

RECEIPT NO. _____

City of Carpinteria

Affordable Housing Lottery Application for Seahouse



This completed application must be submitted to the City of Carpinteria, Community Development Department online at SeahouseAffordables.com or to the Seahouse Sales Gallery located at 1300 Cravens Lane, Carpinteria, CA 93013

NO LATER THAN NOVEMBER 20th, 2020 at 5:00 PM

No Exceptions

This application must be completed and signed by each adult member of the household (18 years and older). Applicants will be disqualified if program qualifications are not met or if intentional discrepancies are noted. Please use additional sheets if necessary.

PRIMARY APPLICANT

Please Print Clearly

Name: _____
First Middle Last

Current Address: _____ Length of Time at Current Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Birth Date: _____

Social Security Number: _____ Total Gross Annual Household Income: _____

CO-APPLICANT

Please Print Clearly

Name: _____
First Middle Last

Current Address: _____ Length of Time at Current Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Birth Date: _____

Social Security Number: _____ Relationship to Primary Applicant: _____

HOUSEHOLD SIZE

Household Type: Single Adult Single Parent Household Married with Children
 Married without Children Two or More Unrelated Adults Other: _____

Total Number of People in Household: _____ Number of Household Members **17 Years or Younger**: _____

Number of Household Members **18 Years or Older**: _____

PRIMARY APPLICANT EMPLOYEMENT INFORMATION

Employer and Job Title: (List Other Employers Separately)

Employer: _____ Job Title: _____

Place of Employment Address _____ City _____ State _____ Zip Code _____

Phone: _____ Contact Person: _____

Gross Monthly Income (Before Deductions): \$ _____ Attach Copy of Pay Stub(s)

Employer and Job Title: (List other employers separately)

Employer: _____ Job Title: _____

Place of Employment Address _____ City _____ State _____ Zip Code _____

Phone: _____ Contact Person: _____

Gross Monthly Income (Before Deductions): \$ _____ Attach Copy of Pay Stub(s)

CO-APPLICANT EMPLOYEMENT INFORMATION

Co-Applicant Employer and Job Title: (List Other Employers Separately)

Employer: _____ Job Title: _____

Place of Employment Address _____ City _____ State _____ Zip Code _____

Phone: _____ Contact Person: _____

Gross Monthly Income (Before Deductions): \$ _____ Attach Copy of Pay Stub(s)

Employer and Job Title: (List Other Employers Separately)

Employer: _____ Job Title: _____

Place of Employment Address _____ City _____ State _____ Zip Code _____

Phone: _____ Contact Person: _____

Gross Monthly Income (Before Deductions): \$ _____ Attach Copy of Pay Stub(s)

HOUSEHOLD INCOME

Please indicate all sources and amounts of household income.

Type of Income	APPLICANT Monthly Amount	CO-APPLICANT Monthly Amount
Salary (all income from employment)		
Alimony/Child Support		
Rental Income		
Social Security		
Pension Income		
Public Assistance		
Self-employment Income		
Dependent SSI Income		
Disability Income		
Interest / Dividend Interest		

LIABILITIES / DEBT

Please list any debts, including credit cards, auto loans, student loans, and child-care expenses. Do NOT include rent or utilities.

Paid To	Current Balance	Monthly Payment	Responsibility for Debt: A=Applicant B= Co-Applicant C= Both
1.			
2.			
3.			
4.			
5.			
6.			

ASSETS / SAVINGS/ INVESTMENTS

Please list the approximate value of the following:

	APPLICANT	CO-APPLICANT
Checking account		
Savings account		
Auto		
Certificates of Deposit / Securities		
Retirement account		
Other assets		

Are you about to receive additional funds not currently in the accounts above (e.g., tax refunds, property sales, gift(s)): _____

If yes, how much: _____ Source of funds: _____

Would these funds be used to purchase a residence: _____

LIVING EXPENSES

Attach a full copy of current lease or rental agreement, and two current utility statements.

	APPLICANT	CO-APPLICANT
Current Monthly Rent		
Electric/Gas/Trash/Water/Sewer		
Telephone/Cellular		
Cable/Satellite TV/Internet		
Other Living Expenses		

ADDITIONAL INFORMATION

Cash Down Payment: \$ _____ Maximum Loan Amount: \$ _____

Total Loan Amount: \$ _____

You must include a pre-qualification letter from a lender. The pre-qualification letter must state the applicant(s) are pre-qualified to receive a loan in the amount necessary to purchase an affordable unit.

