

## MyHomeCT Application

Dear Homeowner:

Enclosed you will find the MyHomeCT Application package. Carefully follow the steps below to complete your application for MyHomeCT assistance.

**Step 1:** Complete the “Am I Eligible for MyHomeCT Assistance?” questionnaire. (2 pages)

If you determine that you may be eligible for MyHomeCT Assistance continue to Step 2.

**Step 2:** Review the “MyHomeCT Required Documents Checklist” and obtain copies of **ALL** required documentation.

**Step 3:** Complete the “MyHomeCT Application.” (8 pages)

**Step 4:** Complete and sign the “Third Party Authorization.” (1 page)

**Step 5:** Review, sign and date the “Agreement for the MyHomeCT Program Application Agreement.” (3 pages)

The completed application package must be returned to the Connecticut Housing Finance Authority, Attn: MyHomeCT. You can mail **or** drop off the application package to 999 West Street, Rocky Hill, CT 06067.

If you need assistance in completing the application, or delivering the application package to the Connecticut Housing Finance Authority, please contact a MyHomeCT Resource Center who can assist you. A list of Resource Centers has been included in this package.

Please allow up to 30 days for your application to be reviewed. You will receive a letter via regular USPS mail once a determination has been made.

Thank you.

Sincerely,

*MyHomeCT*  
Connecticut Housing Finance Authority

## Am I Eligible for MyHomeCT Assistance?

Answering the following questions will help determine whether you may qualify for the MyHomeCT Program

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1. Is the property located in the State of Connecticut?

- YES, continue
- NO, stop you are not eligible

2. Are you the owner living in this property as your full time primary residence?

- YES, continue
- NO, stop you are not eligible

3. Is the property a single-family detached home (not connected to another home), two-to-four-unit home, condominium, townhouse/duplex or manufactured home?

- YES, continue
- NO, stop you are not eligible

4. How many people currently reside in your household, including yourself? \_\_\_\_\_

\* Household is defined as all individuals living in the household, regardless of relationship. Do not include temporary persons who are temporarily living in the household.

5. What is the **current total annual income** of all persons residing in your household?  
\$ \_\_\_\_\_

\* Household income is defined as the gross annual income received by the Applicant(s) and all other household members. Exclude employment income for minors and full time students.

6. Did you or anyone in your household experience a financial hardship due to the COVID-19 pandemic?

- YES, continue
- NO, stop you are not eligible

7. Did you reside in this same property at the time of financial hardship?

- YES, continue
- NO, stop you are not eligible

8. How many people were residing in your household, including yourself, the calendar year before you experienced the financial hardship? \_\_\_\_\_

\* For example, if you experienced hardship in 2020, you will enter 2019 information.

9. What was the **total annual income** of all persons residing in your household the **calendar year before you experienced financial hardship** (For example, if you experienced hardship in 2020, you will enter 2019 information?) \$ \_\_\_\_\_

\* Household income is defined as the gross annual income received by the Applicant(s) and all other household members. Exclude employment income for minors and full time students.

10. **AMI Verification:** Household income must be equal to or less than 150% area median income (AMI), adjusted for household size for the current year **and** the year before you experienced hardship.

Using the Exhibit A attached, locate your town/city and the column that represents the number of people residing in your household. The dollar amount referenced under that particular household size column represents 150% AMI.

If your income is higher than the AMI listed in the column, for the current year **OR** the year before you experienced hardship, STOP you are not eligible.

If your income is less than the AMI listed in the column, for the current year **OR** the year before you experienced hardship, you may be eligible. Please continue with the application.

