

## ***EMERGENCY MORTGAGE ASSISTANCE PROGRAM (EMAP)***

### ***AM I ELIGIBLE TO APPLY FOR EMAP?***

***\*ANSWERING THE FOLLOWING QUESTIONS WILL HELP DETERMINE WHETHER YOU ARE ELIGIBLE TO APPLY FOR THE EMAP PROGRAM \****

1. Is your financial hardship/delinquency due to circumstances beyond your control such as, unemployment or underemployment, a loss, reduction or delay in social security or supplemental social security, divorce or unexpected loss of support payments or disability, illness or death of homeowner or family member, and/or unanticipated rise in expense (i.e. furnace replacement, mold remediation, natural disaster, etc.)? ***Note: Increase in housing expenses (i.e. utilities usage, mortgage payment) and inflation is not considered an eligible financial hardship.***
  - A) Yes – continue
  - B) No – stop, you are not eligible
  
2. Is the property located in the state of Connecticut?
  - A) Yes – continue
  - B) No – stop, you are not eligible
  
3. Do you own the home and live there as your full time primary residence?
  - A) Yes – continue
  - B) No – stop, you are not eligible
  
4. If you are 60 days or more delinquent, have you worked with the mortgage servicer/lien holder to negotiate a plan in resolving your mortgage/lien delinquency?
  - A) Yes – continue
  - B) No – stop, you are not eligible; however, you can apply for EMAP once you have received a decision from your mortgage servicer/lienholder.

***If you are currently in foreclosure with a foreclosure sale or law date, contact the EMAP Department as soon as possible at 860-571-3500 because this matter is time sensitive.***

***Important Notes: If you are currently in active Bankruptcy, you will be required to obtain permission from the Bankruptcy Trustee/Bankruptcy Court confirming you are permitted to receive EMAP loan funds.***

***The EMAP Loan is not a grant but a mortgage with a lien on your property. Repayment of EMAP is deferred until the homeowner sells or refinances the property or ceases to occupy the property as their principal residence.***

***Should you have questions during the application process, please contact the nearest HUD-approved counseling agency for assistance. The list of the HUD-approved counseling agencies can be found within the EMAP application.***

## ***EMERGENCY MORTGAGE ASSISTANCE PROGRAM DOCUMENT CHECKLIST***

### **EMAP DISCLOSURES INCLUDED: (PLEASE SIGN, DATE AND RETURN)**

- EMAP Application
- Certification of Assets
- CHFA EMAP Borrower Certificate
- Borrower's Certification and Authorization
- CHFA Owner-Occupancy Certificate
- Authorization to pull IRS Transcript
- Authorization to run credit

### **DOCUMENT CHECKLIST: (Documents below MUST accompany application) PROVIDE COPIES ONLY!**

- Proof of Identification:** Copy of an unexpired Driver's License, valid photo ID issued by the State of CT, valid Passport or other form of photo ID with identifying information.
- Hardship Letter:** Provide a detailed hardship letter and documentation to support the stated hardship (examples of support include tax returns, unemployment benefits letter, bank statement reflecting payment of large expense etc.). The letter must include the circumstances of your financial hardship including the specific month and year of occurrences(s).
- Mortgage Promissory Note:** A copy of the Promissory Note is required for every mortgage on your property (obtained from your closing documents).
- Mortgage Deed:** A copy of the Mortgage Deed is required for every mortgage on your property (obtained from your closing documents).
- Mortgage Statement:** If applicable, provide a current mortgage statement for every mortgage on your property and other properties you may own.
- Non-Mortgage Expense (lien) Statement:** If applicable, provide a non-mortgage expense (lien) statement (i.e. water, sewer, homeowners association dues/condo fees, property tax bill) reflecting the payment amount and frequency.
- Homeowners Hazard Insurance Policy:** Copy of the Declarations Page.
- Federal Income Tax Returns, W-2's and 1099's:** Signed complete copy for the year prior to the date of the stated hardship to current.

If you have not filed tax returns please provide IRS Wage and Income Statements(s)  
(IRS website - <https://www.irs.gov/individuals/get-transcript>).

- Household Income Documentation:** One (1) month of recent paystubs (must cover full 30 days); Social Security, Disability, Unemployment and/or Pension benefit letters, Rental Agreements and 3 months of rental receipts (i.e. bank deposits). Self-employed borrowers, please provide a year to date, Profit and Loss Statement. Household Members over the age of 18, must provide income

documentation and the current year federal tax return unless you provide proof they are a full time student.

□ **Asset Documentation**: Provide the most recent three (3) months statements for checking, savings, mobile payment accounts (i.e. Venmo, Cash App etc.), retirement accounts, CD's, Stock, Mutual Funds and/or Annuities. Household Members over the age of 18, must provide asset documentation unless you provide proof they are a full time student. ALL ASSETS MUST BE DOCUMENTED.

□ **Written evidence**: that you have worked with your lender in an attempt to resolve the current mortgage delinquency (i.e. loss mitigation denial letter, repayment plan or signed loan modification agreement. A phone call to your lender **does not constitute** written documentation).

To be completed by the Lender:  
EMAP Loan No. \_\_\_\_\_



## Emergency Mortgage Assistance Program Application

Verify and complete the information on this application. If you are applying for this loan with others, each additional Borrower must provide information as directed by the EMAP Program.

**Section 1: Borrower Information.** This section asks about your personal information and your income from employment and other sources, such as retirement.

### 1a. Personal Information

<p><b>Name</b> (First, Middle, Last, Suffix) _____</p> <p><b>Alternate Names</b> – List any names by which you are known or any names under which credit was previously received (First, Middle, Last, Suffix) _____</p>	<p><b>Social Security Number</b> _____ – _____ – _____ (or Individual Taxpayer Identification Number)</p> <p><b>Date of Birth</b> (mm/dd/yyyy) _____/_____/_____</p> <p><b>Citizenship</b></p> <p><input type="radio"/> U.S. Citizen</p> <p><input type="radio"/> Permanent Resident Alien</p> <p><input type="radio"/> Non-Permanent Resident Alien</p>
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<p><b>Type of Credit</b></p> <p><input type="radio"/> I am applying for <b>individual credit</b>.</p> <p><input type="radio"/> I am applying for <b>joint credit</b>. Total Number of Borrowers: _____ Each Borrower intends to apply for joint credit. <b>Your initials:</b> _____</p>	<p><b>List Name(s) of Other Borrower(s) Applying for this Loan</b> (First, Middle, Last, Suffix) – Use a separator between names</p>
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<p><b>Marital Status</b></p> <p><input type="radio"/> Married</p> <p><input type="radio"/> Separated</p> <p><input type="radio"/> Unmarried (Single, Divorced, Widowed, Civil Union, Domestic Partnership, Registered Reciprocal Beneficiary Relationship)</p>	<p><b>Additional Household members</b></p> <p>Number _____</p> <p>Ages _____</p>	<p><b>Contact Information</b></p> <p><b>Home Phone</b> (____) _____ – _____</p> <p><b>Cell Phone</b> (____) _____ – _____</p> <p><b>Work Phone</b> (____) _____ – _____ <b>Ext.</b> _____</p> <p><b>Email</b> _____</p>
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**Current Address**

