



**Housing Authority of the County of Santa Cruz
Section 8 Homeownership Assistance Program
Eligibility Worksheet**

SECTION 8 HOMEOWNERSHIP ELIGIBILITY

<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you meet any of the Disabled/Elderly definitions on the reverse side? If so, please indicate which definition you meet. <input type="checkbox"/> Disabled family <input type="checkbox"/> Family that includes a person with disabilities <input type="checkbox"/> Elderly family
____/____/____	Date of enrollment—first assisted lease date—in the Section 8 program (minimum 1 year required, exceptions may be made as a reasonable accommodation for disabled households or household that include a person with disabilities)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does at least one member of the household work 30 hours/week or more, and have they been employed for at least 30 hours per week for at least a year? (there are exceptions for elderly and disabled households)
\$	Total household income, not including welfare. Minimum income requirement is \$10,300 per year, or \$6,540 for disabled families. (elderly and disabled households may include welfare income received by the adult family members who will own the home.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you meet the definition of a First Time Homebuyer? See reverse.

BUYER'S FUNDS: does not include moving expenses or any overlap in your rent and mortgage.

	BUYER	FAMILY / LOCAL PROGRAM	
A			Sales Price of Home (cannot exceed the appraised value)
B			Estimated Closing Costs & Transaction Costs (enter A * .05, or use the lender's actual estimate) A portion of this amount may come from a relative or a local program, or the buyer's own funds.
C			Down payment from Buyer (A * .01) The HO program requires that this one percent amount must come from the buyer's own funds.
D			Additional Downpayment. (A * .02 or greater, depending on lender requirements) This could include a gift from a relative or downpayment assistance from a local program or lender.
E			Net Closing Costs (B – C – D) to come from buyer
F	\$500		Home Inspection Fee (actual amount may vary, but the Housing Authority requires that the buyer have \$500 in reserve for this expense.)
G			TOTAL buyer's funds: \$_____ This is the minimum cash you must have, including your own funds at 1% of sales price and funds from other sources. The Housing Authority can help you with household budgeting if you do not yet meet the minimum cash requirement.

DISABLED/ELDERLY DEFINITIONS

Disabled family

A family whose head, spouse, or sole member is a person with disabilities.

Family that includes a person with disabilities

A family that includes a person with disabilities, where the person with disabilities is not the head of household, spouse, or sole member.

Elderly family

A family whose head, spouse, or sole member is at least 62 years of age.

FIRST TIME HOMEBUYER DEFINITIONS

First Time Homebuyer: The family must meet ONE of the following definitions:

- a. No member of the family has owned a home, or owned an interest in a home, that served as their residents or the residence of any other person in the family, for the last three years.
- b. A member of the family did own or have interest in a home in the last three years, but they meet the definition of displaced homemaker or single parent who, while married, owned a home with his or her spouse or resided in a home with his or her spouse. See below for definitions.
- c. One or more members of the family own membership shares in a cooperative.
- d. One of the family members is a person with disabilities, and the use of the homeownership option is necessary as a reasonable accommodation.

Displaced homemaker: An individual who—

- (A) is an adult;
- (B) has not worked full-time, full-year in the labor force for a number of years but has, during such years, worked primarily without remuneration to care for the home and family; and
- (C) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.

Single parent: An individual who—

- (A) is unmarried or legally separated from a spouse; and
- (B) (i) has 1 or more minor children for whom the individual has custody or joint custody; or
(ii) is pregnant.

MONTHLY SECTION 8 HOMEOWNERSHIP EXPENSES

Add up your total estimated monthly homeownership expenses to help you determine your total monthly housing costs, and your estimated monthly assistance from the Housing Authority.

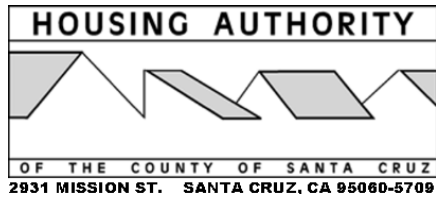
\$	Mortgage payments, principal and interest. (For cooperatives, this can include the financing for the membership share.)
\$	Mortgage insurance payments
\$	Real estate taxes*
\$	Homeowners insurance payments*
\$25	Maintenance expense allowance* (You may wish to save more than this. This is simply the amount the Housing Authority uses to calculate your assistance.)
\$25	Major repairs and replacement allowance*
\$	Utility allowance* (see utility allowance chart, over.)
\$	Homeowners association dues for condominiums or membership fees cooperatives*
\$	Principal and interest for mortgage debt to finance major repairs, replacements, or improvements for the home, including costs for disabled access improvements
\$	TOTAL MONTHLY HOMEOWNERSHIP EXPENSES

All items with an asterisk () next to them are items that typically increase every year. You should plan on having more money each year to pay these increased costs.

