

**CITY OF CONCORD  
FIRST TIME HOMEBUYER PROGRAM  
AFFIDAVIT OF HOUSEHOLD / APPLICATION**

In connection with my/our application for home purchase financing with (first mortgage lender) and the City of Concord, I/we hereby certify the following:  
(All persons to go on title must initial under each category)

1. I/We have not jointly owned a home within the last three years. **Please initial:** \_\_\_\_\_
2. I/We intend to occupy the home as our personal residence, within 60 days of closing and covenant not to rent or lease the home during the tenure of the City of Concord's second mortgage. **Please initial:** \_\_\_\_\_
3. I/We certify that the number of persons in this household is \_\_\_\_\_. **Please initial:** \_\_\_\_\_
4. Based on the number of persons noted above, I/we certify that my/our household income does not exceed the following. (Circle appropriate HH size/Income level and Initial next to the applicable category.)

Household Size	Maximum Household Income			Initial by Applicable HH/Income Category
	60% of Median	80% of Median	100% of Median	
One	\$45,700	\$73,100	\$83,450	_____
Two	\$52,200	\$83,550	\$95,350	_____
Three	\$58,750	\$94,000	\$107,300	_____
Four	\$65,250	\$104,400	\$119,200	_____
Five	\$70,500	\$112,800	\$128,750	_____
Six	\$75,700	\$121,150	\$138,250	_____
Seven	\$80,950	\$129,500	\$147,800	_____
<b>Maximum Loan Amount</b>	<b>\$40,000</b>	<b>\$30,000</b>	<b>\$20,000</b>	<b>by income category</b>

5. I/We acknowledge that it is our responsibility to ascertain that the property we choose to purchase is located within the City Limits of Concord in order to be eligible for financing under this program. **Please initial:** \_\_\_\_\_
6. I/We acknowledge that at a minimum I/we must be able to pay 3% down on the home to be purchased. **Please initial:** \_\_\_\_\_
7. I/We acknowledge we must attend a City-Approved Homebuyer Counseling Workshop as a requirement of this program. **Please initial:** \_\_\_\_\_

Signed: \_\_\_\_\_  
 \_\_\_\_\_  
 Date  
 \_\_\_\_\_  
 (Print Name)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 Phone Number

Signed: \_\_\_\_\_  
 \_\_\_\_\_  
 Date  
 \_\_\_\_\_  
 (Print Name)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 Phone Number