Street \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

How Long at Current Address? \_\_\_ Years \_\_\_ Months **Housing**  Own – No Mortgage  Own – With Mortgage

**If at Current Address for LESS than 2 years, list Former Address**  Does not apply

Street \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

How Long at Former Address? \_\_\_ Years \_\_\_ Months **Housing** No primary housing expense Own  Rent (\$ \_\_\_\_\_ /month)

**Mailing Address – if different from Current Address**  Does not apply

Street \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

### 1b. Current Employment/Self-Employment and Income

Does not apply

<p><b>Employer or Business Name</b> _____ Phone (____) _____ – _____</p> <p>Street _____ Unit # _____</p> <p>City _____ State _____ ZIP _____ Country _____</p>	<p><b>Gross Monthly Income</b></p> <p>Base \$ _____ /month</p> <p>Overtime \$ _____ /month</p> <p>Bonus \$ _____ /month</p> <p>Commission \$ _____ /month</p> <p>Military Entitlements \$ _____ /month</p> <p>Other \$ _____ /month</p> <p><b>TOTAL \$ _____ /month</b></p>
<p><b>Position or Title</b> _____</p> <p><b>Start Date</b> _____/_____/_____ (mm/dd/yyyy)</p> <p>How long in this line of work? _____ Months</p>	<p><b>Check if this statement applies:</b></p> <p><input type="checkbox"/> I am employed by a family member, property seller, real estate agent, or other party to the transaction.</p>
<p><input type="checkbox"/> <b>Check if you are the Business Owner or Self-Employed</b></p> <p><input type="radio"/> I have an ownership share of less than 25%. <b>Monthly Income (or Loss)</b> \$ _____</p> <p><input type="radio"/> I have an ownership share of 25% or more. \$ _____</p>	



**1c. IF APPLICABLE, Complete Information for Additional Employment/Self-Employment and Income**

Does not apply

Employer or Business Name \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_-\_\_\_\_  
 Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Position or Title \_\_\_\_\_  
 Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)  
 How long in this line of work? \_\_\_\_ Years \_\_\_\_ Months

**Check if this statement applies:**  
 I am employed by a family member, property seller, real estate agent, or other party to the transaction.

Check if you are the Business Owner or Self-Employed  I have an ownership share of less than 25%. **Monthly Income (or Loss)**  
 I have an ownership share of 25% or more. \$ \_\_\_\_\_

**Gross Monthly Income**  
 Base \$ \_\_\_\_\_/month  
 Overtime \$ \_\_\_\_\_/month  
 Bonus \$ \_\_\_\_\_/month  
 Commission \$ \_\_\_\_\_/month  
 Military Entitlements \$ \_\_\_\_\_/month  
 Other \$ \_\_\_\_\_/month  
**TOTAL \$ \_\_\_\_\_/month**

**1d. IF APPLICABLE, Complete Information for Previous Employment/Self-Employment and Income**

Does not apply

Provide at least 2 years of current and previous employment and income.

Employer or Business Name \_\_\_\_\_  
 Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Position or Title \_\_\_\_\_  
 Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)  
 End Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Check if you were the Business Owner or Self-Employed

**Previous Gross Monthly Income \$ \_\_\_\_\_/month**

**1e. Income from Other Sources**

Does not apply

Include income from other sources below. Under Income Source, choose from the sources listed here:

- Alimony
- Automobile Allowance
- Boarder Income
- Capital Gains
- Child Support
- Disability
- Foster Care
- Housing or Parsonage
- Interest and Dividends
- Mortgage Credit Certificate
- Mortgage Differential
- Payments
- Notes Receivable
- Public Assistance
- Retirement (e.g., Pension, IRA)
- Royalty Payments
- Separate Maintenance
- Social Security
- Trust
- Unemployment Benefits
- VA Compensation
- Other

Income Source – use list above	Monthly Income
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Provide TOTAL Amount Here</b>	<b>\$ _____</b>

**Section 2: Financial Information — Assets and Liabilities.** This section asks about things you own that are worth money; **you must disclose all assets.** It then asks about your liabilities (or debts) that you pay each month, such as credit cards, alimony, or other expenses.

**2a. Assets – Bank Accounts, Retirement, and Other Accounts You Have**

Include all accounts below. Under Account Type, choose from the types listed here:

- Checking
- Certificate of Deposit
- Stock Options
- Bridge Loan Proceeds
- Trust Account
- Savings
- Mutual Fund
- Bonds
- Individual Development Account
- Cash Value of Life Insurance (used for the transaction)
- Money Market
- Stocks
- Retirement (e.g., 401k, IRA)

Account Type – use list above	Financial Institution	Account Number	Cash or Market Value
			\$
			\$
			\$
			\$
			\$
<b>Provide TOTAL Amount Here</b>			<b>\$</b>

**2b. Other Assets and Credits You Have**

Does not apply

Include all other assets and credits below. Under Asset or Credit Type, choose from the types listed here:

- |                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                      |
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| <p><i>Assets</i></p> <ul style="list-style-type: none"> <li>• Proceeds from Real Estate</li> <li>• Proceeds from Sale of Non-Real Estate Asset</li> <li>• Secured Borrowed Funds</li> </ul> | <p><i>Credits</i></p> <ul style="list-style-type: none"> <li>• Earnest Money</li> <li>• Employer Assistance</li> <li>• Lot Equity</li> <li>• Unsecured Borrowed Funds</li> <li>• Other</li> <li>• Relocation Funds</li> <li>• Rent Credit</li> <li>• Sweat Equity</li> <li>• Trade Equity</li> </ul> |
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Asset or Credit Type – use list above	Cash or Market Value
	\$
	\$
	\$
	\$
<b>Provide TOTAL Amount Here</b>	<b>\$</b>

**2c. Liabilities – Credit Cards, Other Debts, and Leases that You Owe**

Does not apply

**Only list liabilities that may not appear on your credit report.** Under Account Type, choose from the following: • Revolving (e.g., credit cards) • Installment (e.g., car, student, personal loans) • Open 30-Day (balance paid monthly) • Lease (not real estate) • Other

Account Type – use list above	Company Name	Account Number	Unpaid Balance <small>To be paid off at or before closing</small>	Monthly Payment
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$

**Section 3: Financial Information — Real Estate.** This section asks you to list all properties you currently own and what you owe on them.

