HOMEBUYER ASSISTANCE PROGRAMFIRST-TIME HOMEBUYER STATUS AND CERTIFICATION OF PROPERTY OWNERSHIP





Applicant Name:			
Co- Applicant Name:			
as described below. I/We further ce homebuyer status and that all copie An individual and, if marrie year period. An individual who is a disp A single parent whose form An individual who has only foundation in accordance who has only	rtify that the submitted executed loades provided are true and correct. ed, his/her spouse, who has/have not of the laced homemaker and has only owned a property that was not permitted applicable regulations. Towned a property that was not in concennot be brought into compliance for the laced seems of the laced se	sidence. nanently affixed to a permanent	
I/We certify that all information and copies provided to the ALP and Homebuyer Assistance Program are true and correct.I/We understand that any discrepancies or misstatements may result in my/our disqualification from the program and thefunds received must be repaid.			
Applicant Signature	Date of Signature	Co- Applicant Signature (If Applicable)	Date of Signature