

Georgia Department of Community Affairs
Community HOME Investment Program
DOWN PAYMENT ASSISTANCE ACTIVITY SET UP FORM

Check the appropriate box: <input type="checkbox"/> Original Submission <input type="checkbox"/> Change Owner's Address <input type="checkbox"/> Revision <input type="checkbox"/> Cancelled	Name and Phone Number of Person Completing Form:
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A. General Information

1. Name of State Recipient/Sub-recipient:	2. DCA Project Number:	3. Activity Name: Down Payment Assistance
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B. Activity Information

1. Activity Type (enter code): _____ Choose "3" for "Acquisition Only" if the home buyer will be purchasing a unit that received an initial certificate of occupancy at least 13 months before the scheduled loan closing. Choose "5" for "Acquisition & New Construction" if the home buyer will be purchasing a unit that received an initial certificate of occupancy within the past 12 months prior to the scheduled loan closing.			
2. Home Buyer's Name(s):	3. Street:		
4. City:	5. State:	6. Zip Code:	7. County Code:
Activity Estimates: 8. HOME Units: <u>1</u> 9. HOME Cost: \$		10. Multi-Address (Y/N)? <u>N</u>	11. Loan Guarantee (Y/N)? <u>N</u>

C. CHDO Questions (Only if applicable)

1. Is funding limited to CHDO Operating (CO) or CHDO Capacity Building (CC) (Y/N)? <u>N</u> If Yes, STOP. DO NOT FILL OUT THIS FORM)	2. Will activity be funded with CR (Y/N)? <u>N</u> If yes, CHDO Acting as (enter code) _____ (1) Owner (2) Sponsor (3) Developer
3. Will initial funding be a CHDO Site Control and/or Seed Money Loan (Y/N)? <u>N</u> (If yes, answer Item 4)	4. Is the activity going forward? (Y/N): <u>N/A</u> (if "Y", fill out the rest of the form. If "N", only the cost information is needed)

D. Objective and Outcome

1. Objective (enter code): <u>2</u> (1) Create suitable living environments (2) Provide decent affordable housing (3) Create economic opportunities	2. Outcome (enter code): <u>2</u> (1) Availability/accessibility (2) Affordability (3) Sustainability
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of Bdrms

- 0 – SRO/Efficiency
- 1 – 1 bedroom
- 2 – 2 bedrooms
- 3 – 3 bedrooms
- 4 – 4 bedrooms
- 5 – 5 or more bedrooms

Occupant

- 1 – Tenant
- 2 – Owner
- 9 – Vacant Unit

Household % Med

- 1 – 0 to 30%
- 2 – 30+ to 50%
- 3 – 50+ to 60%
- 4 – 60+ to 80%

Race of Head of Household

- 11 – white
- 12 – Black/African American
- 13 – Asian
- 14 – American Indian/Alaska Native
- 15 – Native Hawaiian/Other Pacific Islander
- 16 – American Indian/Alaska Native & White
- 17 – Asian & White
- 18 – Black/African American & White
- 19 – American Indian/Alaska Native & Black/African American
- 20 – Other Multi Racial

Household Size

- 1 – 1 person
- 2 – 2 persons
- 3 – 3 persons
- 4 – 4 persons
- 5 – 5 persons
- 6 – 6 persons
- 7 – 7 persons
- 8 – 8 or more persons

Household Type

- 1 – Single, non-elderly
- 2 – Elderly
- 3 – Single parent
- 4 – Two parents
- 5 – Other

Assistance Type

- 1 – Section 8
- 2 – HOME TBRA
- 3 – Other federal, state or local assistance
- 4 – No assistance