**3a. Property You Own**

Address Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Property Value	Status: Sold, Pending Sale, or Retained	Intended Occupancy: Investment, Primary Residence, Second Home, Other	Monthly Insurance, Taxes, Association Dues, etc. <i>if not included in Monthly Mortgage Payment</i>	For 2-4 Unit Primary or Investment Property	
				Monthly Rental Income	For LENDER to calculate: Net Monthly Rental Income
\$ _____			\$ _____	\$ _____	\$ _____

Mortgage Loans on this Property  Does not apply

Creditor Name	Account Number	Monthly Mortgage Payment	Unpaid Balance	<i>To be paid off at or before closing</i>	Type: FHA, VA, Conventional, USDA-RD, Other	Credit Limit <i>(if applicable)</i>
		\$ _____	\$ _____	<input type="checkbox"/>		\$ _____
		\$ _____	\$ _____	<input type="checkbox"/>		\$ _____

**3b. IF APPLICABLE, Complete Information for Additional Property**  Does not apply

Address Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Property Value	Status: Sold, Pending Sale, or Retained	Intended Occupancy: Investment, Primary Residence, Second Home, Other	Monthly Insurance, Taxes, Association Dues, etc. <i>if not included in Monthly Mortgage Payment</i>	For 2-4 Unit Primary or Investment Property	
				Monthly Rental Income	For LENDER to calculate: Net Monthly Rental Income
\$ _____			\$ _____	\$ _____	\$ _____

Mortgage Loans on this Property  Does not apply

Creditor Name	Account Number	Monthly Mortgage Payment	Unpaid Balance	<i>To be paid off at or before closing</i>	Type: FHA, VA, Conventional, USDA-RD, Other	Credit Limit <i>(if applicable)</i>
		\$ _____	\$ _____	<input type="checkbox"/>		\$ _____
		\$ _____	\$ _____	<input type="checkbox"/>		\$ _____

**3c. IF APPLICABLE, Complete Information for Additional Property**  Does not apply

Address Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Property Value	Status: Sold, Pending Sale, or Retained	Intended Occupancy: Investment, Primary Residence, Second Home, Other	Monthly Insurance, Taxes, Association Dues, etc. <i>if not included in Monthly Mortgage Payment</i>	For 2-4 Unit Primary or Investment Property	
				Monthly Rental Income	For LENDER to calculate: Net Monthly Rental Income
\$ _____			\$ _____	\$ _____	\$ _____

Mortgage Loans on this Property  Does not apply

Creditor Name	Account Number	Monthly Mortgage Payment	Unpaid Balance	<i>To be paid off at or before closing</i>	Type: FHA, VA, Conventional, USDA-RD, Other	Credit Limit <i>(if applicable)</i>
		\$ _____	\$ _____	<input type="checkbox"/>		\$ _____
		\$ _____	\$ _____	<input type="checkbox"/>		\$ _____

**Section 4: Loan and Property Information.** This section asks about the loan's purpose and the property you want EMAP assistance.

**4a. Loan and Property Information**

Loan Amount \$ \_\_\_\_\_

Loan Purpose \_\_\_\_\_  Mortgage  Refinance  Other *EMAP Loan*

Property Address Street \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ County \_\_\_\_\_

Number of Units \_\_\_\_\_ Property Value \$ \_\_\_\_\_

Occupancy  Primary Residence  Second Home  Investment Property  FHA Secondary Residence

**1. Mixed-Use Property.** If you will occupy the property, will you set aside space within the property to operate your own business? (e.g., daycare facility, medical office, beauty/barber shop)  NO  YES

**2. Manufactured Home.** Is the property a manufactured home? (e.g., a factory built dwelling built on a permanent chassis)  NO  YES

**4b. Other Mortgage Loans on the Property**

Does not apply

Creditor Name	Lien Type	Monthly Payment	Loan Amount/ Amount to be Drawn	Credit Limit (if applicable)
	<input type="radio"/> First Lien <input type="radio"/> Subordinate Lien	\$ _____	\$ _____	\$ _____
	<input type="radio"/> First Lien <input type="radio"/> Subordinate Lien	\$ _____	\$ _____	\$ _____

**4c. Rental Income on the Property**

Complete if the property is a 2-4 Unit Primary Residence or an Investment Property	Amount
Monthly Rental Income	\$ _____
<b>For LENDER to calculate:</b> Expected Net Monthly Rental Income	\$ _____

**Section 5: Declarations.** This section asks you specific questions about the property, your funding, and your past financial history.

**5a. About this Property and Your Money for this Loan**

<p><b>A.</b> Will you occupy the property as your primary residence?          If YES, have you had an ownership interest in another property in the last three years?          If YES, complete (1) and (2) below:          (1) What type of property did you own: primary residence (PR), FHA secondary residence (SR), second home (SH), or investment property (IP)?          (2) How did you hold title to the property: by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES  <input type="radio"/> NO    <input type="radio"/> YES          _____          _____</p>
<p><b>B.</b> If this is a Purchase Transaction: Do you have a family relationship or business affiliation with the seller of the property?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>C.</b> Are you borrowing any money for this real estate transaction (e.g., money for your closing costs or down payment) or obtaining any money from another party, such as the seller or realtor, that you have not disclosed on this loan application? If YES, what is the amount of this money?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES          \$ _____</p>
<p><b>D.</b> 1. Have you or will you be applying for a mortgage loan on another property (not the property securing this loan) on or before closing this transaction that is not disclosed on this loan application?          2. Have you or will you be applying for any new credit (e.g., installment loan, credit card, etc.) on or before closing this loan that is not disclosed on this application?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES  <input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>E.</b> Will this property be subject to a lien that could take priority over the first mortgage lien, such as a clean energy lien paid through your property taxes (e.g., the Property Assessed Clean Energy Program)?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>

**5b. About Your Finances**

<p><b>F.</b> Are you a co-signer or guarantor on any debt or loan that is not disclosed on this application?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>G.</b> Are there any outstanding judgments against you?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>H.</b> Are you currently delinquent or in default on a Federal debt?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>I.</b> Are you a party to a lawsuit in which you potentially have any personal financial liability?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>J.</b> Have you conveyed title to any property in lieu of foreclosure in the past 7 years?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>K.</b> Within the past 7 years, have you completed a pre-foreclosure sale or short sale, whereby the property was sold to a third party and the Lender agreed to accept less than the outstanding mortgage balance due?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>L.</b> Have you had property foreclosed upon in the last 7 years?</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>
<p><b>M.</b> Have you declared bankruptcy within the past 7 years?          If YES, identify the type(s) of bankruptcy:      Chapter 7      Chapter 11      Chapter 12      Chapter 13</p>	<p><input type="radio"/> NO    <input type="radio"/> YES</p>

**Section 6: Acknowledgments and Agreements.** This section tells you about your legal obligations when you sign this application.

