

City of Santa Barbara Affordable Housing Lottery Application – 121 W. De la Guerra

Applicants will be disqualified immediately if program qualifications are not met or if intentional discrepancies are noted.

PRIMARY APPLICANT

Please Print Clearly

Name: _____
First MI Last

Address: _____

Phone/Cell: (____) _____ Work: (____) _____ Email: _____
Social Security Number Birth Date Marital Status _____

CO-APPLICANT

Please Print Clearly

Name: _____
First MI Last

Address: _____

Phone/Cell#: (____) _____ Work: (____) _____ Email: _____
Social Security Number Birth Date Marital Status _____

HOUSEHOLD TYPE (please circle the most accurate)

Please Print Clearly

1. Female headed single parent household 2. Male headed single parent household 3. Single adult
4. Two or more unrelated adults 5. Married with children 6. Married without children 7. Other _____

Family/Household Size: _____ How many dependents under age 18 _____

Are there non-dependents who will be living in the home? Yes No If yes, list below:

Relationship Age Relationship Age

Total Annual Family or Household Income: \$ _____

I have not owned any residential real estate for the past two years. YES NO (circle one)

I have at least a five percent (5%) cash down payment YES NO (circle one)

DOWN PAYMENT AMOUNT \$ _____ LOAN AMOUNT \$ _____

PRIMARY APPLICANT EMPLOYMENT —

Please Print Clearly

Primary Employer:

Street City State Zip Code

Phone: (____) _____ Contact Person _____

Gross Monthly Income (before any deductions): \$ _____

Is this amount paid _____ hourly _____ weekly _____ every two weeks _____ twice a month _____ monthly?

CO-APPLICANT EMPLOYMENT —

Please Print Clearly

Primary Employer:

Street City State Zip Code

Phone: (____) _____ Contact Person _____

Gross Monthly Income (before any deductions): \$ _____

Is this amount paid _____ hourly _____ weekly _____ every two weeks _____ twice a month _____ monthly?

INCOME*Please Print Clearly*

<i>Type of Income</i>	<i>APPLICANT Monthly Amount</i>	<i>CO-APPLICANT Monthly Amount</i>
Salary		
Alimony/Child Support		
Rental Income		
Social Security / Pension		
Self-employment Income		
Other		

DEBT

Please list any debts you have, including credit cards, auto loans, student loans, and child-care expenses. Do NOT include rent or utilities.

<i>Paid To</i>	<i>Current Balance</i>	<i>Monthly Payment</i>
1.		
2.		
3.		

Please use additional sheets if necessary.

ASSETS/SAVINGS/INVESTMENTS*Please Print Clearly*

Please list the approximate value of the following:

	<i>APPLICANT</i>	<i>CO-APPLICANT</i>
Checking account		
Savings account		
Auto		
Certificates of Deposit / Securities		
Retirement account		
Other Assets		

AUTHORIZATION/CERTIFICATION

The undersigned certifies and declares under penalty of perjury that information provided herein is true and complete. All information entered on this application will be verified prior to a housing award being granted to confirm compliance with the City's affordable housing policies. Verification of income, residency, loan and assets will be determined through a subsequent formal qualification process including, but not limited to, tax returns, bank accounts, earnings statements, residence and employment history, and title searches. Any discrepancies or misrepresentations will be cause for rejection of application and will constitute a default under the City's affordability policies, even if discovered after a purchase has been completed. In connection with this application for housing, the City may procure a screening report from LexisNexis Screening Solutions as part of the process of qualifying candidate for housing award. Consent is granted by applicant to procure such report. In the event that information from the report is utilized in whole or in part in making an adverse decision, applicant will be provided a copy of the report and a description in writing of applicant's rights under the federal Fair Credit Reporting Act.

By signing below, consent is granted to the City to use and verify all information provided herein or subsequently submitted by applicant. Information contained herein will not be disclosed outside the Agency except as required and permitted by law. The undersigned further certifies and acknowledges the following:

- *I have read the Affordable Housing Covenant "Grant of Preemptive Right: Resale Restriction Covenant and Option To Purchase" (GPR) at www.santabarbaraca.gov*
- *I do not own or have an ownership interest in any residential real estate.*
- *I will provide all necessary income, loan, residency, and other information required to complete the qualification process within two (2) weeks of notice of lottery selection.*

Applicant

Date

Co-Applicant

Date

Return completed application with any attachments to:
SOTHEBY'S INTERNATIONAL REALTY
1482 E. Valley Road, Montecito