

# CHAMPLAIN HOUSING TRUST



## Champlain Housing Trust Loan Program Eligibility Worksheet

Return Worksheet to: Lynn Davis  
13 Lake Street  
St. Albans, VT 05478  
Tel: (802) 527-2361 x101 Fax: (802) 527-2373  
www.getahome.org

### Instructions

- ❖ This worksheet is required to determine whether you are eligible for a loan through the Champlain Housing Trust (CHT). Income verification is required by our funding sources, and we need complete information in order to have a fair and consistent process for awarding loans. Thank you for taking the time to fill out this worksheet carefully and completely. **Incomplete forms will not be processed until all information has been submitted.**
- ❖ Please fill out this entire worksheet
- ❖ If you need help filling out this worksheet or have questions, please call 527-2361 and ask for Lynn.
- ❖ Please use another sheet of paper for any section, if needed.
- ❖ The eligibility process may take at least two weeks from the time your completed worksheet has been submitted. Completing this form does not guarantee that you will be eligible for nor that you will successfully receive a loan through the Champlain Housing Trust.
- ❖ Please be advised that this worksheet is not considered an application for a loan. There is a separate form that you will be required to complete (Loan Application Form) before you have provided all information required to make a loan decision.
- ❖ Once your eligibility worksheet has been reviewed, a CHT staff member will contact you to let you know if you are eligible for a CHT loan and/or if we need more information to determine your eligibility.



\_\_\_\_\_ For Office Use Only \_\_\_\_\_

Date eligibility form received: \_\_\_\_\_

Date eligibility form complete: \_\_\_\_\_

Client #: \_\_\_\_\_/\_\_\_\_\_

## CHAMPLAIN HOUSING TRUST MEMBERSHIP

The Champlain Housing Trust (CHT) is a community-based membership organization whose goal is to ensure access to affordable homes and vital communities through democratic stewardship of land. Our purpose is to:

- provide access to land and housing for people of modest means throughout Chittenden, Franklin and Grand Isle Counties
- promote neighborhood preservation and improvement
- create and preserve housing that will remain affordable forever

Are you passionate about affordable housing? Would you like to help support CHT? Become a part of the solution today, and take this opportunity to become a member of the Champlain Housing Trust.

**To do that, check the following statement and enclose a minimum of \$1.00 for membership dues with your application.**      Donation \$\_\_\_\_\_      Date received \_\_\_\_\_

\_\_\_\_\_ “Yes, I/We wish to express support for the Champlain Housing Trust’s effort to build vital communities for all people through democratic stewardship of land.”

\_\_\_\_\_ I/We are already a member/s of Champlain Housing Trust (or have paid membership fee to Champlain Housing Trust within the past year)

Keep in mind, your decision whether or not to become a member of the Champlain Housing Trust is completely voluntary and will in no way effect your loan eligibility.

Membership is on an annual basis and entitles you to vote at the membership meetings and elect the Board of Directors. You will also receive Champlain Housing Trust’s quarterly newsletter.

## REQUIRED DOCUMENTATION CHECKLIST

All of the following documents for **all household members** (if applicable) must be submitted with this form, or processing may be delayed.

- Completed eligibility worksheet, signed and dated
  
- Copies of one month's worth of your most recent pay stubs
  
- Verification of all other income sources (Social Security, Social Security Disability, pension, etc.)

Where/how did you hear about our program? \_\_\_\_\_  
 I am interested in:  Essential home repairs  Weatherization/energy improvements  Septic repairs  Well repairs

**PART 1: HOUSEHOLD INFORMATION**

**Section A** - Please complete the following section for all current household members.

*Primary Applicant*

*Co-applicant*

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Are you married/in a civil union?  Yes  No

Are you married/in a civil union?  Yes  No

Are you a:  U.S Citizen or  Permanent Resident Alien

Are you a:  U.S Citizen or  Permanent Resident Alien

Current Address (street, city, state, zip): \_\_\_\_\_

Phone: W) \_\_\_\_\_ H) \_\_\_\_\_ Cell) \_\_\_\_\_ Email: \_\_\_\_\_

**HOUSEHOLD DATA – Please include ALL members of the household, including minors.**

Household Member	Relationship to Primary Applicant	Gender (circle one)	Date of Birth	Full Time Student?	Employed (check yes or no)	Other source of income?
1.	Primary Applicant	M/F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
2.		M/F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
3.		M/F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
4.		M/F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
5.		M/F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