Town	150% AMI -							
	Household Size							
	1	2	3	4	5	6	7	8
Bridgeport	123300	140900	158500	176100	190200	204300	218400	232500
Easton	123300	140900	158500	176100	190200	204300	218400	232500
Fairfield	123300	140900	158500	176100	190200	204300	218400	232500
Monroe	123300	140900	158500	176100	190200	204300	218400	232500
Shelton	123300	140900	158500	176100	190200	204300	218400	232500
Stratford	123300	140900	158500	176100	190200	204300	218400	232500
Trumbull	123300	140900	158500	176100	190200	204300	218400	232500
Bethel	144100	164650	185250	205800	222300	238750	255200	271700
Brookfield	144100	164650	185250	205800	222300	238750	255200	271700
Danbury	144100	164650	185250	205800	222300	238750	255200	271700
New Fairfield	144100	164650	185250	205800	222300	238750	255200	271700
Newtown	144100	164650	185250	205800	222300	238750	255200	271700
Redding	144100	164650	185250	205800	222300	238750	255200	271700
Ridgefield	144100	164650	185250	205800	222300	238750	255200	271700
Sherman	144100	164650	185250	205800	222300	238750	255200	271700
Darien	179900	205600	231300	256950	277550	298100	318650	339200
Greenwich	179900	205600	231300	256950	277550	298100	318650	339200
New Canaan	179900	205600	231300	256950	277550	298100	318650	339200
Norwalk	179900	205600	231300	256950	277550	298100	318650	339200
Stamford	179900	205600	231300	256950	277550	298100	318650	339200
Weston	179900	205600	231300	256950	277550	298100	318650	339200
Westport	179900	205600	231300	256950	277550	298100	318650	339200
Wilton	179900	205600	231300	256950	277550	298100	318650	339200
Avon	124050	141750	159450	177150	191350	205500	219700	233850
Berlin	124050	141750	159450	177150	191350	205500	219700	233850
Bloomfield	124050	141750	159450	177150	191350	205500	219700	233850
Bristol	124050	141750	159450	177150	191350	205500	219700	233850
Burlington	124050	141750	159450	177150	191350	205500	219700	233850
Canton	124050	141750	159450	177150	191350	205500	219700	233850
East Granby	124050	141750	159450	177150	191350	205500	219700	233850
East Hartford	124050	141750	159450	177150	191350	205500	219700	233850
East Windsor	124050	141750	159450	177150	191350	205500	219700	233850
Enfield	124050	141750	159450	177150	191350	205500	219700	233850
Farmington	124050	141750	159450	177150	191350	205500	219700	233850
Glastonbury	124050	141750	159450	177150	191350	205500	219700	233850
Granby	124050	141750	159450	177150	191350	205500	219700	233850
Hartford	124050	141750	159450	177150	191350	205500	219700	233850
Hartland	124050	141750	159450	177150	191350	205500	219700	233850
Manchester	124050	141750	159450	177150	191350	205500	219700	233850
Marlborough	124050	141750	159450	177150	191350	205500	219700	233850
New Britain	124050	141750	159450	177150	191350	205500	219700	233850
Newington	124050	141750	159450	177150	191350	205500	219700	233850
Plainville	124050	141750	159450	177150	191350	205500	219700	233850
Rocky Hill	124050	141750	159450	177150	191350	205500	219700	233850
Simsbury	124050	141750	159450	177150	191350	205500	219700	233850
Southington	124050	141750	159450	177150	191350	205500	219700	233850
South Windsor	124050	141750	159450	177150	191350	205500	219700	233850
Suffield	124050	141750	159450	177150	191350	205500	219700	233850
West Hartford	124050	141750	159450	177150	191350	205500	219700	233850
Wethersfield	124050	141750	159450	177150	191350	205500	219700	233850
Windsor	124050	141750	159450	177150	191350	205500	219700	233850
Windsor Locks	124050	141750	159450	177150	191350	205500	219700	233850
Chester	124050	141750	159450	177150	191350	205500	219700	233850
Cromwell	124050	141750	159450	177150	191350	205500	219700	233850
Durham	124050	141750	159450	177150	191350	205500	219700	233850
East Haddam	124050	141750	159450	177150	191350	205500	219700	233850
East Hampton	124050	141750	159450	177150	191350	205500	219700	233850
Haddam	124050	141750	159450	177150	191350	205500	219700	233850
Middlefield	124050	141750	159450	177150	191350	205500	219700	233850
Middletown	124050	141750	159450	177150	191350	205500	219700	233850

