

**Program Overview**

Thank you for your interest in the City of Tyler's First Time Home Buyers Program (FTHB). To qualify for assistance, gross household income must be at or below 80% of the 2022 HUD area median income (AMI) adjusted for family size, and your application must contain all supporting documentation at the time of submittal. Upon submittal, you may be asked to provide additional/clarifying information. Incomplete applications or applications with missing or omitted information are ineligible until a complete application is submitted.

2022 HUD Income Limits			
Household Size	30% of AMI	50% of AMI	80% of AMI
1	\$17,500	\$29,100	\$46,550
2	\$20,000	\$33,250	\$53,200
3	\$22,500	\$37,400	\$59,850
4	\$24,950	\$41,550	\$66,500
5	\$26,950	\$44,900	\$71,850
6	\$28,950	\$48,200	\$77,150
7	\$30,950	\$51,550	\$82,500
8	\$32,950	\$54,850	\$87,800

The City of Tyler First Time Homebuyer's Program (FTHB) has funding available for first time homebuyers purchasing a single-family home. FTHB offers down payment assistance up to the following amounts:

Type of House	Assistance Amount
Existing Home	Up to \$14,999
New Construction	Between \$15,000 and \$25,000
Target Area	Between \$40,000 and \$50,000

These amounts are given as a 0% interest deferred forgivable loan as long as the applicant stays in the home during the affordability periods listed below. FTHB is funded through the Community Development Block Grant (CDBG) received from the U.S. Department of Housing and Urban Development (HUD).

Assistance Amount	Affordability Period
Up to \$14,999	5 years
Between \$15,000 and \$25,000	10 years
Between \$40,000 and \$50,000	15 years





City of Tyler
First Time Homebuyer's Program

900 W Gentry Parkway
Tyler, TX 75702
(903) 531-1303

Program Guidelines

Applicant Name	
Applicant Address	
Date of Application	

Please note: Applications are reviewed and processed in the order in which they were received. Funding for FTHB is limited and once it is exhausted, all applications will be placed on a wait list until additional funding is secured. Submission of an application does not automatically qualify your household for assistance.

Family Size	Maximum Household Income	Family Size	Maximum Household Income
1	\$46,550	5	\$71,850
2	\$53,200	6	\$77,150
3	\$59,850	7	\$82,500
4	\$66,500	8	\$87,800

Additionally, to be eligible for assistance:

- You must not have owned a home in the last (3) three years,
- You must be a permanent legal resident or a U.S. Citizen,
- You must intend to occupy the property for a **minimum** of five (5) years, ten (10) years, or fifteen (15) years depending on assistance,
- You cannot have more than \$15,000 in liquid assets,
- Your debt-to-income ratio cannot be more than 35/45,
- Minimum investment of earnest money from the client due at closing is \$1,000 for a pre-owned home, and \$1,500 for a newly constructed home,
- You must attend and complete a homebuyer education class through a HUD-approved housing counseling agency. This certification is valid for twelve (12) months. The certification must be valid at the time of closing,
- If you have a co-signer on the primary mortgage, the co-signer must reside in the household,
- The household's annual gross income must be at or below 80% of the area median income for your household size, and
- The property must:
 - Be within the City of Tyler city limits,
 - Be a single-family residence,
 - Have been built during or after year 1978,
 - Pass both a home inspection and a Housing Quality Standards (HQS) Inspection, and
 - Not be located in a floodplain or floodway.





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Minimum Required Application Documentation

	Mortgage pre-approval from a lender.
	Signed Lender Agreement Form.
	Identification with picture for applicant and the co-applicant. <i>(Unexpired Driver's License, Passport, Resident Alien Card)</i>
	Social Security cards for both the applicant and the co-applicant.
	Proof of citizenship/legal residency for all other members of the household. <i>(Birth Certificates, Resident Alien Cards, Social Security Cards, Passports)</i>
	Most recent three (3) full months of paycheck stubs for of all jobs held for each working member of the household.
	Verification of any other sources of income for all family members <i>(Social Security, SSI, Child Support, Retirement, etc.) If Alimony or Child Support, please provide a twelve (12) month payment history.</i>
	For household members enrolled in school, please provide an enrollment letter from the school showing the student's enrollment status (part-time or full-time). <i>If grants are received, please include the award letter and the breakdown of tuition fees.</i>
	Last two (2) years of tax returns, including all addendums and W-2 forms, for every working member of the household. <i>(Provide three (3) years if self-employed)</i>
	Most recent two (2) months of complete bank statements for ALL savings accounts. <i>Please provide ALL pages. Please note that bank statements cannot be replaced by computer screen printouts. Also, a letter of explanation, along with supporting documentation, is required for ALL cash deposits and ANY large cash withdrawals.</i>
	Most recent six (6) months of complete bank statements for ALL checking accounts. <i>Please provide ALL pages. Please note that bank statements cannot be replaced by computer screen printouts. Also, a letter of explanation, along with supporting documentation, is required for ALL cash deposits and ANY large cash withdrawals.</i>
	Divorce decree, if applicable.
	Most recent 401k statement, if applicable. <i>(or any other retirement account)</i>
	Recent Credit Report from the applicant.