ESTIMATING YOUR MONTHLY HOMEOWNERSHIP ASSISTANCE PAYMENT

Please note that this is simply an estimate. Certain HUD-required adjustments to income may impact the final homeownership assistance payment calculation. The Housing Authority will perform the final calculations prior to providing homeownership assistance.

A	\$		Payment standard for the voucher size the Housing Authority has determined you are eligible for. (see over for Payment Standard schedule.) (Voucher Size)
B	\$		Payment standard for the size unit you would like to purchase.
C	\$		Enter the lower of A or B here.
D	\$		Monthly homeownership expenses from above.
E	\$		Enter the lower of C or D here. (Eligible Homeownership Expenses)
F	\$		Your monthly adjusted household income
G	\$		$F \times .3$ 30% of your monthly income.
H	\$		E – G. This is your estimated homeownership assistance payment
I	\$		D – H This is the amount of your homeownership expenses that you will have to pay each month.
J		%	I / F. This is the percentage of your monthly income you will have to devote to housing costs.
K	\$		F – I This is how much money you will have left over each month after you pay your homeownership expenses.



COUNTY OF SANTA CRUZ SCHEDULE OF PAYMENT STANDARDS

Effective October 1, 2016

Number of Bedrooms	Payment Standards
SRO	877
0	1,170
1	1,417
2	1,897
3	2,513
4	2,810
5	3,232
6	3,653
7	4,075
8	4,496
Mobile Home Space	758

UTILITY ALLOWANCES

Effective October 1, 2016

Detached Single Family Dwelling

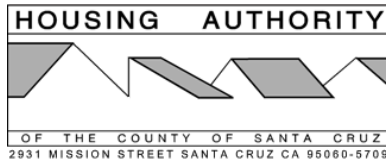
Utility Or Services	Number of Bedrooms										
	SRO	0	1	2	3	4	5	6	7	8	
General Utilities (lights, etc)	\$24	\$29	\$41	\$53	\$65	\$83	\$94	\$106	\$118	\$130	
Heating	Electric	\$15	\$19	\$27	\$34	\$42	\$53	\$61	\$68	\$76	\$83
	Gas	\$10	\$12	\$17	\$22	\$27	\$34	\$39	\$44	\$49	\$54
	Propane	\$12	\$15	\$20	\$26	\$32	\$41	\$47	\$53	\$58	\$64
Cooking	Electric	\$3	\$4	\$6	\$7	\$9	\$11	\$13	\$15	\$16	\$18
	Gas	\$1	\$2	\$2	\$3	\$3	\$4	\$5	\$6	\$6	\$7
	Propane	\$5	\$6	\$9	\$11	\$13	\$17	\$19	\$22	\$24	\$27
Water Heater	Electric	\$12	\$15	\$21	\$27	\$33	\$42	\$48	\$54	\$61	\$67
	Gas	\$9	\$12	\$16	\$21	\$25	\$32	\$37	\$42	\$46	\$51
	Propane	\$16	\$20	\$28	\$36	\$44	\$56	\$64	\$72	\$80	\$88
Tenant Owns Range	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	
Tenant Owns Refrigerator	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	
Water	\$36	\$38	\$43	\$47	\$52	\$58	\$63	\$67	\$72	\$76	
Sewer	\$48	\$48	\$48	\$48	\$48	\$48	\$48	\$48	\$48	\$48	
Garbage	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	