**Section B** – Housing Information

Year of purchase: \_\_\_\_\_ Purchase Price: \$ \_\_\_\_\_ Current Market Value: \$ \_\_\_\_\_

Title to the property is in the name(s) of: \_\_\_\_\_  
 (as it appears on the Warranty Deed)

Does anyone else have an ownership interest in the property (life estate, homestead rights, etc.\*?)  Yes  No  
 If yes, please indicate their name(s) and ownership interest: \_\_\_\_\_

\* Vermont law recognizes a homestead right in the spouse or civil union partner of the legal owner of real estate when it is used or kept as their primary residence, even if the spouse or civil union partner is not a Title Owner to that property. This homestead interest prevents creditors from attaching the entire interest in the property without consent of all parties who have an ownership interest in the property; for this reason we will require all parties with an ownership interest to sign the mortgage deed to insure that our lien is fully enforceable.

Are real estate taxes current?  Yes  No If no, why: \_\_\_\_\_

Real Estate Taxes are paid to the:  Town,  City, or  Village of: \_\_\_\_\_

**Current First Mortgage**

Original Mortgage Amount: \$ \_\_\_\_\_ Current Outstanding Balance: \$ \_\_\_\_\_

Original Interest Rate: \_\_\_\_\_% Current Interest Rate: \_\_\_\_\_% Term: \_\_\_\_\_ Years Loan #: \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_ Lender's Name: \_\_\_\_\_

Lender's Full Mailing Address: \_\_\_\_\_

Do you have a Second Mortgage or Home Equity Loan on the property?  Yes  No

**Current Second Mortgage** (If you don't have a 2<sup>nd</sup> mortgage, skip to "Homeowner's Insurance Information")

Original Mortgage Amount: \$ \_\_\_\_\_ Current Outstanding Balance: \$ \_\_\_\_\_ Line of Credit?  Yes  No

Term: \_\_\_\_\_ Years Interest Rate: \_\_\_\_\_% Monthly Payment: \$ \_\_\_\_\_ Loan #: \_\_\_\_\_

2<sup>nd</sup> Mortgage Lender's Name: \_\_\_\_\_

Lender's Full Mailing Address: \_\_\_\_\_

**If you hold other mortgages, please add a page specifying details**

**Homeowners' Insurance Information\***

Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_  
 Agent: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Dwelling coverage: \$ \_\_\_\_\_ Deductible: \$ \_\_\_\_\_ Annual Premium: \$ \_\_\_\_\_

\* You are required to maintain Homeowners' Insurance on your property. You will also be required to maintain Flood Insurance if your property is determined to be in a flood hazard area. Insurance is required for the life of the loan.

**PART 2: FINANCIAL INFORMATION**

**Section A - Liabilities/Debt**

**Do you have any monthly installment debt?**  Yes  No **If yes, please complete the section below.**  
 (Installment debt includes payment on credit cards, student loans, auto loans, etc. Regular monthly payments like rent and utilities should not be included.)

Creditor's name \_\_\_\_\_ Unpaid Balance \$ \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Creditor's name \_\_\_\_\_ Unpaid Balance \$ \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Creditor's name \_\_\_\_\_ Unpaid Balance \$ \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Creditor's name \_\_\_\_\_ Unpaid Balance \$ \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_

Are you required to make alimony or child support payments?  Yes  No  
 If yes, what is the payment amount and frequency? \_\_\_\_\_

Do you have any work or medical related expenses other than those listed above?  Yes  No  
 If yes, please explain: \_\_\_\_\_

**Section B - Income**

Gross income is the combined pre-tax income for everyone in the household (regardless of whether or not they will be on the mortgage and/or deed) which includes job earnings, benefit payments, support payments, and income from assets. Failure to report household income is considered fraud and can have serious consequences.