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Applicant Information

Please submit an application that is both **complete** and **accurate**. Failure to provide complete and accurate information may result in delay and/or denial of assistance. Only complete applications will be accepted. Initial review will take ten (10) business days.

Applicant Name (Include Jr. or Sr. if applicable)
Mr. /Miss/ Ms. /Mrs.
Social Security Number (full)
- -
Date of Birth
Primary Phone
() -
Alternate Phone
() -
Email Address
Marital Status
<input type="checkbox"/> Married <input type="checkbox"/> Widowed
<input type="checkbox"/> Separated <input type="checkbox"/> Divorced
<input type="checkbox"/> Single <input type="checkbox"/> Other: _____
Number of Dependents
0 1 2 3 4 5 6 7 8 Other:

Co-Applicant Name (Include Jr. or Sr. if applicable)
Mr. /Miss/ Ms. /Mrs.
Social Security Number (full)
- -
Date of Birth
Primary Phone
() -
Alternate Phone
() -
Email Address
Marital Status
<input type="checkbox"/> Married <input type="checkbox"/> Widowed
<input type="checkbox"/> Separated <input type="checkbox"/> Divorced
<input type="checkbox"/> Single <input type="checkbox"/> Other: _____
Number of Dependents
0 1 2 3 4 5 6 7 8 Other:

Present Address			
Street Address			
City, State		Zip Code	
Own?	Y / N	Years Owned the Home	
Rent?	Y / N	Years Rented the Home	

Previous Address (if less than 2 years at present address)			
Street Address			
City, State		Zip Code	
Own?	Y / N	Years Owned the Home	
Rent?	Y / N	Years Rented the Home	



**General Information/ Declarations**

To be eligible for assistance, you must meet certain criteria. By answering these questions, you are declaring that you meet these criteria. In some cases, additional information/documentation may be required for eligibility determination.

	Applicant		Co-Applicant	
Are there any outstanding judgements against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you filed for bankruptcy within the last seven (7) years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you been declared bankrupt within the last seven (7) years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a party to a lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer, or title in lieu of foreclosure, or judgement? <i>If you previously owned a home, please submit proof of transfer of ownership with this application and any other documentation showing that you no longer have a vested interest in the property.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, or loan judgement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a cosigner or endorser on a current note/loan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a U.S. Citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a permanent legal resident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you intend to occupy the property as your primary residence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you owned a property in the last three (3) years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, what type of property did you own?	<input type="checkbox"/> Principal Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment Property		<input type="checkbox"/> Principal Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment Property	
If so, how did you hold title to the home?	<input type="checkbox"/> Solely <input type="checkbox"/> Jointly with Spouse <input type="checkbox"/> Jointly with Another Person		<input type="checkbox"/> Solely <input type="checkbox"/> Jointly with Spouse <input type="checkbox"/> Jointly with Another Person	





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Current Employment Information

Applicant Employment Status	
Employed	Y / N
Self-Employed	Y / N
Retired	Y / N
Unemployed	Y / N
Employer Business Name	
Type of Business	
Position/Title	
Gross Monthly Income	
\$	
Employer Street Address	
Employer City, State, Zip Code	
Employer Contact Info (phone, email, or fax)	
Time worked at present job	
If unemployed, please explain any sources of income received.	

Co-Applicant Employment Status	
Employed	Y / N
Self-Employed	Y / N
Retired	Y / N
Unemployed	Y / N
Employer Business Name	
Type of Business	
Position/Title	
Gross Monthly Income	
\$	
Employer Street Address	
Employer City, State, Zip Code	
Employer Contact Info (phone, email, or fax)	
Time worked at present job	
If unemployed, please explain any sources of income received.	



**Previous Employment Information**

If you have not been at your current position for at least two (2) years, please provide information about your previous employment. If you have had more than two (2) positions in the last two (2) years, please provide additional information as an attachment to your application.