AUTHORIZATION / CERTIFICATION

The undersigned certifies that information provided herein is true and complete. All information entered on this application will be verified prior to completion of a sale to confirm compliance with the restrictions of the City’s affordable housing program. Verification of employment, income, residency, loan and assets will be determined through a subsequent formal qualification process including, but not limited to, review of tax returns, bank accounts, earnings statements, residency, employment, title searches, credit and other screening reports. Any discrepancies or misrepresentations will be cause for rejection of application and will constitute a default under the City’s affordable housing program, even if discovered after a sale has been completed. By signing below, consent is granted to the City or its designee to verify employment, credit and order screening reports from LexisNexis Screening Solutions and National Credit Reporting. Information contained herein will not be disclosed outside the City or its designee except as required and permitted by law. The undersigned further certifies and acknowledges the following:

- I have received a copy of the Affordable Housing Covenants “Notice of Affordability Restrictions on Transfer of Property and Deed of Trust” and “Grant Deed of Preemptive Right Resale Restriction Covenant and Option to Purchase Secured by Performance Deed of Trust”.
- I do not own or have an ownership interest in any residential property. (The Community Development Director may waive this requirement, in his or her sole discretion, when the ownership interest is a small fractional interest or if the property has minimal value due to location or condition.)

Applicant Signature

Applicant- Print Name

Date

Co-Applicant Signature

Co-Applicant- Print Name

Date

Return completed form with attachments to:
City of Carpinteria, Community Development Department online at SeahouseAffordables.com or to the Seahouse Sales Gallery located at 1300 Cravens Lane, Carpinteria, CA 93013.

Please note that incomplete applications will not be accepted. Should you have questions about the application or submittal requirements, please contact Nick Bobroff, Principal Planner, at (805) 755-4407 or nickb@ci.carpinteria.us.

AFFIDAVIT OF VERIFYING APPLICATION INFORMATION

Complete one affidavit form per applicant / adult.

THE UNDERSIGNED hereby certifies under penalty of perjury to the seller, Warmington Residential, and/or his/her/their agent(s) and the City of Carpinteria that the following information is true and correct as of this _____ day of _____ and is provided in connection with the potential purchase of real property by the undersigned offered for sale by the seller, Warmington Residential, and/or his/her/their agent(s).

The terms used in this affidavit are defined in the City of Carpinteria’s “Affordable Housing Policy and Procedures.”

- 1. I currently own residential real property. (If the answer to this question is yes, please provide additional information about your ownership interest.)
Yes _____ No _____
- 2. The evidence I have presented to the City of Carpinteria in my application for the purchase of _____, Carpinteria is true and correct pursuant to the definitions contained in the City of Carpinteria Affordable Housing Policies and Procedures.
Yes _____ No _____

I understand that the above information is being collected to determine my eligibility for the City of Carpinteria Affordable Housing Program. I authorize the City of Carpinteria and/or its designee to verify all information provided on this application and to contact persons who can verify the same. I acknowledge that I am voluntarily participating in this process and that my participation does not guarantee that I will be able to purchase an affordable housing unit from the seller, Warmington Residential, and/or his/her/their agent(s).

In consideration for being permitted to participate in this process, I agree for myself and my heirs, administrators, executors and assigns: (a) to waive any and all claims, demands, actions, liability or lawsuits arising out of or in connection with my participation; (b) to release, discharge and agree not to sue the seller, and/or his/her/their agent(s) or the City of Carpinteria, its managers, employees, officers, directors and agents for any and all liability for any injury or damages arising out of, or in connection with my participation, and (c) to hold harmless and indemnify the seller, Warmington Residential, and/or his/her/their agent(s) and the City of Carpinteria, its managers, employees, officers, directors and agents from any and all liability for any injury or damages arising out of, or in connection with my participation.

IN WITNESS WHEREOF, the undersigned has read, understands and agrees to voluntarily be bound by this Affidavit.

Applicant Signature

Printed Name

Date

Note: Each non-dependent adult member of a household must execute a separate Affidavit.