



Exhibit A



STATE OF CONNECTICUT – DEPARTMENT OF HOUSING

Application for Homeowner Assistance Fund (“HAF”) & Agreement Pilot Program

The State of Connecticut Department of Housing (“DOH”) is conducting a Pilot HAF Program for eligible single-family homeowners who have experienced a qualifying financial hardship due to COVID-19. The Connecticut Housing Finance Authority (“CHFA”) is administering this Pilot HAF Program on behalf of DOH. DOH anticipates conducting a broader HAF Program in the near future. Persons who were not awarded the Pilot HAF Program can re-apply for that HAF Program.

DIRECTIONS: Please type or print clearly and complete ALL sections of this application (except for items indicated to be “Optional”). Applicants must return the complete application and supporting documents to the Applicant’s servicer for submission to CHFA. If a question is not applicable, please write “N/A” in that section. Any questions regarding this application should be directed to your mortgage servicer who provided you with this application.

DEFINITIONS:

“Agencies” means DOH and CHFA, each of which individually is an “Agency”.

“Applicant” means each person who is an owner or co-owner of the single-family dwelling which is the Applicant’s principal dwelling. (Persons who do not own their home are not eligible for this program.)

“Application & Agreement” means this Application for Homeowner Assistance Fund (“HAF”) & Agreement.

“Lender” means the person or entity which holds a mortgage loan which is secured by the Applicant’s home.

“Mortgage Loan” means a loan secured by the Applicant’s home.

“Programs” means the HAF Program and the Pilot HAF Program.

“Property” means the Applicant’s principal dwelling.

“Servicer” means the entity which services an Applicant’s Mortgage Loan on behalf of a Lender.

“Treasury Department” means the United States Department of the Treasury.

APPLICANT CERTIFICATIONS, AUTHORIZATIONS, CONSENTS, AND AGREEMENTS:

By signing this Application and Agreement, each Applicant hereby:

(a) certifies and attests to the Agencies and to the Treasury Department that the information contained in all supporting documents submitted to the Agencies and in this Application & Agreement is true, correct and complete, including but not limited to the Applicant’s ownership of the Property, the number of persons in the Applicant’s household, the Applicant’s income and the income of others in the Applicant’s household.

(b) acknowledges that the Agencies will rely on the information in all submitted supporting documents and in this Application & Agreement in making decisions in awarding assistance in connection with the Programs.

(c) authorizes any Lender and any Servicer of the Applicant’s Loan(s) to: (a) procure information from third persons (including an IRS transcript of my tax returns); and (b) submit any and all such information as it may procure or otherwise possess and release it to the Agencies and the Treasury Department, including any and all information which an Agency or the Treasury Department may reasonably request with respect to the Mortgage Loan.

(d) consents to the sharing of any information any Lender or Servicer (regardless of whether the Lender or Servicer are specifically identified herein) may have with the Agencies and the Treasury Department and with service providers for purposes of processing this Application & Agreement, and agree that any funds disbursed on the Applicant’s behalf shall be applied by the Lender and Servicer of such Loan as an Agency may direct.

(e) authorizes any employer to provide to the Agencies and Servicer and the Treasury Department any information which an Agency, Servicer or the Treasury Department may request to verify the Applicant’s income and employment (including any reduction in Applicant’s income due to COVID-19).

(f) acknowledges receipt of the CHFA Privacy Policy.

(g) agrees that if more than one person is an Applicant, any one Applicant may hereafter submit information to, and communicate on behalf of all persons who own the Property, the Lender, Servicer, and the Agencies, which may all rely on any such submission or communication.

(h) acknowledges that the assistance under this Pilot Program (if awarded) may be up to \$20,000.00 (but that the Agencies are under no obligation to make an award and that funds for this Pilot Program are limited).

(i) agrees that any and all Applicants named in this Application & Agreement are jointly and severally obligated to repay any assistance provided by the Agencies plus reasonable attorneys' fees of the Agencies and the Treasury Department, fees, and costs in collecting such amounts on demand in the event that any Applicant made false statements in applying for assistance or omitted materially relevant information in this Application & Agreement.

