

Items Required for WISH Application

Workforce Initiative Subsidy for Homeownership (WISH)

Submit to Affordable Housing Clearinghouse (AHC):

- Completed WISH Application/intake form
- Signed Borrower Certification & Authorization form
- Copies of photo I.D. and social security card
- \$29 money order (fee may be subject to change) per applicant for credit report fee payable to Affordable Housing Clearinghouse
- For any household members over the age of 18:
 - If they do not have income, sign Certification of No Income
OR
 - If they do have income but are not on the loan application, provide the following: Pay stubs for the past 60 days, W-2 forms for the past 3 years, Signed Federal Tax Returns for the past 3 years, Bank Statement for past 3 months, Proof of Citizenship (Birth Certificate, Passport, Naturalization papers, Residency Card), photo I.D., and social security card
- Copies of *signed* federal tax returns for the last three years
- Copies of W-2 forms for the last three years
- Copies of paycheck stubs for the last two months plus documentation of other income (if self-employed, year-to-date profit and loss statement)
- Copies of first paycheck stub for the current year and the last paycheck stub for the previous year
- Copies of all bank statements for the last three months (include all pages)
- Copies of statements for 401k, retirement funds, stock certificates, life insurance (if applicable)
- Evidence of U.S. citizenship or permanent resident alien status
- Completed Uniform Residential Loan Application (Form 1003)

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- Letters of explanation for late payments or credit issues (if applicable)
- Contact information for landlord (two years minimum)
- Gift letter and supporting documentation (if applicable)
- Purchase agreement (needed when property is purchased)
- Homebuyer education certificate of completion
- Please mail your complete application package to:
**Affordable Housing Clearinghouse 23861 El Toro Rd.,
Suite 401, Lake Forest, CA 92630**

Or Email: housingcounselor@affordable-housing.org
Documents need to be submitted in PDF format and mail your money order

Note: Application fees, credit report fees, appraisal fees or other fees may be required by the first lender. Please check with your lender.

Workforce Initiative Subsidy for Homeownership (WISH) Intake Worksheet

APPLICANT INFORMATION

Borrower		Co-Borrower	
Name		Name	
Address		Address	
City, State, Zip		City, State, Zip	
Date of Birth		Date of Birth	
Home Number		Home Number	
Work Number		Work Number	
Social Security		Social Security	
Email		Email	

GROSS MONTHLY INCOME (include income for ALL persons in household)

	Borrower	Co-Borrower	Other Household Member	Other Household Member
Gross monthly income	\$	\$	\$	\$
Overtime	\$	\$	\$	\$
Bonuses	\$	\$	\$	\$
Commissions	\$	\$	\$	\$
Dividends/Interest	\$	\$	\$	\$
Alimony/Child Support	\$	\$	\$	\$
Unemployment	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
Other monthly income	\$	\$	\$	\$
TOTAL MONTHLY INCOME	\$	\$	\$	\$

PERSONS TO OCCUPY HOUSEHOLD (OTHER THAN APPLICANTS)

Name	Date of Birth	Relationship
TOTAL PERSONS IN HOUSEHOLD:		

Have you owned a home that was your principal residence in the last three years? Yes No

Are you a U.S. citizen? Yes No

Are you a permanent resident alien? Yes No

Have you attended a homebuyer seminar? Yes No

Are you currently working with a Realtor? Yes No

List areas in which you are interested in purchasing:

OFFICE USE ONLY

Qualifying Income
for Household Size:

Income qualifies



WISH Borrower Certification & Authorization

The undersigned certify the following:

1. I/We have applied for a mortgage loan from the Affordable Housing Clearinghouse. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the downpayment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that the Affordable Housing Clearinghouse or its partners, reserve the right to request additional information as needed throughout the loan process. This may include verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a mortgage loan from the Affordable Housing Clearinghouse. As part of the application process, Affordable Housing Clearinghouse or its partners, 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.
2. I/We authorize you to provide Affordable Housing Clearinghouse or its partners any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. Affordable Housing Clearinghouse or its partners may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to Affordable Housing Clearinghouse or its partners is greatly appreciated.

Borrower's Signature

Date

Social Security Number

Borrower's Signature

Date

Social Security Number



WISH PROGRAM

Certification of No Income

I, _____, do hereby certify that I do NOT receive income from any source. I understand sources of income include, but are not limited to, the following:

- | | | |
|----------------|-----------------------|--------------------|
| Alimony | Annuities | Union Benefits |
| AFDC | Worker's Compensation | Disability |
| Family Support | Retirement Funds | Education |
| Employment | Grants/Work Study | Income from Assets |
| Unemployment | Self -Employment | Pensions |
| Compensation | General Assistance | Social Security |
| Child Support | SSI | Union Benefits |

Inquiries may be made to verify statements herein. I also understand that false statements or omissions are grounds for disqualification.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on _____, 20____, at _____, California.

Signature

Date