**Acknowledgments and Agreements**

**Definitions:**

- "Lender" includes the Lender's agents, service providers, and any of their successors and assigns.
- "Other Loan Participants" includes (i) any actual or potential owners of a loan resulting from this application (the "Loan"), (ii) acquirers of any beneficial or other interest in the Loan, (iii) any mortgage insurer, (iv) any guarantor, (v) any servicer of the Loan, and (vi) any of these parties' service providers, successors or assigns.

**I agree to, acknowledge, and represent the following:**

**(1) The Complete Information for this Application**

- The information I have provided in this application is true, accurate, and complete as of the date I signed this application.
- If the information I submitted changes or I have new information before closing of the Loan, I must change and supplement this application, including providing any updated/supplemented real estate sales contract.
- For purchase transactions: The terms and conditions of any real estate sales contract signed by me in connection with this application are true, accurate, and complete to the best of my knowledge and belief. I have not entered into any other agreement, written or oral, in connection with this real estate transaction.
- The Lender and Other Loan Participants may rely on the information contained in the application before and after closing of the Loan.
- Any intentional or negligent misrepresentation of information may result in the imposition of:
  - (a) civil liability on me, including monetary damages, if a person suffers any loss because the person relied on any misrepresentation that I have made on this application, and/or
  - (b) criminal penalties on me including, but not limited to, fine or imprisonment or both under the provisions of Federal law (18 U.S.C. §§ 1001 *et seq.*).

**(2) The Property's Security**

The Loan I have applied for in this application will be secured by a mortgage or deed of trust which provides the Lender a security interest in the property described in this application.

**(3) The Property's Appraisal, Value, and Condition**

- Any appraisal or value of the property obtained by the Lender is for use by the Lender and Other Loan Participants.
- The Lender and Other Loan Participants have not made any representation or warranty, express or implied, to me about the property, its condition, or its value.

**(4) Electronic Records and Signatures**

- The Lender and Other Loan Participants may keep any paper record and/or electronic record of this application, whether or not the Loan is approved.

- If this application is created as (or converted into) an "electronic application", I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable Federal and/or state electronic transactions laws.
- I intend to sign and have signed this application either using my:
  - (a) electronic signature; or
  - (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.
- I agree that the application, if delivered or transmitted to the Lender or Other Loan Participants as an electronic record with my electronic signature, will be as effective and enforceable as a paper application signed by me in writing.

**(5) Delinquency**

- The Lender and Other Loan Participants may report information about my account to credit bureaus. Late payments, missed payments, or other defaults on my account may be reflected in my credit report and will likely affect my credit score.
- If I have trouble making my payments I understand that I may contact a HUD-approved housing counseling organization for advice about actions I can take to meet my mortgage obligations.

**(6) Authorization for Use and Sharing of Information**

- By signing below, in addition to the representations and agreements made above, I expressly authorize the Lender and Other Loan Participants to obtain, use, and share with each other (i) the loan application and related loan information and documentation, (ii) a consumer credit report on me, and (iii) my tax return information, as necessary to perform the actions listed below, for so long as they have an interest in my loan or its servicing:
- (a) process and underwrite my loan;
  - (b) verify any data contained in my consumer credit report, my loan application and other information supporting my loan application;
  - (c) inform credit and investment decisions by the Lender and Other Loan Participants;
  - (d) perform audit, quality control, and legal compliance analysis and reviews;
  - (e) perform analysis and modeling for risk assessments;
  - (f) monitor the account for this loan for potential delinquencies and determine any assistance that may be available to me; and
  - (g) other actions permissible under applicable law.

**Borrower Signature** \_\_\_\_\_ **Date (mm/dd/yyyy)** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Additional Borrower Signature** \_\_\_\_\_ **Date (mm/dd/yyyy)** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Section 7: Demographic Information.** This section asks about your ethnicity, sex, and race.

**Demographic Information of Borrower**

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." **The law provides that we may not discriminate** on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

**Ethnicity:** *Check one or more*

- Hispanic or Latino
  - Mexican
  - Puerto Rican
  - Cuban
  - Other Hispanic or Latino – *Print origin:* \_\_\_\_\_

*For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.*

- Not Hispanic or Latino
- I do not wish to provide this information

**Sex**

- Female
- Male
- I do not wish to provide this information

**Race:** *Check one or more*

- American Indian or Alaska Native – *Print name of enrolled or principal tribe:* \_\_\_\_\_
- Asian
  - Asian Indian
  - Chinese
  - Filipino
  - Japanese
  - Korean
  - Vietnamese
  - Other Asian – *Print race:* \_\_\_\_\_

*For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.*

- Black or African American
- Native Hawaiian or Other Pacific Islander
  - Native Hawaiian
  - Guamanian or Chamorro
  - Samoan
  - Other Pacific Islander – *Print race:* \_\_\_\_\_

*For example: Fijian, Tongan, and so on.*

- White
- I do not wish to provide this information

**To Be Completed by Financial Institution (for application taken in person):**

- Was the ethnicity of the Borrower collected on the basis of visual observation or surname?     NO     YES
- Was the sex of the Borrower collected on the basis of visual observation or surname?     NO     YES
- Was the race of the Borrower collected on the basis of visual observation or surname?     NO     YES

**The Demographic Information was provided through:**

- Face-to-Face Interview (*includes Electronic Media w/ Video Component*)
- Telephone Interview
- Fax or Mail
- Email or Internet





# Emergency Mortgage Assistance Program

## CERTIFICATION OF ALL ASSETS

**A. Borrower(s) Information**

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

Co-Borrower Name: \_\_\_\_\_

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

**B. List all Assets for all household members age 18+ (no fulltime students) below:**

<u>Name(s) on Account</u>	<u>Bank Name/Depository</u>	<u>Account #</u>	<u>Balance</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<u>Stocks</u>	<u>Type</u>	<u># of Shares</u>	<u>Value</u>
_____	_____	_____	_____

