

SUMMIT



COMBINED  
HOUSING AUTHORITY

**DOWN PAYMENT ASSISTANCE  
APPLICANT CLOSING INFORMATION**

Amount of Second Deed of Trust Requested \$ \_\_\_\_\_

How Borrower(s) will hold Title to Property (Name and Tenancy):  
\_\_\_\_\_

Borrower's SS# \_\_\_\_\_ Co- Borrower's SS# \_\_\_\_\_

Number in Household \_\_\_\_\_ Total Gross Income \_\_\_\_\_

Debt Servicing Ratio of Borrower (% of monthly income applied toward mortgage loan) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Address of Property Purchasing: (full street address including zip code)  
\_\_\_\_\_

Lender \_\_\_\_\_ 1<sup>st</sup> DOT Interest Rate \_\_\_\_\_

Amount of 1<sup>st</sup> DOT \$ \_\_\_\_\_ Loan Type \_\_\_\_\_ 1<sup>st</sup> payment due date \_\_\_\_\_

Title Company \_\_\_\_\_ Title No. \_\_\_\_\_

Title Phone # \_\_\_\_\_ Closing date \_\_\_\_\_

Time of Closing \_\_\_\_\_ Location of Title Co. \_\_\_\_\_

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***ATTACHMENTS TO CLOSING INFORMATION:***

- Copy of underwriting criteria for loan*
- Copy of summary pages of property appraisal (if not completed OK to send later)*



Equal Opportunity  
Housing