Portland	124050	141750	159450	177150	191350	205500	219700	233850
Andover	124050	141750	159450	177150	191350	205500	219700	233850
Bolton	124050	141750	159450	177150	191350	205500	219700	233850
Columbia	124050	141750	159450	177150	191350	205500	219700	233850
Coventry	124050	141750	159450	177150	191350	205500	219700	233850
Ellington	124050	141750	159450	177150	191350	205500	219700	233850
Hebron	124050	141750	159450	177150	191350	205500	219700	233850
Mansfield	124050	141750	159450	177150	191350	205500	219700	233850
Somers	124050	141750	159450	177150	191350	205500	219700	233850
Stafford	124050	141750	159450	177150	191350	205500	219700	233850
Tolland	124050	141750	159450	177150	191350	205500	219700	233850
Union	124050	141750	159450	177150	191350	205500	219700	233850
Vernon	124050	141750	159450	177150	191350	205500	219700	233850
Willington	124050	141750	159450	177150	191350	205500	219700	233850
Clinton	138850	158650	178500	198300	214200	230050	245900	261800
Deep River	138850	158650	178500	198300	214200	230050	245900	261800
Essex	138850	158650	178500	198300	214200	230050	245900	261800
Killingworth	138850	158650	178500	198300	214200	230050	245900	261800
Old Saybrook	138850	158650	178500	198300	214200	230050	245900	261800
Westbrook	138850	158650	178500	198300	214200	230050	245900	261800
Ansonia	126350	144400	162450	180450	194900	209350	223800	238200
Beacon Falls	126350	144400	162450	180450	194900	209350	223800	238200
Derby	126350	144400	162450	180450	194900	209350	223800	238200
Milford	126350	144400	162450	180450	194900	209350	223800	238200
Oxford	126350	144400	162450	180450	194900	209350	223800	238200
Seymour	126350	144400	162450	180450	194900	209350	223800	238200
Bethany	120450	137650	154850	172050	185850	199600	213350	227150
Branford	120450	137650	154850	172050	185850	199600	213350	227150
Cheshire	120450	137650	154850	172050	185850	199600	213350	227150
East Haven	120450	137650	154850	172050	185850	199600	213350	227150
Guilford	120450	137650	154850	172050	185850	199600	213350	227150
Hamden	120450	137650	154850	172050	185850	199600	213350	227150
Madison	120450	137650	154850	172050	185850	199600	213350	227150
Meriden	120450	137650	154850	172050	185850	199600	213350	227150
New Haven	120450	137650	154850	172050	185850	199600	213350	227150
North Branford	120450	137650	154850	172050	185850	199600	213350	227150
North Haven	120450	137650	154850	172050	185850	199600	213350	227150
Orange	120450	137650	154850	172050	185850	199600	213350	227150
Wallingford	120450	137650	154850	172050	185850	199600	213350	227150
West Haven	120450	137650	154850	172050	185850	199600	213350	227150
Woodbridge	120450	137650	154850	172050	185850	199600	213350	227150
Middlebury	120450	137650	154850	172050	185850	199600	213350	227150
Naugatuck	120450	137650	154850	172050	185850	199600	213350	227150
Prospect	120450	137650	154850	172050	185850	199600	213350	227150
Southbury	120450	137650	154850	172050	185850	199600	213350	227150
Waterbury	120450	137650	154850	172050	185850	199600	213350	227150
Wolcott	120450	137650	154850	172050	185850	199600	213350	227150
Bozrah	120450	137650	154850	172050	185850	199600	213350	227150
East Lyme	120450	137650	154850	172050	185850	199600	213350	227150
Franklin	120450	137650	154850	172050	185850	199600	213350	227150
Griswold	120450	137650	154850	172050	185850	199600	213350	227150
Groton	120450	137650	154850	172050	185850	199600	213350	227150
Ledyard	120450	137650	154850	172050	185850	199600	213350	227150
Lisbon	120450	137650	154850	172050	185850	199600	213350	227150
Lyme	120450	137650	154850	172050	185850	199600	213350	227150
Montville	120450	137650	154850	172050	185850	199600	213350	227150
New London	120450	137650	154850	172050	185850	199600	213350	227150
North Stonington	120450	137650	154850	172050	185850	199600	213350	227150
Norwich	120450	137650	154850	172050	185850	199600	213350	227150
Old Lyme	120450	137650	154850	172050	185850	199600	213350	227150
Preston	120450	137650	154850	172050	185850	199600	213350	227150
Salem	120450	137650	154850	172050	185850	199600	213350	227150
Sprague	120450	137650	154850	172050	185850	199600	213350	227150