<u>Savings Bonds</u>	<u>Value</u>
_____	_____

<u>401K/Retirement</u>	<u>Value</u>
_____	_____

**C. Borrower(s) Acknowledgement and Certification**

The undersigned acknowledges that the asset information contained in Section B. (Summary of Assets) is true and complete. False statements made herein are punishable under the Penalty for False Statement set out in Connecticut General Statutes Section 53A-157b. **Failure to disclose all assets may result in denial of your EMAP application.**

\_\_\_\_\_  
*Borrower*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Co-Borrower*

\_\_\_\_\_  
*Date*

## Emergency Mortgage Assistance Program

### **BORROWER CERTIFICATE**

I, (We) \_\_\_\_\_ and \_\_\_\_\_  
(Type or print name) (Type or print name)

hereinafter “Borrower”, (a term used throughout this certificate in the plural but construed to be singular if there is only one borrower), as an essential part of the closing of a mortgage loan pursuant to the Emergency Mortgage Assistance Program (EMAP) of the Connecticut Housing Finance Authority (the “Authority”) to finance a mortgage on an eligible property (the “residence/subject property”) and with knowledge that the Authority will rely on the statements contained herein, do hereby certify:

1. I (We) reside at: \_\_\_\_\_,  
the residence/subject property which will be used as security for this mortgage loan.

2. The residence/subject property is a dwelling suitable for occupancy by  
only one family. Yes \_\_\_ No \_\_\_

[IF THE ANSWER TO PARAGRAPH 2 IS NO, COMPLETE PARAGRAPH 2b.]

2b. The residence/subject property contains separate residential units suitable for occupancy  
by \_\_\_\_\_ (number) families.

3. The undersigned Borrowers currently occupy the residence/subject property as their primary principal residence.

4. The undersigned Borrowers do not currently use or intend to use the residence/subject property as a vacation or second home.

5. The undersigned Borrowers do not currently use or intend to use the residence/subject property as an investment property.

6. No portion of the residence/subject property was specifically designed for commercial use.

7. The undersigned Borrowers have delivered copies of their most recent year Federal Income Tax returns including all schedules to these returns and have executed either IRS form 4506(C) or Request for Copy or Transcript or Tax Authorization form. To the best of the Borrowers’ knowledge, the tax return(s) are complete and accurate.

**NOTE:** A present ownership interest includes ordinary full ownership (fee simple), joint tenancy, tenancy in common or tenancy by the entirety, an interest held in trust for the Borrower that would constitute a present ownership interest if held directly by the Borrower. A present ownership interest does not include a remainder interest, an ordinary lease with or without a purchase option or an expectancy to inherit.

8. The undersigned Borrowers understand that any transfer of possession or title of the residence/subject property may cause the entire balance of the loan to be declared due and payable. The Borrowers understand and agree that the mortgage is not assumable.

9 The undersigned Borrowers agree to notify the Authority in advance of any contemplated sale, rental or other transfer affecting the property.

10. The undersigned Borrowers further agree to notify the Authority immediately in the event they should vacate the property and to keep the Authority informed of their current mailing address.

11. The undersigned Borrowers further agree to notify the Authority of any change in their financial status and to cooperate fully with an annual recertification process required for continued participation in the Temporary Mortgage Assistance Program.

12. The following are all the members of the undersigned Borrowers' household who currently occupy the residence/subject property. **(please include the names of all household members):**

<u>Name</u>	<u>Relationship</u>	<u>Age</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

13. The undersigned Borrowers understand that, if approved, they will be required to complete the Financial Fitness counseling education class. This course must be completed prior to the EMAP closing.

14. The undersigned Borrower's understand that they will be required to disclose all assets for all household members age 18+ (except for those enrolled full time in school), including checking and savings accounts(s), 401K, stocks and bonds etc.

15. All of the information provided in this Borrower Certificate is true and complete to the best of the undersigned Borrowers' knowledge. The undersigned Borrowers understand that if the Borrowers knowingly make any false statement of any material fact or submit fraudulent evidence in connection with this Borrower Certificate, the loan is subject to becoming immediately due and payable.

16. All of the information, including any and all materials and documents provided in connection with this mortgage loan application, is true and complete to the best of the Borrowers' knowledge.

17. False statements made herein are punishable under the Penalty for False Statement set out in Connecticut General Statutes Section 53A-157b.

Date: \_\_\_\_\_  
Borrower Signature

Date: \_\_\_\_\_  
Co-Borrower Signature



Emergency Mortgage Assistance Program  
**OWNER-OCCUPANCY CERTIFICATION**

---

Borrower: \_\_\_\_\_

Co-Borrower: \_\_\_\_\_

Property: \_\_\_\_\_  
Street Address

\_\_\_\_\_ Town/City State Zip Code

By signing below, the borrower(s) certify and agree that the above indicated property is the permanent primary residence of the borrower(s) and will remain as such throughout the term of the EMAP mortgage loan.

\_\_\_\_\_  
Borrower Signature Date

\_\_\_\_\_  
Co-Borrower Signature Date

**Request for Transcript of Tax Return**

- ▶ Do not sign this form unless all applicable lines have been completed.
- ▶ Request may be rejected if the form is incomplete or illegible.
- ▶ For more information about Form 4506-T, visit [www.irs.gov/form4506t](http://www.irs.gov/form4506t).

**Tip: Get faster service:** Online at [www.irs.gov](http://www.irs.gov), **Get Your Tax Record** (Get Transcript) or by calling **1-800-908-9946** for specialized assistance. We have teams available to assist. **Note:** Taxpayers may register to use [Get Transcript](#) to view, print, or download the following transcript types: **Tax Return Transcript** (shows most line items including Adjusted Gross Income (AGI) from your original Form 1040-series tax return as filed, along with any forms and schedules), **Tax Account Transcript** (shows basic data such as return type, marital status, AGI, taxable income and all payment types), **Record of Account Transcript** (combines the tax return and tax account transcripts into one complete transcript), **Wage and Income Transcript** (shows data from information returns we receive such as Forms W-2, 1099, 1098 and Form 5498), and **Verification of Non-filing Letter** (provides proof that the IRS has no record of a filed Form 1040-series tax return for the year you request).

