

**Riverside County  
Economic Development Agency  
5555 Arlington Avenue  
Riverside, CA 92504  
951-343-5469  
First Time Home Buyer Program (FTHB)**

**APPLICATION AFFIDAVIT**

Lender:			
Lender Address:			
Lender Telephone:		Cell Number:	
Name of Participating Lender Representative:			
Are you on the list of approved agents to submit application	<input type="checkbox"/> Yes <input type="checkbox"/> No – If the answer is “no” you will not be able to submit an application.		
Email Address:			

We are processing a mortgage loan application for the listed applicant(s). Our preliminary review indicates that this household meets the eligibility for First Time Home Buyer Assistance as set forth in the Program Guidelines of the Economic Development Agency of Riverside County.

It is imperative that Seller, Seller’s or Buyer’s agents are notified in advance of the time of application and provide the following information:

**Listing Agent:**

Name:			
Phone Number:		Cell Number:	
Email Address:			

**Buyer’s Agent:**

Name:			
Phone Number:		Cell Number:	
Email Address:			

Does the property have a lockbox?   ☐ Yes   ☐ No

If yes, will you provide access to EDA staff to inspect the house?   ☐ Yes   ☐ No

Lock Box #: \_\_\_\_\_

The following request for Down Payment Assistance funds are for the  
Following applicant(s):

Name of Applicant(s):			
Current Address:			
Applicant's Home/cell Phone Number			
Applicant's Work Phone Number			
Address of Property Being Purchased:			
Assessor Parcel Number (APN):			
Initial Purchase Price:	\$		
Gross Annual Household Income:	\$	Monthly Income:	\$

Down-Payment Assistance Requested up to (20% of the purchase price not to exceed \$75,000)	\$
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Is applicant applying for the Riverside County Mortgage Credit Certificate Program?

☐ Yes ☐ No

Is the applicant a participant in the Riverside County Housing Authority Family Self Sufficiency (FSS) Program?

☐ Yes ☐ No

Is the household income within the Program Limits? ☐ Yes ☐ No

Property being purchased is located in the City Limits: ☐ Yes ☐ No/Unincorporated

Type of property being purchased: ☐ Single Family Detached ☐ Planned Unit Development

☐ Condominium

☐ Manufactured Home  
(☐ New ☐ Resale)

Is the home bank owned/foreclosed? ☐ Yes ☐ No

Is the home a Short Sale? ☐ Yes ☐ No

*(If yes, do not submit the FTHB application until the seller's lender has fully accepted the offer)*

Number of Bedrooms: \_\_\_\_\_ Number of Bathrooms: \_\_\_\_\_

In-ground Pool/Spa ☐ Yes ☐ No *(If the answer is Yes the property is not eligible)*

Newly Constructed ☐ Yes ☐ No

If yes, date of issuance of occupancy permit: \_\_\_\_\_

If no, Year Constructed: \_\_\_\_\_

*(If property is more than 50 years old, standard EDA processing turnaround times do not apply)*

Is the property vacant? ☐ Yes ☐ No

If Yes, Date Property Last Occupied: \_\_\_\_\_

Is the property occupied by the seller: ☐ Yes ☐ No

Is the property occupied by a tenant who is purchasing the property? ☐ Yes ☐ No

Is the property occupied by a tenant who is not purchasing the property: ☐ Yes ☐ No

*(If Yes, do not submit file. Properties that are currently tenant occupied and the tenant is not purchasing the subject property are not eligible for FTHB.)*

**Status of Prior Home Ownership:**

☐ First Time Home Buyer

Last Date of Home Ownership: \_\_\_\_\_

**Applicant Information**

(For Statistical Purposes Only)

Marital Status:Married ☐Single ☐Divorced ☐

Family Size \_\_\_\_\_

Age of applicant(s) and all household members:

(Please use the letter "H" to signify head of household, and the letter "X" for each family member)

\_\_\_\_\_ Under 20

\_\_\_\_\_ 36-40

Head of Household:

\_\_\_\_\_ 20-25

\_\_\_\_\_ 41-50

Male ☐

\_\_\_\_\_ 26-30

\_\_\_\_\_ 51-60

Female ☐

\_\_\_\_\_ 31-35

\_\_\_\_\_ Over 61

**Hispanic:** ☐ Yes ☐ No**Race:** ☐ Black or African American ☐ White ☐ Asian☐ Native Hawaiian/Pacific Islander☐ American Indian/Alaskan Native and White☐ Asian and White☐ Black/African American and White☐ American Indian/Alaskan Native and Black/African American☐ American Indian or Alaskan Native☐ Other

Date: \_\_\_\_\_

Authorized Lender Signature: \_\_\_\_\_

Printed Authorized Lender Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_