Stonington	120450	137650	154850	172050	185850	199600	213350	227150
Voluntown	120450	137650	154850	172050	185850	199600	213350	227150
Waterford	120450	137650	154850	172050	185850	199600	213350	227150
Colchester	142950	163350	183750	204150	220500	236850	253150	269500
Lebanon	142950	163350	183750	204150	220500	236850	253150	269500
Ashford	120450	137650	154850	172050	185850	199600	213350	227150
Brooklyn	120450	137650	154850	172050	185850	199600	213350	227150
Canterbury	120450	137650	154850	172050	185850	199600	213350	227150
Chaplin	120450	137650	154850	172050	185850	199600	213350	227150
Eastford	120450	137650	154850	172050	185850	199600	213350	227150
Hampton	120450	137650	154850	172050	185850	199600	213350	227150
Killingly	120450	137650	154850	172050	185850	199600	213350	227150
Plainfield	120450	137650	154850	172050	185850	199600	213350	227150
Pomfret	120450	137650	154850	172050	185850	199600	213350	227150
Putnam	120450	137650	154850	172050	185850	199600	213350	227150
Scotland	120450	137650	154850	172050	185850	199600	213350	227150
Sterling	120450	137650	154850	172050	185850	199600	213350	227150
Thompson	120450	137650	154850	172050	185850	199600	213350	227150
Windham	120450	137650	154850	172050	185850	199600	213350	227150
Woodstock	120450	137650	154850	172050	185850	199600	213350	227150
Barkhamsted	120450	137650	154850	172050	185850	199600	213350	227150
Bethlehem	120450	137650	154850	172050	185850	199600	213350	227150
Bridgewater	120450	137650	154850	172050	185850	199600	213350	227150
Canaan	120450	137650	154850	172050	185850	199600	213350	227150
Colebrook	120450	137650	154850	172050	185850	199600	213350	227150
Cornwall	120450	137650	154850	172050	185850	199600	213350	227150
Goshen	120450	137650	154850	172050	185850	199600	213350	227150
Harwinton	120450	137650	154850	172050	185850	199600	213350	227150
Kent	120450	137650	154850	172050	185850	199600	213350	227150
Litchfield	120450	137650	154850	172050	185850	199600	213350	227150
Morris	120450	137650	154850	172050	185850	199600	213350	227150
New Hartford	120450	137650	154850	172050	185850	199600	213350	227150
New Milford	120450	137650	154850	172050	185850	199600	213350	227150
Norfolk	120450	137650	154850	172050	185850	199600	213350	227150
North Canaan	120450	137650	154850	172050	185850	199600	213350	227150
Plymouth	120450	137650	154850	172050	185850	199600	213350	227150
Roxbury	120450	137650	154850	172050	185850	199600	213350	227150
Salisbury	120450	137650	154850	172050	185850	199600	213350	227150
Sharon	120450	137650	154850	172050	185850	199600	213350	227150
Thomaston	120450	137650	154850	172050	185850	199600	213350	227150
Torrington	120450	137650	154850	172050	185850	199600	213350	227150
Warren	120450	137650	154850	172050	185850	199600	213350	227150
Washington	120450	137650	154850	172050	185850	199600	213350	227150
Watertown	120450	137650	154850	172050	185850	199600	213350	227150
Winchester	120450	137650	154850	172050	185850	199600	213350	227150
Woodbury	120450	137650	154850	172050	185850	199600	213350	227150