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
<b>2a</b> If a joint return, enter spouse's name shown on tax return.	<b>2b</b> Second social security number or individual taxpayer identification number if joint tax return
<b>3</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
<b>4</b> Previous address shown on the last return filed if different from line 3 (see instructions)	
<b>5</b> Customer file number (if applicable) (see instructions)	

**Note:** Effective July 2019, the IRS will mail tax transcript requests only to your address of record. See **What's New** under **Future Developments** on Page 2 for additional information.

**6 Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ \_\_\_\_\_

**a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .

**b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days . . . . .

**c Record of Account**, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days . . . . .

**7 Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . . . .

**8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days . . . . .

**Caution:** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**9 Year or period requested.** Enter the end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 transcript.

|   /   /   |   /   /   |   /   /   |   /   /   |

**Caution:** Do not sign this form unless all applicable lines have been completed.

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

**Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T.** See instructions. Phone number of taxpayer on line 1a or 2a

<b>Sign Here</b>		Date	
	Signature (see instructions)		
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	

Section references are to the Internal Revenue Code unless otherwise noted.

### Future Developments

For the latest information about Form 4506-T and its instructions, go to [www.irs.gov/form4506t](http://www.irs.gov/form4506t). Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

The filing location for the Form 4506-T has changed. **Please see Chart for individual transcripts or Chart for all other transcripts** for the correct mailing location.

**What's New.** As part of its ongoing efforts to protect taxpayer data, the Internal Revenue Service announced that in July 2019, it will stop all third-party mailings of requested transcripts. After this date masked Tax Transcripts will only be mailed to the taxpayer's address of record.

If a third-party is unable to accept a Tax Transcript mailed to the taxpayer, they may either contract with an existing IVES participant or become an IVES participant themselves. For additional information about the IVES program, go to [www.irs.gov](http://www.irs.gov) and search IVES.

### General Instructions

**Caution:** Do not sign this form unless all applicable lines have been completed.

**Purpose of form.** Use Form 4506-T to request tax return information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

**Note:** If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

**Customer File Number.** The transcripts provided by the IRS have been modified to protect taxpayers' privacy. Transcripts only display partial personal information, such as the last four digits of the taxpayer's Social Security Number. Full financial and tax information, such as wages and taxable income, are shown on the transcript.

An optional Customer File Number field is available to use when requesting a transcript. This number will print on the transcript. See Line 5 instructions for specific requirements. The customer file number is an optional field and not required.

**Tip.** Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

**Automated transcript request.** You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

**Where to file.** Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart shows two different addresses, send your request to the address based on the address of your most recent return.

**Line 1b.** Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

**Line 3.** Enter your current address. If you use a P.O. box, include it on this line.

**Line 4.** Enter the address shown on the last return filed if different from the address entered on line 3.

**Note:** If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.

**Line 5.** Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number **should not** contain an SSN. Completion of this line is not required.

**Note.** If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "999999999" on the transcript.

**Line 6.** Enter only one tax form number per request.

**Signature and date.** Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

**Individuals.** Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

**Corporations.** Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

**Partnerships.** Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

**All others.** See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

**Note:** If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

**Documentation.** For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

**Signature by a representative.** A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service  
Tax Forms and Publications Division  
1111 Constitution Ave. NW, IR-6526  
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.

### Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:	Mail or fax to:
Alabama, Arizona, Arkansas, Florida, Georgia, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301  855-587-9604
Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999  855-821-0094
Alaska, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, North Dakota, Ohio, Oregon, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409  855-298-1145

### Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409  855-298-1145
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999  855-821-0094



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.



### Consent to Pull Credit

We hereby give our consent to have the Connecticut Housing Finance Authority (CHFA) verify credit obligations and any credit related matters required in connection with our mortgage application.

This form may be reproduced, and that copy shall be as effective as the original consent form which we have signed.

---

Borrower's signature

---

Date

---

Co-Borrower's signature

---

Date

## EMERGENCY MORTGAGE ASSISTANCE PROGRAM (EMAP)

Median Income 2024						
County	Town	EMAP - Max Monthly Payment		County	Town	EMAP - Max Monthly Payment
Fairfield	Bethel	\$4,824.87		Litchfield	All Towns	\$3,730.53
	Bridgeport	\$3,825.27		Middlesex	Clinton	\$4,864.07
	Brookfield	\$4,824.87			Deep River	\$4,864.07
	Danbury	\$4,824.87			Essex	\$4,864.07
	Darien	\$5,896.33			Killingworth	\$4,864.07
	Easton	\$3,825.27			Old Saybrook	\$4,864.07
	Fairfield	\$3,825.27			Westbrook	\$4,864.07
	Greenwich	\$5,896.33			<b>All Other Towns</b>	\$3,978.80
	Monroe	\$3,825.27		New Haven	Ansonia	\$4,256.47
	New Canaan	\$5,896.33			Beacon Falls	\$4,256.47
	New Fairfield	\$4,824.87			Derby	\$4,256.47
	Newtown	\$4,824.87			Middlebury	\$2,992.27
	Norwalk	\$5,896.33			Milford	\$4,256.47
	Redding	\$4,824.87			Naugatuck	\$2,992.27
	Ridgefield	\$4,824.87			Oxford	\$4,256.47
	Sandy Hook	\$4,824.87			Prospect	\$2,992.27
	Shelton	\$3,825.27			Seymour	\$4,256.47
	Sherman	\$4,824.87			Southbury	\$4,256.47
	South Norwalk	\$5,896.33			Waterbury	\$2,992.27
	Stamford	\$5,896.33			Wolcott	\$2,992.27
	Stratford	\$3,825.27			<b>All Other Towns</b>	\$3,792.60
	Trumbull	\$3,825.27		New London	Colchester	\$4,851.00
	Weston	\$5,896.33			Lebanon	\$4,851.00
	Westport	\$5,896.33			<b>All Other Towns</b>	\$3,495.33
	Wilton	\$5,896.33		Tolland	All Towns	\$3,978.80
Hartford	All Towns	\$3,978.80		Windham	All Towns	\$2,949.80

