



Housing and Community Development
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jamescitycountyva.gov

Greetings Future Homebuyer:

Thank you for your interest in the James City County First-time Homebuyer program. The Office of Housing and Community Development is pleased to offer eligible First-time Homebuyers affordable homes, down payment and closing cost assistance, and low-interest rate financing. Eligibility is based on household size, income and funding availability.

Currently, low-interest loans from VHDA's Community Homeownership Revitalization Program (CHRP) are available for purchases in Ironbound Square, Chestnut Grove, Liberty Crossing and Village at Candle Station. CHRP funds provide permanent financing at an interest rate of 1/2% below VHDA's prevailing rate. Also, down payment assistance is available through the HOME funds program. For more information on the HOME program, visit <http://www.hrpdcva.gov/departments/housing/hampton-roads-loan-fund-partnership>. These programs require that participants be a first-time homebuyer (a buyer who has not owned a home in the last three years), have incomes within set limits, have acceptable credit and meet other requirements.

Your credit score should be at least 620 and your credit report should not show unpaid collections or past due accounts. You will also be required to pay at least \$3,000 toward the purchase. Also, you are required to obtain a Certificate of Participation in a VHDA Homebuyer Education class. You may register for the class at vhda.com/freeclass.

Attached you will find the First-time Homebuyers' application. Please return the completed application to our office. If we determine that you appear to qualify, we will request to meet with you. You will need to bring to the meeting, the completed Spending Plan (attached), copies of two months of current pay stubs and verification of any other income, two years of tax returns and two most recent bank account statements.

We look forward to receiving your application.

Sincerely,

First-time Homebuyer Team



First-Time Homebuyer Program

>> Homebuyer Information

Name _____

Street Address _____

City, State, Zip Code _____

Phone Numbers: Home _____

Work _____ Cell _____

Email Address _____

Social Security Number _____

Birth Date _____ Age _____

For Statistical Purposes Only

Marital Status: Single Separated
 Married Divorced
 Widowed

Ethnicity: Hispanic

Race: Black/African American
 American Indian/Alaska Native White
 Native Hawaiian/Other Pacific Islander
 Asian Other _____

Sex: Female Male

Veteran: Yes No

Handicapped Accessibility Required: Yes No

English Proficient: Yes No

Have you owned a home within the last three (3) years?
 Yes No

Current Housing Arrangement:
 Renting Monthly rent \$ _____
 Living with others Mobile home

Education: College Graduate school
 High school/GED None
 Primary Vocational

>> Co-Homebuyer Information

Name _____

Street Address _____

City, State, Zip Code _____

Phone Numbers: Home _____

Work _____ Cell _____

Email Address _____

Social Security Number _____

Birth Date _____ Age _____

For Statistical Purposes Only

Marital Status: Single Separated
 Married Divorced
 Widowed

Ethnicity: Hispanic

Race: Black/African American
 American Indian/Alaska Native White
 Native Hawaiian/Other Pacific Islander
 Asian Other _____

Sex: Female Male

Veteran: Yes No

Handicapped Accessibility Required: Yes No

English Proficient: Yes No

Have you owned a home within the last three (3) years?
 Yes No

Current Housing Arrangement:
 Renting Monthly rent \$ _____
 Living with others Mobile home

Education: College Graduate school
 High school/GED None
 Primary Vocational



>> Other Household Members (include *everyone* who will be living in your household, excluding the Homebuyer & Co-Homebuyer)

Name of other household members (Last, First, M)	Relationship	Age	Legal dependent living in house at least 50% of the time?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

>> Employment Income (For household members *age 18 or older*, list income including gross earnings from full-time, part-time, seasonal and/or temporary employment.) Please submit copies of two months of current paystubs and any other income.

Homebuyer's Employment

Name of household member employed:		
Name of Employer:		Employer Phone Number:
Employer Address:		
Employment Start Date:	Title/Position:	
Employment Status: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary		
Gross Earnings (before withholding): \$	Per: <input type="checkbox"/> Week <input type="checkbox"/> Every other week <input type="checkbox"/> Twice a month <input type="checkbox"/> Month <input type="checkbox"/> Year	
Hourly Rate: \$	Regular hours worked per week:	Overtime hours worked per week:

Previous Employment

(If employed in current position for less than two (2) years, please complete the following for previous employment.)

