

CHC GRANT APPLICATION

Required to be submitted with application

- _____ Homebuyer statement as to why you should be awarded this grant. Must be signed and dated by all borrowers.
- _____ Homeownership Education class certificate (from a HUD-approved education provider)
- _____ Lender to provide a copy of buyers' loan application
- _____ Borrowers' most recent bank statement
- _____ Copy of purchase agreement and any counter offers.
- _____ Escrow Information (below)

Escrow Company _____

Escrow Officer _____

Escrow number _____



Grant Amounts

The maximum grant amount is \$ 2,000.

Eligible Area

Grant funds can be used anywhere within the City or County of Fresno. Eligibility may be expanded to Madera County on a case-by-case basis.

Selection Process

Applications will be reviewed based on need and priority. Please allow two weeks for CHC Grant Committee to review your application. Applications must contain all requested information before they can be reviewed by the Committee. The application must be signed by all applicants.

Award Schedule

Number of grants awarded are subject to available funds.

SUBMIT APPLICATION TO:

All grant applications must be scanned and submitted by email to

info@chcfresno.org

No applications will be accepted via mail or if delivered to office.

Community Housing Council of Fresno

2560 W. Shaw Lane, Suite 101
Fresno, CA 93711

Office: 559-221-6919
Fax: 559-256-1564

www.chcfresno.org



FIRST-TIME HOME OWNERSHIP GRANT PROGRAM

The Grant Program of the Community Housing Council was established to assist those families and/or individuals that are in the process of purchasing their first home, and who, after having expended all means, find themselves short of funds to close.

CHC wishes to help first-time homebuyers attain and sustain the American Dream of homeownership

Please review grant criteria for other applicable eligibility requirements.

The Community Housing Council is a 501(c)(3) non-profit organization

CHC is a HUD approved
Housing Counseling Agency



Community Housing Council First-Time Homeownership Grant Program

CHC GRANT CRITERIA

Income & Eligibility Restrictions

1. Homebuyers income must not exceed the maximum area medium income (AMI) for Fresno County as determined by Fannie Mae..
2. Homebuyer must qualify for a fixed-rate first mortgage loan.
3. Borrowers must be buying home as owner-occupants and have not owned a home in the last three years.
4. The grant will be awarded through escrow.
5. All the borrowers must have completed an 8 hour HUD approved pre-purchase class.
6. Buyers must be represented by a Realtor® for this purchase unless the purchase is through a subdivision or self-help organization that does not include broker cooperation.
7. The lender **and** the Realtor® representing the homebuyer(s) are required to be a member in good standing of CHC or be an employee of a sponsor/donor to CHC.

Qualified Uses of the Grant Funds

1. CHC funds may be used with other down-payment assistance programs and/or grants.
2. CHC funds may be used for any typical non-recurring closing costs and any lender pre-paid expenses if allowed. CHC funds may only be used for the lenders' down-payment requirement if allowed by lender.
3. The Grant may be used for single family residences, condos, PUDs and/or Manufactured housing on a permanent foundation.

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APPLICATION

Applicant
 Name: _____
 First MI Last

Present address: _____
 Street Apt #

_____ City State Zip Code

Home Ph # _____ Wk Ph # _____

Mobile Ph # _____ Email _____

Co-Applicant (If no co-applicant, check here: _____ None)

Name: _____
 First MI Last

Present address: _____
 Street Apt #

_____ City State Zip Code

Home Ph # _____ Wk Ph # _____

Mobile Ph # _____ Email _____

Family Household size _____
 [Include dependants and applicant(s)]
 Annual family/household income _____

Signature(s): _____
 Applicant Co-applicant

Mortgage Lender: _____
 Agent/representative and Company name Ph number(s)

Realtor: _____
 Agent/representative and Company name Ph number(s)

Any Other _____
 Representative and Company name Ph number(s)

Est. Closing Date: _____

What grant amount are you requesting? _____

The following information is OPTIONAL

Household Type: (please check):

- Single adult Male, or Female
 Married without children
 Two or more unrelated adults
 Other _____

Ethnicity: Hispanic Not Hispanic

Race: (please check)

- White (Hispanics are also considered White)
 American Indian/Alaskan Native
 Black or African American
 Asian/Pacific Islander
 Other _____

Marital Status:

Married Unmarried Separated

Gender: Applicant Co-Applicant

- Male Male
 Female Female

Current Housing Arrangements:

- Renter Does not pay rent
 Lives with parents or other family
 Other _____