## Emergency Mortgage Assistance Program

### **FORECLOSURE PREVENTION HUD-APPROVED HOUSING COUNSELING AGENCIES**

---

**Bridgeport Neighborhood Trust, Inc.**

570 State Street – Bridgeport, CT 06604  
(203) 290-4255

**Capital For Change, Inc. (C4C)**

10 Alexander Drive – Wallingford, CT 06492  
(203) 624-7406

**Community Renewal Team, Inc. (CRT)**

330 Market Street – Hartford, CT 06120  
(860) 761-7937

**Mutual Housing Association of Greater Hartford, Inc.**

897 Park Street – Hartford, CT 06106  
(860) 206-5263

**Mutual Housing Association of South-Central CT, Inc. dba  
NeighborWorks® New Horizons**

235 Grand Avenue – New Haven, CT 06513  
(203) 562-4515

**Neighborhood Housing Services of New Britain, Inc.**

223 Broad Street – New Britain, CT 06053  
(860) 224-2433

**New Haven HomeOwnership Center, Inc.**

333 Sherman Avenue – New Haven, CT 06511  
(203) 777-6925

**Neighborhood Housing Services of Waterbury, Inc. dba Nest**

161 North Main Street – Waterbury, CT  
(203) 753-1896

**New London Homeless Hospitality Center**

234 State Street – New London, CT 06320  
(860) 501-9900

## **2024-2025 FORECLOSURE VOLUNTEER ATTORNEY PROGRAM**

THE FORECLOSURE VOLUNTEER ATTORNEY PROGRAM WILL BE HELD EVERY 1<sup>ST</sup> AND 3<sup>RD</sup> WEDNESDAY OF THE MONTH FROM 2:00 P.M. TO 4:00 P.M. (See schedule for specific dates)

***\*\*\*Please note that the schedule is subject to change due to the availability of volunteers, holidays, and inclement weather. TO CONFIRM THE PROGRAM SCHEDULE, PLEASE CALL 860-263-2734.\*\*\****

### **BRIDGEPORT SUPERIOR COURT**

**Where:** 1061 Main Street  
**Check-in:** Public Information Desk (1st Floor)

### **HARTFORD SUPERIOR COURT**

**Where:** 90 Washington Street (Family Court building)  
**Check-in:** Court Service Center

### **NEW BRITAIN SUPERIOR COURT**

**Where:** 20 Franklin Square  
**Check-in:** Court Service Center (2<sup>nd</sup> Floor)

### **NEW HAVEN SUPERIOR COURT**

**Where:** 235 Church Street  
**Check-in:** Court Service Center (1st Floor)

### **NEW LONDON SUPERIOR COURT**

**Where:** 70 Huntington Street  
**Check-in:** Public Information Desk (1st Floor)

### **STAMFORD SUPERIOR COURT**

**Where:** 123 Hoyt Street  
**Check-in:** Court Service Center (4th Floor)

### **WATERBURY SUPERIOR COURT**

**Where:** 300 Grand Street  
**Check-in:** Court Service Center (1st Floor)

#### **ALL LOCATIONS:**

#### **2024**

September 4, 18  
October 2, 16  
November 6, 20  
December 4, 18

#### **2025**

January 15  
February 5, 19  
March 5, 19  
April 2, 16  
May 7, 21  
June 4, 18  
July 2, 16  
August 6, 20

***Participants in the Foreclosure Volunteer Attorney Program are asked, whenever it is possible, to bring copies of any court orders or relevant paperwork they may want to talk about.***

Emergency Mortgage Assistance Program

**EMAP RETURN ADDRESS**

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*Please use the following address when returning your completed EMAP Application package and required documentation.*

---

**Connecticut Housing Finance Authority (CHFA)  
Attention: EMAP Department  
999 West Street  
Rocky Hill, CT 06067-4005**

---

MORTGAGE CRISIS  
**JOB TRAINING**  
PROGRAM



# ¿Está usted en indulgencia o atrasado en los pagos de su hipoteca?

¡Escanee aquí para obtener más información!



¡MEJORE SU POTENCIAL DE INGRESOS CON CAPACITACIÓN LABORAL Y SERVICIOS PROFESIONALES SIN COSTO!

Debe estar vencido en una hipoteca para su residencia principal en Connecticut.

Llamar **1-866-683-1682** o visitar **[workplace.org/mortgage-crisis-job-training-program](https://workplace.org/mortgage-crisis-job-training-program)**



*El Programa de capacitación laboral en crisis hipotecaria es una oportunidad en el lugar de trabajo en asociación con la Autoridad de Financiamiento de Vivienda de Connecticut (CHFA), Capital Workforce Partners y el sistema de fuerza laboral de Connecticut. Es un programa de igualdad de oportunidades y hay ayudas y servicios auxiliares disponibles a pedido para personas con discapacidades. Este proyecto [está siendo] [fue] apoyado, total o parcialmente, por el premio federal número SLFRP0128 otorgado al Estado de Connecticut por el Departamento del Tesoro de los EE. UU.*



MORTGAGE CRISIS  
**JOB TRAINING**  
PROGRAM



# Are you in Forbearance or behind on your Mortgage Payments?

Scan here for more information!



**IMPROVE YOUR EARNING POTENTIAL WITH NO-COST JOB TRAINING AND CAREER SERVICES!**

Must be past due on a mortgage for your primary residence in Connecticut.

Call 1-866-683-1682 or visit [workplace.org/mortgage-crisis-job-training-program](https://workplace.org/mortgage-crisis-job-training-program)



The Mortgage Crisis Job Training Program is a WorkPlace Opportunity in partnership with the Connecticut Housing Finance Authority (CHFA), Capital Workforce Partners, and Connecticut's workforce system. It is an equal opportunity program and auxiliary aids and services are available upon request to individuals with disabilities. This project [is being] [was] supported, in whole or in part, by federal award number SLFRP0128 awarded to the State of Connecticut by the U.S. Department of the Treasury.

# CHFA Privacy Policy

[www.chfa.org](http://www.chfa.org)

<b>FACTS</b>	<b>WHAT DOES CONNECTICUT HOUSING FINANCE AUTHORITY (CHFA) DO WITH YOUR PERSONAL INFORMATION?</b>
<b>Why?</b>	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
<b>What?</b>	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> <li>• Social Security number and income</li> <li>• Account balances and payment history</li> <li>• Transaction and assets</li> </ul> <p>When you are <i>no longer</i> our customer, we continue to share this information about you as described in this notice.</p>
<b>How?</b>	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons CHFA chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does CHFA share?	Can you limit this sharing?
<b>For our everyday business purposes</b> – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus.	<b>Yes</b>	<b>No</b>
<b>For our marketing purposes</b> – to offer our products and services to you	<b>No</b>	<b>No</b>
<b>For joint marketing with other financial companies</b>	<b>No</b>	<b>We don't share</b>
<b>For our affiliates' everyday business purposes</b> – information about your transactions and experiences	<b>No</b>	<b>We don't share</b>
<b>For our affiliates' everyday business purposes</b> – information about your creditworthiness	<b>No</b>	<b>We don't share</b>
<b>For our affiliates to market to you</b>	<b>No</b>	<b>We don't share</b>
<b>For non-affiliates to market to you</b>	<b>No</b>	<b>We don't share</b>