Name of household member employed:		
Name of Employer:		Employer Phone Number:
Employer Address:		
Employment Start Date:	Title/Position:	
Employment Status: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary		
Gross Earnings (before withholding): \$	Per: <input type="checkbox"/> Week <input type="checkbox"/> Every other week <input type="checkbox"/> Twice a month <input type="checkbox"/> Month <input type="checkbox"/> Year	
Hourly Rate: \$	Regular hours worked per week:	Overtime hours worked per week:

Co-Homebuyer's Employment

Name of household member employed:		
Name of Employer:		Employer Phone Number:
Employer Address:		
Employment Start Date:	Title/Position:	
Employment Status: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary		
Gross Earnings (before withholding): \$	Per: <input type="checkbox"/> Week <input type="checkbox"/> Every other week <input type="checkbox"/> Twice a month <input type="checkbox"/> Month <input type="checkbox"/> Year	
Hourly Rate: \$	Regular hours worked per week:	Overtime hours worked per week:



Previous Employment

(If employed in current position for less than two (2) years, please complete the following for previous employment.)

Name of household member employed:		
Name of Employer:	Employer Phone Number:	
Employer Address:		
Employment Start Date:	Title/Position:	
Employment Status: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary		
Gross Earnings (before withholding): \$	Per: <input type="checkbox"/> Week <input type="checkbox"/> Every other week <input type="checkbox"/> Twice a month <input type="checkbox"/> Month <input type="checkbox"/> Year	
Hourly Rate: \$	Regular hours worked per week:	Overtime hours worked per week:

>> **Additional Income** (Report *all other sources* for *all household members*. Check “YES” or “NO” for each income source listed below. Provide the amount gross income received and name of household member(s) receiving the income for each source checked “YES.”)

Source of Income	Yes	No	Amount of gross income received from income source	Name of household member(s) receiving source of income
Self-Employment Income	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Military Pay	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Child Support Income	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Alimony Income	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Social Security Income (SSA/SSI)	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Veteran’s Administration Income	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Pension/Annuity/Retirement Income	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	
Unemployment Income or any other income not mentioned	<input type="checkbox"/>	<input type="checkbox"/>	\$ per	

>> **Accounts** (List *all accounts* of *all household members*. Check “YES” or “NO” for each asset listed below. Provide name of bank, financial institution, etc., asset value and name of household member(s) the asset belongs to each type checked “YES.”)

Type of Accounts	Yes	No	Name of Financial Institution	Approximate Current Balance
Checking Account(s)	<input type="checkbox"/>	<input type="checkbox"/>		\$
Savings Account(s)	<input type="checkbox"/>	<input type="checkbox"/>		\$
Other (CD, IRA)	<input type="checkbox"/>	<input type="checkbox"/>		\$

>> **Debt Obligations** (List *all debts* of *both applicants*. Provide name of bank, creditor, etc.)

Type of Accounts	Name of Financial Institution	Debt Obligations
		\$
		\$
		\$
		\$



>> Additional Information

Has Homebuyer and Co-homebuyer attended a VHDA-sponsored homeownership class and received the certificate?

Yes No

Referred to the Office of Housing and Community Development (OHCD) by Print Advertisement Television Radio

Walk-In VHDA HUD Friend/Relative/Co-Worker

Financial Institution (specify) _____

>> Homebuyer and Co-Homebuyer Certification and Authorization

I/We do hereby certify that the foregoing information is complete and correct to the best of my/our knowledge and have submitted such information voluntarily.

I/We do hereby authorize the James City County (JCC) Office of Housing to obtain and review a copy of my Consumer Credit Report(s) for the purpose of: (1) Credit Counseling (if needed); (2) informational inquiry purposes; and (3) program eligibility. I/We understand that a more extensive report may be required by a lender prior to final loan approval.