Duplexes, Row-houses, Townhouses

Utility Or Services	Number of Bedrooms										
	SRO	0	1	2	3	4	5	6	7	8	
General Utilities (lights, etc)	\$21	\$26	\$37	\$47	\$57	\$73	\$83	\$94	\$104	\$115	
Heating	Electric	\$15	\$19	\$27	\$34	\$42	\$53	\$61	\$68	\$76	\$83
	Gas	\$10	\$12	\$17	\$22	\$27	\$34	\$39	\$44	\$49	\$54
	Propane	\$12	\$15	\$20	\$26	\$32	\$41	\$47	\$53	\$58	\$64
Cooking	Electric	\$3	\$4	\$6	\$7	\$9	\$11	\$13	\$15	\$16	\$18
	Gas	\$1	\$2	\$2	\$3	\$3	\$4	\$5	\$6	\$6	\$7
	Propane	\$5	\$6	\$9	\$11	\$13	\$17	\$19	\$22	\$24	\$27
Water Heater	Electric	\$12	\$15	\$21	\$27	\$33	\$42	\$48	\$54	\$61	\$67
	Gas	\$9	\$12	\$16	\$21	\$25	\$32	\$37	\$42	\$46	\$51
	Propane	\$16	\$20	\$28	\$36	\$44	\$56	\$64	\$72	\$80	\$88
Tenant Owns Range	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	
Tenant Owns Refrigerator	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	
Water	\$33	\$35	\$38	\$41	\$44	\$49	\$52	\$55	\$59	\$62	
Sewer	\$41	\$41	\$41	\$41	\$41	\$41	\$41	\$41	\$41	\$41	
Garbage	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	

Manufactured Homes

Utility Or Services	Number of Bedrooms										
	SRO	0	1	2	3	4	5	6	7	8	
General Utilities (lights, etc)	\$16	\$20	\$29	\$37	\$45	\$57	\$65	\$74	\$82	\$90	
Heating	Electric	\$15	\$19	\$27	\$34	\$42	\$53	\$61	\$68	\$76	\$83
	Gas	\$10	\$12	\$17	\$22	\$27	\$34	\$39	\$44	\$49	\$54
	Propane	\$12	\$15	\$20	\$26	\$32	\$41	\$47	\$53	\$58	\$64
Cooking	Electric	\$3	\$4	\$6	\$7	\$9	\$11	\$13	\$15	\$16	\$18
	Gas	\$1	\$2	\$2	\$3	\$3	\$4	\$5	\$6	\$6	\$7
	Propane	\$5	\$6	\$9	\$11	\$13	\$17	\$19	\$22	\$24	\$27
Water Heater	Electric	\$12	\$15	\$21	\$27	\$33	\$42	\$48	\$54	\$61	\$67
	Gas	\$9	\$12	\$16	\$21	\$25	\$32	\$37	\$42	\$46	\$51
	Propane	\$16	\$20	\$28	\$36	\$44	\$56	\$64	\$72	\$80	\$88
Tenant Owns Range	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	
Tenant Owns Refrigerator	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	\$6	
Water	\$32	\$33	\$35	\$38	\$40	\$44	\$46	\$48	\$51	\$53	
Sewer	\$39	\$39	\$39	\$39	\$39	\$39	\$39	\$39	\$39	\$39	
Garbage	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	\$21	



Certification of Homeownership Counseling

This is to certify that I have met with Housing Authority staff and reviewed the costs of homeownership. I understand that I will have to provide an estimated \$_____ of my own funds at the time of close of escrow. I understand that this amount cannot be a gift from a friend or relative.

Also, I understand that the total monthly costs of homeownership are estimated to be \$_____, and that some of these costs may increase each year. The estimated housing assistance payment from the Housing Authority is \$_____, and this amount may change each year based on my income, the payment standard, and my total housing costs. This assistance payment may be terminated if I violate any of the program rules, or if my income increases such that I am no longer eligible, or if the program funding is not renewed by Congress. If that happens, I will become responsible for paying the full amount of my homeownership costs.

The amount of my homeownership costs that I am responsible for paying each month is estimated to be \$_____. This represents _____% of my monthly income and will leave me with about \$_____ per month to pay all my other expenses.

The monthly housing assistance payment will be (check one) ___sent to me ___sent to the bank. I understand that I am responsible for making timely mortgage payments and for paying all other expenses, including property taxes, insurance, utilities, maintenance costs, and homeownership dues or space rent. If, at any time, I am not able to afford my monthly mortgage payment, I will contact the Housing Authority and my lender immediately to discuss the situation before any payments are late or missed.

Signed

Dated

Housing Authority Staff

Dated