Applicant	
Self-Employed	Y / N
Retired	Y / N
Employer Business Name	
Position/Title	
Gross Monthly Income	
\$	
Employer Contact (phone, email or fax)	
Employment Dates	

Co-Applicant	
Self-Employed	Y / N
Retired	Y / N
Employer Business Name	
Position/Title	
Gross Monthly Income	
\$	
Employer Contact (phone, email or fax)	
Employment Dates	

Debt

Landlord/Apartment Complex Name	
Monthly Rent	\$

Applicant or Co-Applicant	Creditor Name	Type of Note (Car payment, credit card, etc)	Monthly Payment	Original Balance	Present Balance
Ex: Applicant	Capital One	Car Payment	\$350.00	\$26,000.00	\$10,00.00





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Combined Annual Income

List all income earned by each person aged 18 or older who is living in the household. This includes income from employment, child support, Social security, disability payment (SSI or SSDI), Worker's Compensation, retirement benefits, Veteran's benefits, rental property income, stock dividends, income from financial investments, alimony, and any income from other sources. **Failure to disclose any income or assets is a criminal offense under Section 1001 of Title 18 of the U.S. Code.**

If a household member aged 18 or older does not have any income, please skip the sections below and proceed to the next page in order for the individual to complete the required Certification of Zero Income form.

Gross Annual Income	Applicant	Co-Applicant	Other Household Members	Total
Annual Employment Pay	\$	\$	\$	\$
Overtime	\$	\$	\$	\$
Bonuses/Commissions	\$	\$	\$	\$
Part-time/Second Job	\$	\$	\$	\$
Social Security Benefits	\$	\$	\$	\$
Child Support/Alimony	\$	\$	\$	\$
Total	\$	\$	\$	\$

Does any member of the household have any of the following?			
Y / N	Checking Account	Y / N	Certificates of Deposit
Y / N	Savings	Y / N	Trusts
Y / N	Real Estate	Y / N	Retirement Accounts
Y / N	Stocks	Y / N	Bonds

Applicant or Co-Applicant	Banking Institution	Type of Account	Account Number	Current Balance
				\$
				\$
				\$
				\$
				\$
				\$
				\$





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Certification of Zero Income

Each adult household member must complete this form, if applicable.

Applicant Name	
Applicant Address	

1. I hereby certify that I do not individually receive income from any of the following sources:

- Wages from employment including commissions, tips, bonuses, fees, etc.,
- Income from operation of a business,
- Rental income from real or personal property,
- Interest or dividends from assets,
- Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits,
- Unemployment or disability payments,
- Public assistance payments,
- Periodic allowances such as alimony, child support, or gifts received from persons not living in my household,
- Sales from self-employment resources such as Avon, Mary Kay, etc.,
- Any other sources not named above

2. I currently do not have income of any kind and there is no imminent change expected in my financial status during the next twelve (12) months.

3. Please explain the source of funds you will be using to make the mortgage payments:

Under penalty of perjury, I certify that the information in this certification is true and accurate to the best of my knowledge. I understand that that providing false representation herein constitutes an act of fraud. Further, I understand that false, misleading, or incomplete information may result in the termination of federal assistance.

Signature of Household Member

Date





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Household Composition

List everyone who is living in the home, including both the applicant and co-applicant.

Legal Name	Sex	Date of Birth	Age	Social Security Number	Relationship to Applicant(s)
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	
		/ /		- -	

Referral

How did you hear about our program?

Race *(Please select the most appropriate racial category for the Applicant)*

- | | |
|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> American Indian/Alaska Native and African American/Black |
| <input type="checkbox"/> American Indian/Native Alaskan | <input type="checkbox"/> African American/Black |
| <input type="checkbox"/> American Indian/Alaska Native and White | <input type="checkbox"/> Asian |
| <input type="checkbox"/> African American/Black and White | <input type="checkbox"/> Native Hawaiian/Pacific Islander |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander and Asian | <input type="checkbox"/> Asian and African American/Black |
| <input type="checkbox"/> Native Hawaiian/and African American/Black | <input type="checkbox"/> Asian and White |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander and White | <input type="checkbox"/> More than 2 races |
| <input type="checkbox"/> Native Hawaiian/Pacific Islander and American Indian/Alaska Native | |

Other Demographics *(Please select those that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Elderly (62+) | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Disabled | <input type="checkbox"/> Veteran |





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Authorization to Release Information

The undersigned applicants have applied for a loan from the City of Tyler. As part of the application process, the City of Tyler and the guaranty Insurer, if any, may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.

The undersigned applicants authorize any pertinent third parties to provide to the City of Tyler any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income, money market and similar account balances, credit history, credit reports, and copies of income tax returns.

The City of Tyler may address any questions concerning documentation to the applicable third party.

Privacy Act Notice Statement: The Department of Housing and Urban Development (HUD) requires the collection of the information derived from this form to determine an applicant's eligibility in a Homebuyers Assistance Program and the amount of assistance necessary using HOME and/or Community Development Block Grant (CDBG) funds. This information will be used to establish the level of benefit on the HOME/CDBG Program; to protect the Government's financial interest; and to verify the accuracy of the information furnished. It may be released to the appropriate Federal, State, and local agencies when relevant to civil, criminal, or regulatory investigators, and to prosecutors. Failure to provide any information may result in a delay or rejection of your eligibility approval. The Department is authorized to ask for this information by the National Affordable Housing Act of 1990.

