

SUMMIT



COMBINED
HOUSING AUTHORITY

**Summit Combined Housing Authority
Division of Housing (DOH)
Down Payment Assistance Program
Income Certification Form @ 2011 HUD Low Income**

_____, (name of lender) is the First Trust Lender for
_____, loan applicant(s). We have verified the annual income
of the applicant and certify that, to the best of our knowledge, the applicant does not exceed the annual
income limits for the program which are as follows:

Circle appropriate family size

Family size 1	Annual income not to exceed	\$44,950
Family size 2	Annual income not to exceed	\$51,400
Family size 3	Annual income not to exceed	\$57,800
Family size 4	Annual income not to exceed	\$64,200
Family size 5	Annual income not to exceed	\$69,350
Family size 6	Annual income not to exceed	\$74,500
Family size 7	Annual income not to exceed	\$79,650
Family size 8+	Annual income not to exceed	\$84,750

- TOTAL VERIFIED ANNUAL HOUSEHOLD INCOME: \$ _____
- TOTAL VERIFIED HOUSEHOLD ASSETS (Cash): \$ _____
- TOTAL FUNDS NEEDED TO CLOSE: \$ _____
- TOTAL FUNDS AVAILABLE TO CLOSE: \$ _____
- TOTAL CASH ON HAND AFTER SETTLEMENT \$ _____
- APPRAISED VALUE \$ _____

AMOUNT OF ASSISTANCE REQUIRED: \$ _____

Signed this _____ day of _____, 20____.

Printed Name

Title

Lender Address and Telephone Number:

