



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

*25 West Fourth Street
Saint Paul, MN 55102*

*Telephone: 651-266-6655
Facsimile: 651-266-6559*

CONGRATULATIONS!

You have entered into a purchase agreement to buy a home which was acquired and rehabilitated or newly constructed under the Inspiring Communities Program. In order to qualify your participation in the program, certain information must be provided to the Housing and Redevelopment Authority of the City of Saint Paul, Minnesota (HRA).

Below is a list of the documents that are attached and must be executed and returned to the HRA within 3 days after final acceptance of the purchase agreement.

Please note that your submission of this information does not constitute HRA's approval or commitment to provide funds. A commitment letter will be issued upon compliance with all program requirements.

1. Authorization to Release Information: Must be signed by all purchasers and spouses, even if spouse will not be going into title.
2. Income and Asset Worksheet: Names must be provided for everyone who will live in the property, including minors. Income (from any source) and asset information must be provided for every person named.
3. Demographic Affidavit: Must be completed and signed by all purchasers.
4. Privacy Notice, Household Demographic/Project Information Consent Forms, and Tennessee Warning: Must be signed by all purchasers.



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AUTHORIZATION TO RELEASE INFORMATION

I/We have applied for a loan from the City of Saint Paul. As part of the application process, the City of Saint Paul may verify information contained in my/our loan application and in other documents required in connection with the loan. This verification process will be conducted either prior to closing or subsequent to closing, and may be performed either by employees of the City of Saint Paul or by independent third parties, as a part of the origination, processing, underwriting, closing or quality control programs of the City of Saint Paul.

I/We authorize you to provide the City of Saint Paul and to any investor to whom the City of Saint Paul may sell this loan, any and all information and documentation that they request. Such information includes, but is not limited to: employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns. The City of Saint Paul, or any investor that purchases the mortgage, may address this authorization to any party named in the loan application.

A copy of this authorization may be accepted as an original.

Your prompt reply is appreciated.

Thank you.

Applicant

Co-Applicant

Social Security Number

Social Security Number

Date

Date

Income Calculation Worksheet

HUD Part 5 Annual Income

1. Name:		2. Address of Property to be Purchased:	
ASSETS (include all assets from page 2)			
Household Member	Asset Description/ Account Type	Current Cash Value of Asset	Actual Income from Assets
3. Net Cash Value of Assets.....		\$0	
4. Total Actual Income from Assets.....			\$0
5. If line 3 is greater than \$5,000, enter Passbook Rate %*; otherwise, leave blank		Passbook Rate: 0.00%	\$0

ANTICIPATED ANNUAL GROSS INCOME										
Household Member	M/F	Age	Relationship to Head of Household	a. Gross Wages/Salaries**	b. Social Security	c. Economic Assistance	d. Disability income, unemployment, etc.	e. Child support, alimony	f. Other income	g. Asset Income
			Head							The greater of lines 4 or 5 from above should be in cell below:
6. Totals				\$0	\$0	\$0	\$0	\$0	\$0	\$0
7. Total of items from 6a. through 6g is Annual Income.....										\$0

*Passbook rate is 2%

**Gross income is defined as annual income (salary, wages, tips) before taxes and deductions.

I/We certify that all of the information given is true, complete and accurate. I/We understand that false or incomplete information can result in a fine, imprisonment, and loss of housing and/or housing assistance.

X _____
Applicant Signature Date

X _____
Applicant Signature Date

Number of Household members: _____

WARNING: Section 1001 of Title 18 of the United States Code makes it a criminal offense to make wilful false statements or misrepresentation of any material fact involving the use of or obtaining of Federal funds.

For Office Use Only

Household Income: _____

Income Level _____

Signature of Certifying Staff

Description of Assets

Household has: (if yes, enter values on Page 1)

	Yes	No
1. Cash held in savings accounts, checking accounts, safe deposit boxes, homes, etc. For checking accounts, use the average 6-month balance. Assets held in foreign countries are considered assets.	<input type="text"/>	<input type="text"/>
2. Cash value of revocable trusts available.	<input type="text"/>	<input type="text"/>
3. Equity in or ownership of real estate for the purposes of occupancy, rental or under a contract for deed, or other capital investments.	<input type="text"/>	<input type="text"/>
4. Cash value of stocks, bonds, Treasury bills, certificates of deposit, mutual funds, and money market accounts.	<input type="text"/>	<input type="text"/>
5. Individual retirement, 401(K), and Keogh accounts (even though withdrawal would result in a penalty).	<input type="text"/>	<input type="text"/>
6. Retirement and/or pension funds.	<input type="text"/>	<input type="text"/>
7. Cash value of life insurance policies available to the individual before death (e.g. surrender value of a whole life or universal life policy).	<input type="text"/>	<input type="text"/>
8. Personal property held as an investment such as gems, jewelry, coin collections, antique cars, etc.	<input type="text"/>	<input type="text"/>
9. Lump sum or one-time receipts, such as inheritances, capital gains, lottery winnings, victim's resolution, insurance settlements, gift funds and other amounts not intended as periodic payments.	<input type="text"/>	<input type="text"/>
10. Mortgages or deeds of trust held by an applicant.	<input type="text"/>	<input type="text"/>