(j) agrees that: (I) the Agencies, the Treasury Department, Servicer, and Lender may rely on a photographic copy, photostatic copy, digital copy, or other electronic copy of this Application & Agreement and also any such copy of any other communications made by any Applicant, (II) any such copy may be treated as an original and shall be binding on the Applicant and will be considered to have been made "in writing", and (III) each Applicant's signature below and delivered to the Agencies, Servicer, and/or Lender is an "electronic signature" (as such term is defined in Chapter 15 of the Connecticut General Statutes) logically associated with a record and executed or adopted by each Applicant with the intent to sign the record.

(k) consent and give permission to the Lender, Servicer, the Treasury Department, and Agencies to contact the Applicant using a mobile telephone number (if provided) and to use text messaging, artificial or prerecorded voice messages and automatic dialing technology for informational and program service calls, but not for telemarketing or sales calls, and that message and data charges may apply.

(l) agrees to indemnify and hold the Agencies harmless against any claims of the Lender, Servicer, or any person in connection with this Application & Agreement.

(m) none of the Applicants nor companies of which any of them are principals of or are in control of are or have been in breach of any obligation (not including any default in payment of the Mortgage Loan) to the Agencies or any other agency or instrumentality of the State of Connecticut or of the federal government.

(n) attest and certify to the Agencies and the Treasury Department that the Applicants own and occupy the Property as their primary residence, that the loan is secured by a first lien on the Property, and that the Applicants experienced financial hardship after January 21, 2020 which consisted of the following items which are checked:

_____ job loss _____ reduction in income

_____ increased costs due to healthcare or the need to care for a family member

Other described as follows: _____

Notice: False statements made herein are punishable under the penalty for false statement set out in Connecticut General Statutes Section 53a-157b.

A. GENERAL INFORMATION

Applicant Name: _____
First Name and Last Name

E-Mail Address: _____

Co-Applicant Name: _____
First Name and Last Name

E-Mail Address: _____

Additional Co-Applicant Name: _____
First Name and Last Name

E-Mail Address: _____

Physical Address: _____
Street Unit. #

City State Zip Code

Mailing Address: _____
Street Unit #

City State Zip Code

Cell #: _____ Home #: _____ Work #: _____
(At least one is required)

Preferred Number ___ Cell ___ Home ___ Work

B. HOUSEHOLD INCOME

Household Income is defined as the gross annual income received by the Applicant(s) and other persons in the Applicant’s household. Do not include household members who are temporarily residing with the Applicant(s).

What was the total Household Income for the Applicant for Calendar Year 2020?
\$ _____

What is the current annualized Household Income before taxes for the Applicant?
\$ _____

INCLUDE: Wages from Employment, Self-employment Income, Business Income, Unemployment Income, Worker’s Compensation, Pensions, Annuities, Social Security

(SSI/SSDI) Benefits, Veteran Benefits, State/Federal Public Assistance, Rental Income, Alimony, Child Support, etc.

EXCLUDE: Employment Income from Minors and Students, SNAP (food stamp) benefits, payments received for the care of foster children, temporary, nonrecurring or sporadic income and the Economic Impact Payment (stimulus payment).

C. HOUSEHOLD COMPOSITION

List ALL persons residing in the household. Do not include persons who are temporarily residing in the household.

	Name
1	
2	
3	
4	
5	
6	
7	
8	

Is the Applicant or anyone in the Applicant’s household a State of Connecticut Employee?
(Note: No preference will be given to a State of Connecticut Employee)

YES NO

D. FINANCIAL HARDSHIP AND MORTGAGE LOAN INFORMATION

1. Did Applicant experience a financial hardship after January 21, 2020, which resulted in the Applicant’s inability to pay the Applicant’s mortgage in full?

YES NO

a. If YES, select the reason(s). Check all that apply.

Job loss, furlough, layoff, or other reduction in any Applicant’s hours, wages, or salary.

Loss or reduction of self-employment income or income from Applicant’s business.

OTHER Reasons: Examples include missing work because Applicant had to be home with the Applicant’s child once schools and daycare centers closed, Applicant had to care for a family member who had COVID-19, the Applicant was ill or had to be quarantined because of COVID-19.