<b><u>EMPLOYMENT INCOME</u></b> - Please list all income any household member <b>over age 17</b> receives from Self-Employment, Wages/Salaries, Overtime Pay, Commissions, Fees/Tips, and Bonuses						
Household Member	TYPE of Income	Employer Name	Avg. # Hours Worked Per Week	Pay schedule (2x/month, every other week, or weekly)	Current <u>Gross</u> Monthly Income*	Date of Hire
1. Primary Applicant					\$	
2. Co-applicant					\$	
3.					\$	
4.					\$	
5.					\$	
TOTAL Gross Annual Household Employment Income:					\$	

\*Gross Monthly Income means income before taxes and other deductions. If you are Self-employed, please list your Net Income (after deducting business expenses) *for the past 12 months.*

**BENEFIT PAYMENTS/SUPPORT PAYMENTS/OTHER INCOME** - Please list all payments any household member (**including minors**) receives from Social Security, Supplemental Security Income (SSI), Supplemental Security Disability Income (SSDI), Housing Assistance Payment (HAP), Worker's Comp, Disability pay/benefits, Unemployment Insurance, Severance Pay, Annuities, Insurance Policy Payments, Pension, Retirement Benefits, Death Benefits, Armed Forces Pay, Alimony/Maintenance, Child Support, OTHER: Money or gifts regularly given by persons not living in the home; Lottery winnings paid periodically; rental income from tenants; Interest, dividends, royalty income, income from estates or trusts; Other- please specify.

Household Member	SOURCE of Income	Current <u>Gross</u> Monthly Income*	Clarification, if needed (For example: if any payments are not regular or are not expected to continue, please explain.)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
TOTAL Gross Annual Household Payments/Other Income:			

\*Gross Monthly Income means income before taxes and other deductions.

### **Section C – Assets**

Please list this information for ALL household members (including minors) who hold assets. An asset is cash or a non-cash item that can be converted to cash.

#### **Report the following assets:**

- Cash held in savings accounts, checking accounts, safe deposit boxes, homes, etc.
- Equity in real estate or other capital investments
- Cash value of stocks, bonds, Treasury bills, certificates of deposit and money market accounts
- Trust funds, mutual funds
- Individual retirement and Keogh accounts (even though withdrawal would result in a penalty)
- Retirement and pension funds; Cash value of life insurance policies available to the individual before death
- Personal property held as an investment such as gems, jewelry, coin collections, antique cars, etc.
- Lump sum or one-time receipts, such as inheritances, capital gains, lottery winnings, victim's restitution, insurance settlements and other amounts not intended as periodic payments
- Mortgages or deeds of trust held by an applicant
- Any other asset
  
- **Do Not Report** necessary personal property such as clothing, furniture, cars

**ASSET INFORMATION** - Please list ALL assets any household member has in the form of checking and savings accounts, stocks, bonds, CDs, IRAs, Inheritance, Equity in Real Estate, Other- please specify.

Household Member	Type of Asset	Cash Value	Clarification, if needed (For example: if any assets are not yet received, or use of assets is legally restricted, please explain.)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

**Section D – Housing Expenses**

Expense Description	Monthly Amount
1. Mortgage payment	
2. Ground lease (if any)	
3. Homeowners insurance (Escrowed in Mortgage Payment: <input type="checkbox"/> Yes <input type="checkbox"/> No)	
4. Real property taxes, special assessments (Escrowed in Mortgage Payment: <input type="checkbox"/> Yes <input type="checkbox"/> No)	
5. Housing maintenance/repairs	
6. Utilities: (Heat type: _____ )	
Electric	
Heating Gas / Fuel	
Water / Sewer	
7. Second Mortgage / home equity loan payment	
8. Other (condo fees, association dues, etc.)	
<b>TOTAL</b>	

**Section E - Credit and Legal Information**

	Yes	No
Have you recently applied to any other lenders for a loan to address your housing needs?	<input type="checkbox"/>	<input type="checkbox"/>
Are you presently, or have you ever been involved with:		
Bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>
Judgment?	<input type="checkbox"/>	<input type="checkbox"/>
Lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>
Liens (other than a First or Second Mortgage) on your property?	<input type="checkbox"/>	<input type="checkbox"/>
Any other legal claims?	<input type="checkbox"/>	<input type="checkbox"/>
Is this property in Probate?	<input type="checkbox"/>	<input type="checkbox"/>
If you answered yes to any of these, please explain: _____		
_____		