## MyHomeCT REQUIRED DOCUMENTS CHECKLIST

The documents listed below must be included with the application

**\*\* COPIES ONLY \*\***



**MyHomeCT**

Foundation for a Brighter Future

- Proof of Identity (Applicant and Co-Applicant):** copy of a valid Driver's License, valid photo ID issued by the State of CT, valid Passport or other form of photo ID with identifying information.
- Social Security card or ITIN issued by the U.S. Internal Revenue Service (Applicant and Co-Applicant):** if you cannot locate a copy of the card, a tax return or W-2 referencing the SSN or ITIN is acceptable.
- Current Annual Household Income**
  - Employment Income: Most recent 30 days' worth of paystubs
  - Self-Employment Income with Schedule C: Most recent complete Federal Tax return and year to date Profit & Loss
  - Business Income (Sole Proprietorship/Partnership/Corporation/Limited Liability Company/S Corporation): Most recent Federal Tax Return and Personal Federal Tax Return with ALL schedules.
  - Unemployment/Worker's Compensation: Benefit notification letter or check stub/monthly/bi-weekly statement (if applicable)
  - Social Security, Social Security Disability, Retirement/Pension: All applicable benefit verification letters (<https://www.ssa.gov/myaccount/proof-of-benefits.html>) and Retirement/Pension statement of benefits
  - Alimony and/or Child Support: Separation Agreement or Divorce Decree reflecting type of support, amount and frequency, or payment ledger from child support enforcement agency or Court Order or other documentation to reflect receipt and frequency
  - Rental Income (from 2-4 family home): Current Lease Agreement(s) or other documentation to reflect amounts received
  - Armed Forces Payment: Most recent Leave and Earnings Statement (LES)
- Annual Household Income for the Calendar Year Before you Experienced Hardship:** (e.g. if the hardship date was March 2020, you will provide 2019 information): Tax Return (or IRS Tax Return Transcript), W-2s/Applicable 1099s (or IRS Wage and Income Statement) (IRS website - <https://www.irs.gov/individuals/get-transcript>)
- Proof of Ownership:** Mortgage Deed, Tax Bill or Assessor's Card
- Proof of Occupancy:** Utility bill or cable bill

- If applicable, most current mortgage statement.*** Required for all applicants who have an active first mortgage.
- If applicable, most current mortgage statement, past due notice from the lender/servicer or reinstatement letter from lender/servicer.*** Required for all applicants requesting assistance on their mortgage delinquency. Document must include name of creditor, applicant name(s), property address, account number, current amount due and monthly payment amount.
- If applicable, most current statement for non-mortgage related assistance. (e.g. non-escrowed (not included in the mortgage payment) property taxes or homeowner's insurance, condominium/homeowners association fees, water/sewer lien, ground lease or lot payments).*** Required for all applicants requesting assistance on their non-mortgage expense delinquency. Must reflect the full amount due.
- If applicable, most current condominium fee/homeowners association invoice.*** Required for all applicants who live in a condominium or townhouse.
- If applicable, permission from Bankruptcy Trustee confirming you are permitted to receive grant funds from the program.*** Required for any applicant in active bankruptcy.
- Third Party Authorization:** Completed and signed
- Application and Agreement:** Signed



## MyHomeCT Application

### **Applicant Information – All fields are required**

Applicant Name (First, Middle, Last): \_\_\_\_\_

Social Security Number/ITIN: \_\_\_\_\_

Date of Birth (dd/mm/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different then property address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Gender**- Select one:  Male  Female  Non – Binary  Decline to Answer

**Marital Status** – Select One:  Married/Domestic Partnership  Separated  Unmarried

**Number of People in Household** Select One: (Household is defined as all individuals living in the household unit, regardless of the relationship. Do not include persons who are temporarily residing in the household.)

- 1  2  3  4  5  6  7  
 8

**Race** - Select One:  American Indian or Alaska Native  Asian  Black or African American  Decline to Answer  Multiple  Native Hawaiian or Other Pacific Islander  White  Other

**Ethnicity** – Select One:  Hispanic or Latino  Not Hispanic or Latino  Decline to Answer

**Preferred language** - Select One:  English  Spanish  Other

**Are you proficient in English?**  Yes  No

**Are you a resident of an Indian reservation?**  Yes  No

<p><b>Do you currently receive income?</b> (* Income Tool Tip - 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..</p> <p>*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).</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><b>How did you hear about MyHomeCT</b> – Select One: <input type="checkbox"/> CHFA Website <input type="checkbox"/> Housing Counseling Agency <input type="checkbox"/> Lender / Servicer <input type="checkbox"/> Outreach Event <input type="checkbox"/> Social Media <input type="checkbox"/> Television <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Other</p>	

**Co-Applicant Information - All fields required if applicable**

Co-Applicant Name: (First, Middle, Last) \_\_\_\_\_

Social Security Number/ITIN: \_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

**Relationship:**  Dependent / Child  Family Member  Friend  Parent  Self  Spouse / Domestic partnership  Other

<p><b>Does this member currently receive income?</b> (Refer to income tool tip above)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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**Household Member - All fields required if applicable**

Name: (First, Middle, Last)

Date of Birth: (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

**Relationship:**  Dependent / Child  Family Member  Friend  Parent  Self  Spouse / Domestic Partnership  Other

**Does this member currently receive income?**

(Refer to income tool tip on page 2)