If OTHER, please provide a brief explanation:

2. Mortgage Loan Information (insert "Unknown" if information is not known).

a. Name of Servicer: _____

b. Is the mortgage insured by the Federal Housing Administration (FHA), Department of Veterans Affairs (VA) or U.S. Department of Agriculture (USDA)? YES NO DON'T KNOW

c. What is the current mortgage due date? _____

d. Total amount of Delinquent Monthly Loan Payments since January 21, 2020:
\$ _____

e. Total amount of Loan Payments Deferred since January 21, 2020:
\$ _____

f. Original Loan Amount*: \$ _____

g. Date Loan Closed (date of the mortgage)*: _____

*Note: Assistance under these Programs is not available for Homeowners with loans that exceeded federal ceilings at the time the loans were closed.

E. SUPPORTING DOCUMENTATION

The following information is required to be submitted:

Identity of the Applicant(s) - State issued photo ID or Driver's License or other form of photo ID with name and other identifying information.

Social Security Card of the Applicant(s) - copy of the social security card or document issued by a federal or state government referencing the applicant(s) name and social security number.

Current mortgage statement

2020 Income of the Household - 2020 tax return. If the Applicant(s) or other member(s) of the household have not filed, or are not required to file a 2020 tax return, other forms of income are acceptable including 2020 W-2 form(s), 2020 year-end paystub(s), 2020 1099-form(s) or 2020 SSI benefits award letter.

2021 Income of the Household – most recent 8 weeks of pay stubs, current benefits letter or statement, profit and loss for those self-employed.

F. APPLICANT DEMOGRAPHIC INFORMATION

Providing the information below is OPTIONAL

I do not wish to provide this information

Veteran	A=Non-Veteran; B=Veteran-Other; C=Service Disabled Veteran; D=Not Disclosed		
Gender	M=Male; F=Female; N=Not Disclosed		
Other Demographic Information	A=Black American; B=Hispanic American; C=Native American (Alaska Natives, Native Hawaiians, or enrolled members of a federally or state recognized Indian Tribe); D=Asian Pacific American (persons with origins from Burma, Thailand, Malaysia, Indonesia, Singapore, Brunei, Japan, China (including Hong Kong), Taiwan, Laos, Cambodia (Kampuchea), Vietnam, Korea, The Philippines, U.S. Territory of the Pacific Islands (Republic of Palau), Republic of the Marshall Islands, Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, Guam, Samoa, Macao, Fiji, Tonga, Kiribati, Tuvalu, or Nauru); E=Subcontinent Asian American (persons with origins from India, Pakistan, Bangladesh, Sir Lanka, Bhutan, the Maldives Islands or Nepal); F=White American; G=Not Disclosed		
Owner	Veteran	Gender	Other Demographic Information

Applicant Signature

Date

Co-Applicant Signature

Date

Co-Applicant Signature

Date

For Servicer / CHFA / DOH Use only

Tracking Number: _____



Connecticut Housing Finance Authority (“CHFA”)
Homeowner Assistance Fund Program

SERVICER CERTIFICATION

Servicer: _____

Borrower/Co-Borrower (the “Mortgagor”): _____

Property Address (the “Premises”): _____

Loan #: _____

This certification is made by the Servicer to CHFA and the Department of Housing (the “Agencies”) and the United States Treasury Department in connection with certain disbursements furnished on behalf of the Mortgagor under the Homeowner Assistance Fund Program (“HAF”).

A. Servicer certifies that the mortgage securing the loan is a first lien on the Premises and that the below is the total amount owing on the mortgage:

Principal \$ _____

Accrued Interest \$ _____

Escrow \$ _____

Late Fees \$ _____

Suspense Funds \$ _____

Other Costs/Fees (describe) _____ \$ _____

Forborne Loan Payment Balloon Amount otherwise Due at Loan Maturity:

\$ _____

Total \$ _____

B. Current Mortgage Due Date: _____

C. Servicer will reimburse CHFA for any duplicate payments made on behalf of the Mortgagor.

Servicer

By: _____
Printed name of authorized individual

Signature

Title

Date