prevention counseling and homebuyer counseling services. I/We will receive an action plan that will consist of steps the housing counselor and I/we will need to act on, to try to accomplish the goal of either preventing foreclosure or purchasing my /our first home.
2. I/We understand that CHAC may receive congressional funds through the National Foreclosure Mitigation Counseling program (NFMC) or other funds. When such funds are allocated, CHAC may be required to share some of my/our personal information with NFMC, HUD or other funders, for the purpose of doing a follow-up and/or measuring compliancy.
3. I/We acknowledge that I/we have received a copy of the CHAC privacy policy (read below).
4. I/We may be referred to other services that CHAC deems appropriate to aid with my/our action plan.
5. A counselor may answer questions and provide information, but not give legal advice
6. I/We understand that CHAC provides information and education on numerous loan products and housing programs and I/we further understand that the housing counseling I/we receive from CHAC in no way obligates my/our use of any of these particular loan programs and housing programs.

I/We agree to terms and conditions

I/We disagree. Explanation: _____

Printed Name/Signature/ Date

Printed Name/Signature/ Date

Privacy Statement

If you are like most Americans, privacy is a big concern to you. We want you to know that CHAC shares this concern. State and federal laws pledge us to keep your information confidential unless we are required by a legal authority to divulge the information. CHAC will not disclose any non-public personal information regarding its clients or former clients to any nonaffiliated third party agency except as directed by or with express consent of the client or to protect against fraud or respond to judicial process. Your personal information is stored in a secure space or in a secure computer. Any documentation will be shredded when a file has expired the term of retainment.



Counseling Agreement

I/We _____ hereby request the services of Colorado Housing Assistance Corporation (CHAC) to receive housing counseling regarding either my mortgage concerns or to prepare for mortgage readiness.

I/We agree to:

1. Provide my information required by CHAC in order to complete the counseling process
2. Give permission for CHAC's counseling, specifically **Housing Counselor Veronica Campbell** (phone number: (303) 572-9445 ext. 117), to communicate with the lender and/or any other relevant party, regarding the mortgage matter.
3. Give permission to any lender from which I/we obtain a mortgage loan to discuss my loan with a CHAC counselor.

I/We authorize CHAC counselor to:

1. Obtain information from other sources which may be necessary to complete the counseling process. Those other sources may include credit reporting agencies.
2. Release my information collected by CHAC, to third parties (i.e.-HUD, NFMC) for the limited purpose of monitoring the CHAC program performance substantiating program activity and evaluating the effectiveness of homeownership counseling.

I/We understand that:

1. CHAC will not charge me/us for its counseling services, but may be charged a fee to obtain a credit report.
2. CHAC is not an agent for any mortgage lender or real estate agency.
3. CHAC has no authority to approve or deny a first mortgage loan application
4. CHAC will preserve strict confidentiality of any information provided, except as, stated in this agreement, or later authorized in writing by me/us.
5. I/we have the opportunity to "opt-out" of disclosures of my nonpublic personal information to third parties. I wish to "opt – out" : (initial) _____

Participation in CHAC's education or counseling program does not:

1. Require or commit me/us in any way to use any CHAC's services.
2. Guarantee approval for CHAC's lending programs, or other applications.

In consideration of CHAC's assistance regarding either resolving a mortgage concerns or preparing for mortgage readiness, I/we agree to hold CHAC, its employees and agents, harmless from any losses, claims, liabilities or damages alleged to arise from CHAC services. This document will expire one year from the date below.

Signature /Date

Signature / Date



CREDIT REPORT AUTHORIZATION AND PRIVACY DISCLOSURE FORM

I/We hereby authorize and instruct Colorado Housing Assistance Corporation (hereinafter “CHAC”) to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by CHAC.

I/We understand and agree that CHAC intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home, general credit management or to engage in post-purchase counseling activities.

Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

I understand that I may revoke my consent to these disclosures by notifying CHAC in writing.

Client’s Name (Print)

Client’s Name (Print)

Client’s Signature

Client’s Signature

Social Security Number

Social Security Number

Date of Birth

Date of Birth

Property Address

Date



**COLORADO
HOUSING ASSISTANCE
CORPORATION**

2023 STATEMENT OF HOUSEHOLD INCOME/DEMOGRAPHICS

The Department of Housing and Urban Development – Community Development Block Grant funds have been awarded to fund Colorado Housing Assistance Corp program. Federal regulations require the program to provide benefit to low and moderate-income persons. All questions on this document must be completed. The form must be acknowledged and signed.

1. Name of person completing form: _____
2. Head of Household Name _____
3. Home Address: _____
(address) (city) (state) (zip code)
4. Is the Head of Household:
 - a. Female? Yes _____ No _____
 - b. Disabled? Yes _____ No _____
(A disability is a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such an impairment; or being regarded as having such an impairment.)
 - c. Age 62 years or older? Yes _____ No _____
5. Total annual household income: _____ *(Income applies to all adults 18 years or older living in household)*
6. Total Number of Persons in Household: _____
7. Number of household members being served by program: _____ Name of Program: CHAC
8. For each household member served by the program, please answer **both** a and b, placing the number of household members that meet the criteria of the category in the blanks or column. Note that this information is required for reporting purposes.
 - a. Ethnicity: Hispanic or Latino _____ Not Hispanic or Latino _____
 - b. Race: *(Please check appropriate box below)*

SINGLE RACE CATEGORY	MULTI-RACE CATEGORY
White	American Indian/Alaska Native & White
Black/African American	Asian & White
Asian	Black/African American & White
American Indian/Alaska Native	American Indian/Alaska Native & Black / African American
Native Hawaiian/Other Pacific Islander	Other Multi-race (Please explain)

THIS INFORMATION WILL BE USED FOR NO OTHER PURPOSE THAN TO DETERMINE AND VERIFY INCOME ELIGIBILITY AND WILL BE HELD STRICTLY CONFIDENTIAL

I hereby certify that, to the best of my knowledge, the above information is complete and correct. I understand that the information I have provided is subject to verification by the City and County of Denver and HUD. (Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. [18 U.S.C. 1001, 1010, 1012; 13 U.S.C. 3729, 3802])

Signature (or Parent/Legal Guardian if applicant is under 18 years of age)

Date

***** **For Office Use Only** *****

Median Income Level:

30% 50% 80% 80%+ Reviewer



**EQUAL HOUSING
OPPORTUNITY**

**We Do Business in Accordance With the Federal Fair
Housing Law**

(The Fair Housing Amendments Act of 1988)

**It is illegal to Discriminate Against Any Person
Because of Race, Color, Religion, Sex,
Handicap, Familial Status, or National Origin**

- In the sale or rental of housing or residential lots
- In the provision of real estate brokerage services
- In advertising the sale or rental of housing
- In the appraisal of housing
- In the financing of housing
- Blockbusting is also illegal

Anyone who feels he or she has been discriminated against may file a complaint of housing discrimination:

1-800-669-9777 (Toll Free)
1-800-927-9275 (TTY)

**U.S. Department of Housing and
Urban Development
Assistant Secretary for Fair Housing and
Equal Opportunity
Washington, D.C. 20410**