



AFFORDABLE RESALE 18 Hat Trick Drive Plymouth MA 02360

Attached is the information you requested regarding the Three Bedroom Split-Level Sale Price: \$319,974

Unit Availability: First Come First Serve

(Applications will <u>not</u> be accepted via email)

The first applicant to submit all documentation as noted below will have the first opportunity to purchase

Please <u>MAIL</u> 1 copy of all required financial documentation, application affidavit, and disclosure form and mortgage pre-approval to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451
or
DELIVER To:
206 Ayer Road
Harvard MA 01451
During Business Hours
Monday thru Friday 9AM - 5PM





Three Bedroom Split-Level Village at South Street 18 Hat Trick Drive Plymouth MA 02360

Sale Price: \$319,974

<u>Unit Information</u>	
# of Bedrooms:	3
# of Bathrooms:	1.5
Parking:	1 Car Garage
Year Built:	2013
Sq. Ft.:	1568
Heat:	Gas
Appliances:	Dishwasher, Range, Hood
HOA Fee:	\$125 / Month
Estimated Annual	
Taxes:	\$3,918 / Year

	# of	
Eligibility Criteria	<u>n oj</u> People	<u>Limit</u>
1. Income Limits	1	\$82,950
	2	\$94,800
	3	\$106,650
	4	\$118,450
	5	\$127,950
	6	\$137,450
2. Asset Limits @ \$7	5,000	
3. Must be first time may apply)	homebuyer	(exceptions
Please go to www.me	-	



Great Commuter Location



Karen Morand (978) 235-5595 Harvard MA 01451 www.mcohousingservices.com







REQUIRED FINANCIAL DOCUMENTATION

(Please check circles below to indicate you have included the following documentation in your package)

Following are the required financial documentation. Please provide a copy of all applicable information. \bigcirc a. A mortgage pre-approval letter showing you are able to secure a mortgage. The mortgage must be from a Mass Housing approved lender and they must have determined your mortgage eligibility based on your credit score. An online mortgage pre-approval will not be accepted. This mortgage must be a 30 yr conventional loan. b. Federal Tax Returns –Last 3 years (**DO NOT** SEND MASS STATE TAXES) c. W2 and/or 1099-R Forms: Last 3 years d. Asset Statement: Current statements including 3 months checking accounts (full statement showing activity/every page front and back), saving accounts (full statement), investment accounts including retirement, certificate of deposit, property, down payment gift amount etc. e. Five (5) consecutive pay stubs ending within one month of unit application for all jobs (check/direct deposit stubs). For unemployment, copies of unemployment checks or DOR verification stating benefits received. f. Social Security: official statement of monthly amount received for year in review and statement of total amount received for latest tax year. g. Pension: statements indicating amount received for year in review and statement of total amount received for latest tax year. h. Child support and alimony: document indicating the payment amount. i. Proof of student status for dependent household members over age of 18 and full-time students. j. If you intend to utilize a gift from a family member to assist with the down payment, please advise us of the gift amount with the name and telephone number of the person providing the gift. k. If you have a home to sell a market analysis is required along with a copy of your last mortgage statement.

 $\underline{\textbf{MAIL}}$ all documentation, mortgage pre-approval, and application to:



MCO Housing Services P.O. Box 372 Harvard, MA 01451





TOTAL ASSETS



Date Received: ___

BUYER APPLICATION PLYMOUTH 18 Hat Trick Drive

PERSONAL INFORMATION	Date:	
Name:		
Street:	Town:	
Telephone:	Email:	
Have you owned a home?	If so, when did you sell?	
on it for income), business income, veteran	ehold Income, including gross wages, retirement income is benefits, alimony/child support, unemployment compeupplement second income and dividend income.)	-
Other Income, specify		
TOTAL MONTHLY INCOME: HOUSEHOLD ASSETS: Complete all that app	oly with current account balances	
Checking (avg balance for 3 months) Savings Stocks, Bonds, Treasury Bills, CD or Money Market Accounts and Mutual Funds Individual Retirement, 401K and Keogh accounts		
Retirement or Pension Funds (amount you can withdraw without penalty)		
Revocable trusts Equity in rental property or other capital investments Cash value of whole life or universal life insurance policies Down payment Gift		0
TOTAL ACCETS	EOUSING.	SERVICES