Applicant Initials

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**Income limits are updated on an annual basis and are determined by the Department of Housing and Urban Development, Minnesota Housing Finance Agency and the City of Saint Paul*

Updated 10/28/2014



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PRIVACY NOTICE, HOUSEHOLD DEMOGRAPHIC/PROJECT INFORMATION CONSENT FORMS, AND TENNESSEN WARNING

Portions of the funding used to assist you in your purchase and/or in the development of the property you are purchasing in Saint Paul, Minnesota may have been provided by the Minnesota Housing Finance Agency ("MHFA"), the Housing and Redevelopment Authority of the City of Saint Paul, Minnesota ("HRA"), the Metropolitan Council ("Met Council"), United States Department of Housing and Urban Development ("HUD") and/or the Family Housing Fund ("FHF"). The information attached hereto is being requested for the purpose of evaluating your application, determining compliance with the Minnesota Human Rights law and to monitor compliance with federal equal credit opportunity, fair housing and home mortgage disclosure laws for certain types of loans related to a dwelling, as well as monitoring the general performance of the various funding programs provided by the HUD, MHFA, HRA, Met Council and/or FHF. You are not required to furnish the information requested regarding race, ethnicity and gender, but are encouraged to do so. Federal and State laws provide that a lender may not discriminate on the basis of this information, nor on whether you choose to furnish it.

The disclosure of your Social Security number (s) or Minnesota Tax Identification number(s) are (is) mandatory for participation in this particular program, by virtue of the Minnesota Revenue Recapture Act of 1980 (Minnesota Statutes, Section 270A.01 to 270A.12) as well as Federal regulations/requirements which are required within the funding programs. Supplying such information could result in the application of state tax refunds to the payment of any tax delinquent indebtedness resulting from this or any other special financing Programs. Such information may also be made available to state or federal tax authorities and state and federal personnel involved in the collection of such obligations.

Use of the data requested in the attached form is limited to that necessary for the administration and management of the funding programs by HUD, MHFA, HRA, Met Council and/or FHF personnel, or those under contract with HUD, MHFA, HRA, Met Council and/or FHF, or in instances where access to this data is authorized by federal and/or state law, it may be made available to other governmental entities.

I/We hereby authorize and consent to the above-described use of the attached information. With regard to the sharing of such information, I/we recognize that the authorizations provided under this document will expire one (1) year from the below listed date without any further action or notice by me/us. At any time prior to the natural expiration of the authorizations provided in this document, I/we may revoke such authorizations provided in this document, by giving written notice to HRA at the following address: Department of Planning and Economic of the City of Saint Paul, 1100 City Hall Annex, 25 West Fourth Street, Saint Paul, Minnesota 55102, Attn: Executive Director.

The data you are being asked to provide is subject to and defined in the Minnesota Government Data Practices Act, Minnesota Statutes Chapter 13. Under the Data Practices Act, some of this data is classified as public data, the remaining information classified as private or confidential. Private and confidential data is available only to you and the entities listed above with a bona fide need to know such information to process and make a decision on the approval of your application. Public data is available to anyone requesting it and consists of all data furnished in the application process that is not designated private or confidential.

I/We have read and understand the above information regarding my rights as a subject of government data.

(Buyer) Date: _____

(Buyer) Date: _____

Property Address: _____

DEMOGRAPHIC AFFIDAVIT

This program is being assisted with Inspiring Communities funds provided through the City of Saint Paul, which it receives in part from the U.S. Department of Housing and Urban Development (HUD). A requirement of this assistance is that we collect income data of persons who apply for assistance. This information will not be disclosed or released by this office without your consent, except to HUD, and except as required or permitted by law. Information is gathered for statistical purposes.

Is your household female-headed? (Select only one) Yes No

Is your household Hispanic? (Select only one) Yes No

Please check the race(s) appropriate for your household.

Select all that apply:

- Unknown
- White
- Asian
- Black/African American
- Native Hawaiian or Other Pacific Islander
- American Indian/Alaskan Native

Address: _____

Printed name: _____

Signature

Date