



## Mobile Manufactured Home Loan Programs

*Offered by the Connecticut Housing Finance Authority (CHFA)*

### *Criteria Worksheet and Instructions*

*Note: Prior homeowners are eligible but may not own any other property at the time of loan closing and applicants must meet all CHFA program eligibility guidelines. Loans are originated through Capital For Change, Inc. (C4C). If you feel that you meet the qualifications for a loan for the purchase or refinance of a mobile home, please fill out this form and contact Capital for Change, Inc. directly at (855) 656-5500 for further instructions regarding the loan application process.*

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1. Complete the attached “*Mobile Manufactured Home Loan Programs Criteria Worksheet*” with applicable information for all borrowers.
  
2. Provide copies of the following documents along with the completed/signed Criteria Worksheet:

- Most recent (3) years signed federal tax returns including ALL schedules and W-2’s.
- Most recent Bank statements for each bank, investment or retirement account *(all pages)*
- Most recent Mortgage Loan billing statement *(Mobile Home Refinance only)*
- Current income documentation: *(provide documents for any income type/s that apply)*
  - W-2 employee: (3) most recent paystubs;
  - Self-employed *(Schedule C or 1099)*: Include Schedule C or 1099 forms with tax returns;
  - Self-employed *(non-Schedule C)*: (3) most recent business tax returns, *(all schedules)*;
  - Fixed income *(i.e. Social Security, Pensions)*: Most recent award letter/s;
  - Child Support/Alimony: Court order/s for all amounts and proof of receipt;  
*Note: Alimony, child support, or separate maintenance income does not have to be considered as a basis for repaying this loan if the applicant chooses not to include; however, the Connecticut Housing Finance Authority (CHFA) programs require this information for income limit eligibility purposes only;*
  - Other Income: Please explain in the “other income” section of the worksheet.

3. Submit all documentation by one of the following methods:

Fax: (860) 233-3920      - or -      Mail: Capital For Change, Inc.  
Attn: Mobile Home Program  
10 Alexander Drive - Wallingford, CT 06492

If you have any questions, please contact us:

Toll Free: (855) 656-5500      - or -      Email: [Lending@capitalforchange.org](mailto:Lending@capitalforchange.org)

NMLS ID: 276717  
Leonard Gonzalez NMLS ID: 1263013  
Kristen Fusco NMLS ID: 1028530





**Co-Borrower Name:** \_\_\_\_\_

Current Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(if different from current address)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

First Time Homebuyer:  Yes  No Veteran/Active Military:  Yes  No

Citizenship/Immigration Status:  US Citizen  Green Card  Work Visa

Marital Status:  Married  Unmarried  Separated

**Contact Information:** Home: \_\_\_\_\_ Cell: \_\_\_\_\_  
Work: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Employer:** \_\_\_\_\_ Position: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

Years/Months with Employer: Yrs. \_\_\_\_\_ Months \_\_\_\_\_ From (Date): \_\_\_\_\_ to \_\_\_\_\_

If less than (2) years:

Prior Employer: \_\_\_\_\_ Position \_\_\_\_\_ Monthly Income: \_\_\_\_\_

Years/Months Prior Employer: Yrs. \_\_\_\_\_ Months \_\_\_\_\_ From (Date): \_\_\_\_\_ to \_\_\_\_\_

**Other Income (if applicable):** Type \_\_\_\_\_ Monthly Income: \_\_\_\_\_

**Household size:** (Total number of people who will live in the home) \_\_\_\_\_ Dependents Age/s: \_\_\_\_\_

**Assets:**

Bank: \_\_\_\_\_ Account Type: \_\_\_\_\_ Balance: \_\_\_\_\_

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**Current Monthly Housing Expense:** \$ \_\_\_\_\_

**Other Monthly Payments:**

Creditor	Monthly Payment	Balance
Auto Loans/Lease:		
Auto Loans/Lease:		
Student Loan:		
Student Loan:		
Credit Card:		
Credit Card:		
Child Support:		
Other:		
<b>Total:</b>		



**Mobile Manufactured Home Information**

Manufacturer's Name: \_\_\_\_\_  
Model Name and Model No.: \_\_\_\_\_  
Manufacturer's Serial No.: \_\_\_\_\_  
Year (must be manufactured after 1976): \_\_\_\_\_  
Length and Width: \_\_\_\_\_

**Mobile Home Park Information**

Name of Park: \_\_\_\_\_  
Address of Park: \_\_\_\_\_  
Park Contact Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**This Mobile Home Park is licensed by the State of Connecticut Department of Consumer Protection (DCP):**

Yes     No (Attach verification)

**Is the mobile home park a Co-op?**     Yes     No (CHFA does not finance Co-ops)

**Is the mobile home park a 55+ Community?**     Yes     No

**Additional Mobile Home Criteria**

- Mobile manufactured home must be located in a State of Connecticut, licensed Mobile Home Park.
- The mobile manufactured home must be affixed to the lot according to local zoning and/or park regulations, however, ***any wheels must be deflated and/or removed.***
- The owner(s) of the Mobile Home Park must:
  - a) Provide copies of the state license, municipal approvals, and rules and regulations for the park;
  - b) Provide such documents, approvals, consents and disclosures as may be required by applicable statutes and regulations;
  - c) Enter into a lease agreement for the lot with the borrower(s) for a term of not less than one year, and provide for renewals.



**Down Payment Information**  
***(Mobile Home Purchases Only)***

**Source of Down Payment:**  Checking/Savings  Retirement Funds  Gift  Other \_\_\_\_\_

CHFA Mobile Home Programs offer financing in loan amounts up to 80% of the appraised value of the mobile home, or up to 80% of the purchase price, whichever is less. The Borrower(s) will be responsible for providing funds for the difference. These funds cannot be borrowed; they must come from borrower(s) own savings or a qualified gift *(as verified by a letter from the donor, verification of availability of funds by donor, and proof of borrower(s) receipt of funds).*

*My signature below acknowledges that I have read and understand the down payment requirements for this program, and I am able to meet these requirements.*

\_\_\_\_\_  
(Borrower) Date

\_\_\_\_\_  
(Co-Borrower) Date

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**Capital For Change, Inc. (C4C)**  
**Authorization to Release Information**

1. I/We have completed this criteria worksheet from Capital For Change, Inc. (C4C) for the mobile home mortgage program offered by the Connecticut Housing Finance Authority (CHFA).
2. As part of the process, C4C may verify information contained in my/our documents required in connection with the criteria worksheet. I/We understand this information may include, but is not limited to: employment history and income; copies of personal or business tax returns and W-2 statements for the previous three (3) years; and other pertinent personal information for confidential use by C4C.
3. I/We further authorize C4C to order a consumer credit report and verify other credit information.
4. I/We authorize C4C to share any and all information contained within this application and related documents with the Connecticut Housing Finance Authority (CHFA).
5. A copy of this authorization may be accepted as an original.
6. This authorization may be used for a period not to exceed three (3) months from the date of signature.
7. I/We have fully read and understood these statements.

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*The information provided in this document is, to the best of my knowledge, true and factual. I understand this document is a program criteria worksheet, and does not constitute an application for a loan. The purpose of this document is to determine if my situation meets the basic criteria required to pursue a formal application for Mobile Manufactured Home Loan financing through the Connecticut Housing Finance Authority (CHFA). Further, I understand acceptance of this worksheet by CHFA or by Capital for Change, Inc. (C4C) is in no way a commitment to issue a loan to me at this time or at any other time.*

\_\_\_\_\_  
(Borrower) Date

\_\_\_\_\_  
(Co-Borrower) Date

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Name)