I/We do hereby authorize the JCC Office of Housing to (1) share pertinent information with any party/parties involved in any potential real estate transaction; and (2) obtain a copy of the HUD-1 Settlement Statement, when I/we purchase a home, from the lender or the settlement agent. I/We hereby authorize my real estate agent, lender, title company, or settlement agent to provide to the OHCD any requested property, credit/loan, or closing documentation.

I/We do hereby authorize the Office of Housing to share information with Virginia Cooperative Extension, for purposes of credit counseling.

I/we do hereby authorize the JCC office of Housing to share information with Virginia Housing Development Authority (VHDA) and Housing and Urban Development (HUD) for the purpose of file review to verify program compliance.

Disclosure Form

I understand that James City County Office of Housing and Community Development (OHCD) provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from James City County Office of Housing and Community Development (OHCD) in no way obligates me to choose any of these loan product or housing programs.

Homebuyer Signature _____ Date _____

Co-Homebuyer Signature _____ Date _____



Please check all areas where you would consider buying.

- Lower County:** between Newport News and Williamsburg (includes Grove).
- Mid-County:** between Williamsburg and Centerville Road (includes Ironbound, Centerville, Lightfoot).
- Upper County:** between Centerville Road and New Kent County (includes Norge and Toano).

Please check the number of bedrooms and bathrooms you require.

Bedrooms 1 2 3 4.

Bathrooms 1 1½ 2 2½

Please check the features you most want in a home and neighborhood.

1-Story 2-Story

Single-Family Townhouse/Duplex/Condo

Separate Dining Room Eat-in Kitchen

Den Laundry Room Exterior Storage (Shed)

Deck Front Porch

Central Air Conditioning Gas Heat Energy Efficient Construction

On-Street Parking Private Driveway Sidewalks

Within walking distance of:

Stores School Playground Public Transit Bus Stop

List other features important to you in a home and neighborhood:



HOUSEHOLD SPENDING PLAN

Indicate # of people in household:

Adults _____ Children _____

FLEXIBLE EXPENSES

		NOW	W/HOUSE			
<u>NET MONTHLY INCOME</u>				Savings		
		NOW	W/HOUSE	Groceries		
Source 1				Lunch (work/school)		
Source 2				Eating Out		
Other Income				Entertainment/Hobbies		
Total Income [A]				Laundry/Drycleaning		
				Cleaning Supplies		
<u>FIXED EXPENSES</u>				Clothing		
		NOW	W/HOUSE	Gasoline/Bus/Taxi		
Rent/Mortgage				Newspaper/Magazines		
Electric				Alcohol/Cigarettes		
Gas/Oil				Church/Charity		
Water/Sewer				Tuition/Books		
Home Phone				Barber/Beauty Shop		
Cell Phone				Auto Maintenance		
Internet service				House Maintenance		
Trash pickup				Doctor/Dentist		
Cable				Pets		
Medical Insurance				Parking/Tolls		
Auto Insurance				Lottery/Bingo		
Life Insurance				Other		
Renters Insurance				Total Flexible [D]		
Child Support/Alimony						
Child Care						
Homeowners Assoc. fee				<u>EXPENSES</u>		
Other						
Total Fixed [B]				FIXED [B]		
				DEBT [C]		
<u>DEBT PAYMENTS</u>				FLEXIBLE [D]		
		NOW	W/HOUSE	TOTAL EXPENSES [E]		
Installment Loans						
Automobile Loan						
Credit Card Payments				Subtract Expenses from Income (A - E):		
				TOTAL INCOME (A)		
				TOTAL EXPENSES (E)		
Total Debt [C]				DIFFERENCE + or -		

Note: If you have accounted for all your expenses, including savings, your difference should be **\$0.00**. If you come up with a positive number, you may want to consider allocating the extra money toward your debt and/or savings. If you come up with a negative number, you are spending more than you make. Review the budget thoroughly to examine where you can trim your expenses.

Applicant Signature _____

Applicant Signature _____

CERTIFICATION: I hereby certify that I have reviewed the above budget with the applicant(s) and concur that it is reasonable.

Lender or Counselor Signature: _____