			<u>EM</u>	PLOYMENT S	TATUS			
(inc	lude for	all workir	ng househo	ld members.	Attach sepa	ate sheet, if	necessary)	
Employer:								
Street Address	yer: Address: City/State/Zip:							<u> </u>
Date of Hire (a	pproxim	ate):						
Annual Wage -								
Addi	itional: _			(Bonus, Con	nmission, Ov	ertime, etc.))	
		ABOUT '	YOUR FAM	ILY: (OPTION	AL)			
You are requ	uested to					us in fulfillir	ng affirmative	action
•			-	•			members tha	
·	I	iving in th	ne unit. Plea	ase check the	appropriate	categories:		
					(#) of			
			Annlicant	Co-Applicant				
White			Applicant	co ripplicant	Берепаси			
	American							
Hispanic	/Latino							
	Pacific Isl							
Native A Cape Ve		ot Alaskan	l					
he total housel				ery important t	to determine	the maximum		
llowable incom	e for you	r househol	d.)					
	ЦΩІ	ISEMULD C	OMBOSITIO	N (including ap	anlicants)			
Name				tionship	-	Age		
				tionship				
					Age			
				tionship				
					Age			
Name			Rela	tionship		Age		
		ADD	ITIONAL INI	FORMATION:				
The MAN	VINALINA SI	lowable ar	nual income	e is as follows:				
House-	VIIAIOIAI	iowanie di	iiiuai iiiCUIII	z is as IUIIUWS:				
hold	1	2	3	4	5	6		
Size	-	_		•	-			
Max								
Income	\$82,950	\$94,800	\$106,650	\$118,450	\$127,950	\$137,450		
Limits	<u> </u>							
hese income lir	mits are F	IRM and ca	annot be adj	usted. Please l	be advised tha	at the income	to be used	
hould include i	ncome fo	r all memb	ers of the ho	ousehold that a	re to be resid	ing in the hor	ne. Applicants	
vill be responsil	ole for all	closing cos	sts and dowr	n payments ass	ociated with	the purchase	of a home.	
	Signatur	2			Date:			
	2.01141411	Applicant			Date		_	
^	6.							400
	Signatur				Date:		-	NU
EQUAL HOUSING OPPORTUNITY		Co-Applica	ant)	HOUSING SERVICES

Co-Applicant





AFFIDAVIT AND DISCLOSURE FORM

I/We understand and agree to the following conditions and guidelines regarding the distribution of resale unit(s):

1. The annual household income for my family does not exceed the allowable limits as follows:

House- hold Size	1	2	3	4	5	6
Max Income Limits	\$82,950	\$94,800	\$106,650	\$118,450	\$127,950	\$137,450

- 2. I/We understand that we need to be first time homebuyers, defined as not having owned a home for 3 years or one buyer must be 55 or older
- 3. I/We certify that my/our total assets do not exceed the asset limit. I/We understand the full value or portion of retirement accounts do apply.
- 4. The household size listed on the application form includes only and all the people that will be living in the residence.
- 5. I/We certify all data supplied on the application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand providing false information will result in disqualification from further consideration.
- 6. I/We understand that by submitting this application it does not guarantee that I/we will be able to purchase a unit. I/We understand that all application data will be verified and additional financial information will be required, verified and reviewed in detail prior to purchasing a unit.
- 7. I/We understand that it is my/our obligation to secure the necessary mortgage for the unit purchase and all expenses, including closing costs and down payments, are my responsibility.
- 8. I/We further authorize MCO Housing Services to verify any and all income, assets and other financial information, to verify any and all household, resident location and workplace information and directs any employer, landlord or financial institution to release any information to MCO Housing Services and consequently the project's monitoring agency, for the purpose of determining income eligibility.
- 9. I/We understand this unit is available on a first come first serve basis.
- 10. Resale program requirements are established by the Projects Monitoring Agent I/We agree to be bound by whatever program changes that may be imposed at any time throughout the process. If any program conflicts arise, I/we agree that any determination made by Monitoring Agent is final.

I/We have comp	pleted the application and have reviewed and understand the process that will be utilized to distribute the
available units.	I/We am qualified based upon the program guidelines and agree to comply with applicable regulations.

Applicant Co-Applicant Date