## **PART 3: AFFIRMATION, ACKNOWLEDGEMENT, AND SIGNATURE(S)**

Each of the undersigned specifically represents to Champlain Housing Trust, Inc. (CHT) and to CHT's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that:

- (1) the information provided in this worksheet is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.
- (2) all statements made in this worksheet are made for the purpose of determining program eligibility
- (3) the property will not be used for any illegal or prohibited purpose or use
- (4) the property will be occupied as indicated in this worksheet
- (5) Champlain Housing Trust, Inc., its servicers, successors or assigns may retain the original and/or an electronic record of this worksheet, whether or not I am eligible for the program and/or a Loan is subsequently recommended
- (6) Champlain Housing Trust, Inc. and its agents, brokers, insurers, servicers, successors, and assigns may continuously rely on the information contained in the worksheet, and I am obligated to amend and/or supplement the information provided in this worksheet if any of the material facts that I have represented herein should change prior to the origination of any such Loan
- (7) This Eligibility Worksheet is not considered an application for a Loan, I will be required to complete a Loan Application Form prior to Champlain Housing Trust, Inc. loan committee making a loan decision.

Acknowledgement. Each of the undersigned hereby acknowledges that Champlain Housing Trust, Inc., its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Eligibility Worksheet, for any legitimate business purpose through any source, including a source named in this worksheet or a consumer reporting agency.



\_\_\_\_\_  
Applicant Signature                      Date

\_\_\_\_\_  
Co-applicant Signature                      Date

Champlain Housing Trust, Inc. is an Equal Housing Opportunity program. Discrimination is prohibited by Federal Law.

### **GOVERNMENT MONITORING INFORMATION**

The following information is requested by the Federal Government in order to monitor the Lender's compliance with equal credit opportunity, fair housing and mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. The law provides that a Lender may neither discriminate on the basis of this information, nor on whether or not you choose to provide it. However, if you choose not to provide it, under Federal regulations this Lender is required to note race and gender on the basis of visual observation or surname.

Applicant:  I do not wish to provide this information, **or check all that apply:**                       Handicapped/Disabled  
**Sex:**     Female Head of Household    Female    Male                      **Ethnicity:**    Hispanic or Latino    Not Hispanic or Latino  
**Race:**    White    Black/African American    Asian    Native Hawaiian/Other Pacific Islander    American Indian/Alaskan Native  
              American Indian/Alaskan Native and White    Asian and White    Black African American and White  
              Other Multi-Racial

Co-Applicant:  I do not wish to provide this information, **or check all that apply:**                       Handicapped/Disabled  
**Sex:**     Female Head of Household    Female    Male                      **Ethnicity:**    Hispanic or Latino    Not Hispanic or Latino  
**Race:**    White    Black/African American    Asian    Native Hawaiian/Other Pacific Islander    American Indian/Alaskan Native  
              American Indian/Alaskan Native and White    Asian and White    Black African American and White  
              Other Multi-Racial

If noted by Lender, by:  
 Visual Observation    Surname

**Office Use Only – Do Not Write Below This Line:** Eligible                       Ineligible

Proceed

\_\_\_\_\_  
*Authorized Signature*                      Date



**Rehab Addendum  
Housing Conditions Form**

Champlain Housing Loan Fund (CHLF)

**Applicant:** \_\_\_\_\_ **Co-Applicant:** \_\_\_\_\_ **Client #:** \_\_\_\_/\_\_\_\_

**Property Address:** \_\_\_\_\_

The purpose of this form is to gather information about your house and the items that you believe require work. Please be aware that the Champlain Housing Loan Fund is funded with public funds and we are required to meet the following government regulations:

- 1) Housing Quality Standards established by the U.S. Department of Housing and Urban Development (HUD);
- 2) Local Health and Safety Codes, as required by the local planning & zoning office; and
- 3) If your house is on or eligible for the State and/or National Register of Historic Places, all rehabilitation must comply with the Secretary of the Interior's Standards for Rehabilitation.

In addition, our program policies require that we follow these procedures:

- 1) If there are children under six (6) or pregnant women living in the home, a lead-based paint test will be conducted. If lead-based paint is present, all rehab work will be conducted in a lead-safe manner and lead abatement activities may be included in the scope of work. The hazard will be defined by the children's blood-lead levels, as defined by the Vermont State Department of Health;
- 2) An energy audit will be strongly recommended unless the scope of work does not involve the interior living space;
- 3) A priority repair system will be used to address the most serious problems (mechanical and structural systems) before including less severe conditions in the scope of work.

