

## HOME OWNERSHIP PROGRAM

### Eligibility:

Qualifying applicants must meet income guidelines based on 115% Area Median Income - \$128,500 is the maximum annual gross household income. Applicants must also complete the Homebuyer Education course, Home Stretch or Framework.

### Financing:

Applicants are required to secure their own financing. As part of the application, potential homebuyers must provide a current loan approval letter from their lender.

### Next Steps:

- Obtain a pre-approval letter from your lender or proof of funds for cash offers.
- Complete the application and submit it to UCAP along with your income documentation, including but not limited to: 1 month's recent paystubs and the previous year's federal tax return.
- All applications received will be evaluated for eligibility and notified if they are approved to submit a purchase agreement.
- Per program funding guidelines, homes are sold at their appraised market value.
- Homes are sold on a first-come, first-served basis. Homebuyer selection will occur by UCAP when an eligible applicant has submitted a purchase agreement.
- The selected homebuyers have until closing to complete their homebuyer education course and submit their certificate of completion.



**FINANCING INFORMATION**

Do you have financing in place to purchase the home?  
(Pre-approval letter or proof of funds will need to be provided)

Yes or No

**EMPLOYMENT INFORMATION**

**Current Employers** (Name and COMPLETE addresses)

**APPLICANT**

Employer Name: \_\_\_\_\_

Length of Employment \_\_\_\_\_

Employer Address: \_\_\_\_\_

Position \_\_\_\_\_

Employer Telephone: \_\_\_\_\_

Hourly wage \_\_\_\_\_ Hrs/week \_\_\_\_\_

**CO-APPLICANT**

Employer Name: \_\_\_\_\_

Length of Employment \_\_\_\_\_

Employer Address: \_\_\_\_\_

Position \_\_\_\_\_

Employer Telephone: \_\_\_\_\_

Hourly wage \_\_\_\_\_ Hrs/week \_\_\_\_\_

**OTHER INCOME SOURCES – Additional documentation may be requested.**

NAME & ADDRESS OF SOURCE (Example: Child Support, SSI, Social Security etc.)

\_\_\_\_\_

Amount received per month:

\_\_\_\_\_

\$ \_\_\_\_\_

Telephone \_\_\_\_\_

**OTHER INCOME SOURCES-Continued**

\_\_\_\_\_

Amount received per month:

\_\_\_\_\_

\$ \_\_\_\_\_

Telephone \_\_\_\_\_

**To the best of my knowledge, the information provided in this application is true and correct.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant Signature

\_\_\_\_\_  
Date



Office Locations

MARSHALL CORPORATE

1400 S. Saratoga  
Marshall, MN 56258  
507-537-1416  
507-537-1849 Fax  
Community Transit  
507-537-7628  
507-401-3273 Fax

WILLMAR

200 S.W. 4th Street  
PO Box 1359  
Willmar, MN 56201  
320-235-0850  
320-235-7703 Fax

COSMOS

101 Vesta Street South  
PO Box 36  
Cosmos, MN 56228  
320-235-0850  
320-877-7483 Fax

HUTCHINSON

218 Main Street South  
Hutchinson, MN 55350  
320-587-5244  
320-587-2677 Fax

JACKSON

115 South Highway  
Jackson, MN 56143  
507-847-2632  
507-847-4131 Fax

LITCHFIELD

120 N. Sibley Avenue  
Litchfield, MN 55355  
320-693-7911  
320-693-8053 Fax

OLIVIA

500 East DePue Avenue  
Olivia, MN 56277  
320-523-1842  
320-523-5270 Fax

REDWOOD FALLS

164 East 2nd Street  
PO Box 172  
Redwood Falls, MN 56283  
507-637-2187  
507-537-1849 Fax

MINNESOTA RELAY

1-800-627-3529

### Homestretch or Framework Class Information

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

If you have attended either class previously, when? \_\_\_\_\_

At what location did you attend the class? \_\_\_\_\_

If you have not attended Homestretch or Framework, what class have you signed up for? \_\_\_\_\_

Who did you schedule your class with? \_\_\_\_\_