<b>Questions?</b>	Call 860-721-9501 or visit us online at <a href="http://www.chfa.org">www.chfa.org</a>
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## Who we are

Who is providing this notice?	Connecticut Housing Finance Authority (CHFA)
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## What we do

How does CHFA protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does CHFA collect my personal information?	<p>We collect personal information, for example, when you:</p> <ul style="list-style-type: none"> <li>· Give us your income information, apply for financing, provide account information, give us your contact information, provide your mortgage information</li> </ul> <p>We also collect your personal information from others, such as credit bureaus, affiliates or other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only:</p> <ul style="list-style-type: none"> <li>· Sharing for affiliates' everyday business purposes - information about your creditworthiness;</li> <li>· Affiliates from using your information to market to you;</li> <li>· Sharing for nonaffiliates to market to you.</li> </ul> <p>State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.</p>

## Definitions

Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> <li>· CHFA does not share with affiliates.</li> </ul>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> <li>· CHFA does not share with nonaffiliates to enable them to market to you.</li> </ul>
Joint Marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> <li>· CHFA does not joint market.</li> </ul>

## Other important information

State Laws	Connecticut Law may provide you additional rights to limit sharing.
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# Política de privacidad de la CHFA

## HECHOS

**¿QUÉ HACE LA AUTORIDAD FINANCIERA DE LA VIVIENDA DE CONNECTICUT (CHFA, por sus siglas en inglés) CON SU INFORMACIÓN PERSONAL?**

## ¿Por qué?

Las empresas financieras eligen la forma de intercambiar su información personal. Las leyes federales le otorgan a los consumidores el derecho de limitar una parte pero no todo el intercambio. Las leyes federales también nos exigen que le informemos cómo recopilamos, intercambiamos y protegemos su información personal. Lea cuidadosamente esta notificación para que comprenda qué es lo que hacemos.

## ¿Qué (hacemos)?

El tipo de información personal que recopilamos e intercambiamos depende del producto o servicio que usted tiene con nosotros. Esta información puede incluir:

- El número de la Seguridad Social y los ingresos
- Saldos de cuentas e historial de pagos
- Transacciones y activos

Cuando *ya no es* nuestro cliente, seguimos intercambiando esta información referente a usted como se describe en esta notificación.

## ¿Cómo (lo hacemos)?

Todas las empresas financieras necesitan intercambiar información personal de los clientes para llevar a cabo sus fines comerciales cotidianos. En la sección siguiente, enumeramos las razones por las que las empresas financieras pueden compartir la información personal de sus clientes; las razones por las que CHFA decide compartirla; y si usted puede limitar este intercambio.

Razones por las que podemos intercambiar su información personal.	¿La CHFA intercambia (información)?	¿Puede usted limitar el intercambio?
<b>Para nuestros fines comerciales cotidianos -</b> tales como procesar sus transacciones, mantener su(s) cuenta(s), responder a las órdenes del tribunal y a las investigaciones legales, o informar a las agencias crediticias.	<b>Sí</b>	<b>No</b>
<b>Para nuestros fines de comercialización -</b> para ofrecerle nuestros productos y servicios	<b>No</b>	<b>No</b>
<b>Para la comercialización conjunta con otras empresas financieras</b>	<b>No</b>	<b>No intercambiamos</b>
<b>Para los fines comerciales cotidianos de nuestros afiliados -</b> información sobre sus transacciones y experiencias	<b>No</b>	<b>No intercambiamos</b>
<b>Para los fines comerciales cotidianos de nuestros afiliados -</b> información sobre su capacidad crediticia	<b>No</b>	<b>No intercambiamos</b>
<b>Para que nuestros afiliados puedan comercializar con usted</b>	<b>No</b>	<b>No intercambiamos</b>
<b>Para que los no afiliados puedan comercializar con usted</b>	<b>No</b>	<b>No intercambiamos</b>

## ¿Tiene

Llame al 860--721-9501 o visítenos en línea en [www.@chfa.org](http://www.@chfa.org)

## ¿Quiénes somos?

¿Quién suministra esta notificación?	La Autoridad Financiera de Vivienda de Connecticut (CHFA)
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## ¿Qué hacemos?

¿Cómo protege la CHFA mi información personal?	Para proteger su información personal del acceso y uso no autorizados, usamos medidas de seguridad que cumplen con las leyes federales. Estas medidas incluyen la protección informática y la seguridad de los archivos y edificios.
¿Cómo recopila la CHFA mi información personal?	<p>Recopilamos información personal, por ejemplo:</p> <ul style="list-style-type: none"> <li>· Cuando usted no brinda información de sus ingresos, solicita financiamiento, proporciona información sobre sus cuentas, nos da su información de contacto, y proporciona información hipotecaria</li> </ul> <p>También recopilamos su información personal de otras personas, tales como las agencias crediticias, los afiliado y otras empresas.</p>
¿Por qué no puedo limitar todo el intercambio?	<p>Las leyes federales le otorgan el derecho de limitar solo:</p> <ul style="list-style-type: none"> <li>· El intercambio para los fines comerciales cotidianos de los afiliados - información sobre su capacidad crediticia;</li> <li>· Que los afiliados usen su información para comercializar con usted;</li> <li>· Que los no afiliados puedan comercializar con usted.</li> </ul> <p>Las leyes estatales y las empresas individuales pueden otorgarle derechos adicionales para limitar el intercambio. Vea, a continuación, más sobre sus derechos en virtud de las leyes estatales.</p>

## Definiciones

<b>Afiliados</b>	<p>Empresas relacionadas por propiedad o control común. Pueden ser empresas financieras o no financieras.</p> <ul style="list-style-type: none"> <li>· La CHFA no intercambia con los afiliados.</li> </ul>
<b>No afiliados</b>	<p>Empresas no relacionadas por propiedad o control común. Pueden ser empresas financieras o no financieras.</p> <ul style="list-style-type: none"> <li>· La CHFA no intercambia con los no afiliados para permitirles que comercialicen con usted.</li> </ul>
<b>Comercialización conjunta</b>	<p>Un acuerdo formal entre las empresas financieras no afiliadas que le comercializan juntas productos o servicios financieros a usted.</p> <ul style="list-style-type: none"> <li>· La CHFA no comercializa de forma conjunta.</li> </ul>

## Información importante adicional

<b>Leyes estatales</b>	Las leyes de Connecticut pueden otorgarle derechos adicionales para limitar el intercambio.
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