Applicant's Name (*Print*)

Co-Applicant's Name (*Print*)

Applicant's Signature

Co-Applicant's Signature

Date

Date





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Statement/Explanation of Supporting Documentation

Section 1010 of Title 18, U.S.C., Department of Housing and Urban Development and Federal Housing Administration Transactions, provides:

"Whomever, for the purpose of influencing in any way the action of such Department – makes, passes, utters, or publishes any statement, knowing that same to be false – shall be fined not more than \$5,000 or imprisoned not more than two years, or both."

Other Federal statutes provide severe penalties for any fraud or intentional misrepresentation made for the purpose of influencing the issuance of any guaranty or making of any loan.

Please use the lines below to explain any potential discrepancies in your application versus what we may find in our verification process.

Example: You are receiving child support for a child who will be turning 18 in two (2) weeks. Your bank statements will show that you have been receiving child support, but that will not be a factor in your income for the loan because you will no longer be eligible in two (2) weeks.

Signature of Applicant

Date

Signature of Co-Applicant

Date

Signature of Adult Household Member

Date





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Applicant Certification

The undersigned certify the following:

I am applying for First Time Homebuyer's Assistance from the City of Tyler. In applying for this assistance, I have completed this application which contains various pieces of information concerning the purpose of the loan, employment and income information, and information related to the assets and liabilities of the household. I certify that all of the information is true and complete. I make no misrepresentations in the application or other documents, nor did I omit any pertinent information. I understand that the information provided is collected to determine if I am eligible to receive Homebuyer's Program assistance. I certify that all the information provided here in is true and correct. I understand that providing false statements or information is grounds for termination of housing assistance and is punishable under federal law. I authorize the City of Tyler to verify all information provided on this application.

The undersigned fully understand that this is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this loan as applicable under the provisions of United States Code, Section 1001, which provides that "...whoever in any matter within the jurisdiction of any department or agency of the Government of the United States, knowingly and willfully falsifies... or makes any fictitious or fraudulent statements or representation, or makes or uses a false writing or document knowing the same to contain false, fictitious, or fraudulent statement or entry, shall be fined under this title, imprisoned not more than five years..."

The undersigned also certify that in accordance with 24 CFR 92.2 that the household meets first time homebuyer status due to the following reason:

Applicant (check all that apply)
<input type="checkbox"/> I have not owned a house in the last three years
<input type="checkbox"/> I am a displaced homemaker
<input type="checkbox"/> I am a single parent who has only owned with a former spouse while married
<input type="checkbox"/> I own a home that is substandard and uninhabitable

Co-Applicant (check all that apply)
<input type="checkbox"/> I have not owned a house in the last three years
<input type="checkbox"/> I am a displaced homemaker
<input type="checkbox"/> I am a single parent who has only owned with a former spouse while married
<input type="checkbox"/> I own a home that is substandard and uninhabitable

Applicant's Signature

Co-Applicant's Signature

Date

Date





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Credit Report Authorization – *Only to be used in the event that the lender will not provide credit report.*

I hereby authorize and instruct the City of Tyler to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by the City of Tyler. I understand and agree that the City of Tyler intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home.

My signature below also authorizes the release to credit reporting agencies of financial or other information that have supplied to the City of Tyler in connection with such an evaluation. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

In addition, in connection with determining my ability to obtain a loan, I:

- ☐ Authorize
☐ Do Not Authorize

the City of Tyler to share with potential lenders and/or counseling agencies my report and any information that I have provided, including any computations and assessments that have been produced based upon such information. These lenders may contact me to discuss loans for which I may be eligible, and these counseling agencies may contact me to discuss counseling services.

I understand that I may revoke my consent to these disclosures by notifying the City of Tyler in writing.

Applicant's Name (*Print*)

Co-Applicant's Name (*Print*)

Applicant's Signature

Co-Applicant's Signature

Social Security Number

Social Security Number

Date

Date





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Intent to Occupy the Property as Primary Residence – To be completed after a property has been approved.

Applicant Name	
Address of Purchasing Property	

The Homebuyer certifies that he or she will occupy the above referenced address and it will be his or her principal residence throughout the required affordability period.

The Homebuyer understand that his or her acceptance of the down payment and/or closing cost assistance through the City of Tyler First Time Homebuyer's Program will result in the attachment of a lien in favor of the City of Tyler on the above referenced address.

The Homebuyer further certifies that all information and copies of documents provided to the Mortgage Company and/or the City of Tyler are true and correct.

The Homebuyer understands that any discrepancies or misstatements may result in his or her disqualification from the HOME/CDBG Program and possible repayment of the assistance received.

Applicant's Name *(Print)*

Co-Applicant's Name *(Print)*

Applicant's Signature

Co-Applicant's Signature

Date

Date

WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

