FirstDown Loan Disbursement Request Form



NHDA Member Name:	Date:			
Contact:	Phone:			
E-mail:				
Applicant Name:	Co-applicant Name:			
Property Address:	(physical address - no box numbers)			
City:	State: Zip:			
Closing Date:	Closing Agent:			
Contact:	Phone:			
E-mail:				
Disburse funds to				
Name of Financial Institution:				
Name on Account:				
ABA Routing Number:	Account number:			
1st Mortgage Lender name:	Contact:			
1st Mortgage Lender phone:	E-mail:			
2 nd Mortgage Lender name:	Contact:			
2 nd Mortgage Lender phone:	E-mail:			
Loan Information				
1 st Mortgage Amount: \$ Loan Term: (years or months)	Principal & Interest Payment (monthly): \$			
Interest Rate:%	Tax pmt: \$ MI pmt: \$			
2 nd Mortgage Amount: \$ Loan Term: (years or months)	Principal & Interest Payment (monthly): \$			
Interest Rate:%	Check here if no monthly payments			
Actual Annual Household Income	\$			
Household size (check one)	1-2 3 or more			
Actual % of AMI	%			
(annual income divided by 100% AMI) Income Level (check one)	At or below 50% AMI At or below 60% AMI At or below 80% AMI			
First-time homebuyer (check one)	o YES			
	o NO			
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Require	ments/Promotio	n of Empowerment	
Homebuyer Education from REACH Affiliate/NHDA Approved Provider	Date completed:		DA Approved Provider:
Requesting reimbursement for Homebuyer Education up to \$500? (check one)	o Yes	Amount Requested:	
Offer Assistance to Find or Sustain Employment and/or Job Training (check one)	Accepted:	If Accepted – Provide	ed By:
Offer Financial Education and/or Credit Counseling (check one)	Accepted:	If Accepted – Provided By:	
Targets Met (two required – ple	ease show all tha	nt you can address)	Documentation
Special Needs – Any of the following (55+; Mentally or Physically disabled; Person recovering from physical, alcohol or drug abuse; Person with HIV/AIDS)	YES	NO	See List on Special Needs Documentation
Large Unit – At least 3 Bedrooms	YES	NO	County Assessor Records or Appraisal
FHLBank of Topeka Member Financial Participation – Originated Loans	YES	NO	Closing Disclosure
Military Veteran	YES	NO	DD Form 214
Abatement of Hazardous Environmental Conditions	YES	NO	Proof of existence, plan for removal, cost of removal and proof of removal

- 1. Complete Loan Disbursement Request Form
- 2. Submit to NHDA (at least 10 working days before closing) with:

Uniform Loan Application signed by borrower
Income Verification Documentation (VOEs from lender)
FHLBank Topeka Income Calculation Worksheets
Zero Income and/or Unemployment Certification Form (If applicable)
Homeownership Education Certificate (Must be signed by provider)
Affidavit of Promotion of Empowerment
Documentation of Promotion of Empowerment (If applicable)
Documentation of Targeting Commitments (See Above)

- **Memo or Note for Additional Mortgages (If applicable)**
- Draft or Final Closing Disclosure (May Not Reflect Any Cash Back to П Borrower)
- List of Rehab Items and Costs if Rehab is Listed on CD (If applicable)
- Draft Real Estate Retention Agreement in the amount of \$6,000 for FHLBank Topeka funds

Questions???? Call (402) 435-0315 ext.2

www.housingdevelopers.org for forms & program information

December 2018 FirstDown Loan Disbursement Request