**I. Property Information :**

Single family house  Mobile home, on:  owned land or  leased land Year constructed: \_\_\_\_\_

Duplex  Other \_\_\_\_\_ Grand list value \$ \_\_\_\_\_

Structure type:  wood frame  brick  stone  other

Number of stories: \_\_\_\_\_  septic system  well  public water/sewer

Has the property been weatherized by the Weatherization Program? \_\_\_\_\_ If yes, what year? \_\_\_\_\_

Directions to your home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. Housing Conditions**

Please describe the reason(s) why you are applying for this program. Include all *essential* (non-cosmetic) repairs that you believe need to be made to your home. If you have an over-crowding situation, please describe. (Use the back of this sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I / we authorize Champlain Housing Trust, Inc. (CHT) / Champlain Valley Revolving Loan Fund (CVRLF) Rehab Specialist(s) to perform any/all necessary inspection(s) required to prepare the scope of work recommendation estimate(s) associated with this application, to determine the loan amount I may be eligible to apply for.



Applicant Signature

Date

Equal Housing Lender

Co-Applicant Signature

Date

# CHAMPLAIN HOUSING TRUST



13 Lake Street  
St. Albans, VT 05478

Phone: (802) 527-2361 Fax: (802) 527-

## Champlain Housing Loan Fund

### Our Consumer Privacy Policy

Champlain Housing Trust is a non-profit community development housing corporation organized and existing under the laws of the State of Vermont. Champlain Housing Loan Fund (CHLF) is a service we provide to extend affordable home loans to homeowners of modest means. We are entrusted with sensitive nonpublic information about you and your finances and uphold strict confidentiality procedures within our organization. We do not now, nor have we ever sold or rented your personal information to any non-affiliated third party for any reason.

What information we collect: We may collect “nonpublic personal information” about you, “nonpublic personal information” is information that is not public that we obtain in connection with providing a financial service to you. For example, nonpublic information could include but is not limited to items such as your social security number, household income, payment history, and account balances.

The following are sources we may obtain information from:

- Information you provide to us, on applications and other eligibility or loan related documents
- Information we receive from third parties such as credit bureaus, employers or other income sources, institutions which you have deposited funds or have extended your credit
- Information about your transactions with us, our affiliates, or others

What Information We Disclose: We may share information under the law about our experiences or transactions with you or your account (such as your account balance and payment history with us) with companies related to us by common control or ownership (“affiliates”). However, where state law may be more restrictive, we will abide by the more restrictive requirements.

In order to expedite processing of our services on your behalf, we may need to disclose nonpublic personal information about you to “nonaffiliated third parties” (that is companies not related to us by common control or ownership). These entities may include: Attorneys, Appraisers, Lead-based Paint and/or Asbestos Hazard Abatement, Energy Audit, Historic Preservation Review and Standards for Rehab, as applicable, or other government entities required by law or in response to subpoenas; and to reputable credit reporting agencies (“credit bureaus”). We also may share information with other programs such as, the Rural Development 504 Grant/Loan Program and the Weatherization Assistance Program in order to combine different sources of loan and grants to pay for your housing rehab loan projects. Additionally, we may disclose all of the information we collect, as described above to companies that perform marketing surveys on our behalf. However when we share information with any nonaffiliated third party, we will always require their written agreement to protect the confidentiality of your information and use it only for the specific purpose intended and not reuse, sell or rent it.

We will continue to adhere to the privacy policies and practices described in this notice whether or not your application is eligible for our program, or if you pay off of your loan with us.

Our Security Procedures: We will always maintain control over the confidentiality of our customer information, which includes having physical, electronic and procedural safeguards that comply with federal standards. We will permit only authorized employees, who are trained in the proper handling of our customers sensitive nonpublic information, to have access to that information in order to provide you with quality products and superior service. All of our operational and data processing systems are in a secure environment that protects your information from being accessed by third parties.

We thank you for your confidence in Champlain Housing Trust and the Champlain Housing Loan Fund and allowing us to service your housing loan needs. ■