Yes  No

**Household Member - All fields required if applicable**

Name: (First, Middle, Last)

Date of Birth: (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

**Relationship:**  Dependent / Child  Family Member  Friend  Parent  Self  Spouse / Domestic Partnership  Other

**Does this member currently receive income?**

(Refer to income tool tip on page 2)

Yes  No

**Household Member - All fields required if applicable**

Name: (First, Middle, Last)

Date of Birth: (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

**Relationship:**  Dependent / Child  Family Member  Friend  Parent  Self  Spouse / Domestic Partnership  Other

**Does this member currently receive income?**

(Refer to income tool tip on page 2)

Yes  No

**Mortgage Information**

**Property Type-** Select one:  Condominium  Manufactured  Single-family detached home (not connected to another home)  Townhouse/duplex  Two -to- four-unit home

**Mortgage Type** – Select One:  Conventional  FHA  No mortgage / N/A  Reverse Mortgage  USDA  VA  Don't Know

**Reason for Hardship - All fields are required**

**Reason** – Select One:  Increased childcare costs  Increased costs due to healthcare  Increased costs due to care for a family member  Increased expenses due to quarantine  Job loss or other reduction in income  Other – Hardship Reason Details:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**What was the date your COVID hardship began?**  
 (If your hardship was before COVID and exacerbated by the pandemic please enter 1/21/2020)

**Date of Hardship:** (mm/dd/yyyy)  
 \_\_\_\_/\_\_\_\_/20\_\_\_\_

**Has your household received other Covid Related Mortgage / Rental Assistance?**

Source	Date (mm/dd/yyyy)	Amount (\$)
	____/____/20____	
	____/____/20____	
	____/____/20____	

**Household Financial Information - At least one field is required**

<b>Gross Monthly Income</b>					
<b>Description</b>	<b>Applicant Gross Monthly Amount</b>	<b>Co-Applicant Gross Monthly Amount</b>	<b>Household Member 1 Gross Monthly Amount</b>	<b>Household Member 2 Gross Monthly Amount</b>	<b>Household Member 3 Gross Monthly Amount</b>
<b>Employment Income</b>					
<b>Self-Employment Income/ Schedule C/ Business Income</b>					
<b>Bonus/Overtime Pay</b>					
<b>Unemployment /Workers Compensation</b>					
<b>Income from Social Security/Social Security Disability</b>					
<b>Income from pension(s)/Retirement</b>					

Alimony/Child Support					
Rental Income from multi-unit property					
Armed Forces payment(s)					
Other Income					
<b>Total Gross Monthly Income per Member</b>					

<b>Total Household Gross Monthly Income</b> - Combine all above total gross monthly income fields, place total below.	
<b>Total Household Gross Monthly Income:</b>	<b>Amount (\$):</b> _____

**Household Qualified Expenses** At least one field is required- only complete the fields in which you are requesting assistance for.

Description	Payee/Creditor	Loan/ Customer Account #	Payment Amount	Current Due Date	Total Past Due Amount	Payment Frequency
Mortgage						
Homeowner's Insurance (if not escrowed/not included in your monthly mortgage payment)						
Real Estate Taxes (if not escrowed/not included in your monthly mortgage payment)						
Condominium/Homeowner's Association Fees						
Condominium/Homeowner's Association Special Assessments						
Ground lease or lot payments						
Water/Sewer Lien						
<b>Total Expenses</b>						

**Questions and Answers - All questions are required to be answered**

Are you currently in an active (not discharged) bankruptcy? - Select one:  Yes  No

Do you need assistance bringing your mortgage current? – Select One:  Yes  No

Do you need assistance making your full monthly mortgage payment (whether current now or after being brought current)? - Select One:  Yes  No

Do you need assistance bringing other eligible qualified expenses current which may include, non-escrowed (not included in your monthly mortgage payment) real estate property taxes or homeowner's insurance, condominium/homeowner's association fees, condominium/homeowner's association special assessment, water/sewer liens, ground lease or lot payments? – Select One:  Yes  No

Do you need assistance making the upcoming periodic payments on eligible qualified expenses (expenses that are not included in your mortgage payment)? - Select One:  Yes  No

Do you have a Foreclosure Sale/Law Date? - Select One:  Yes  No  Don't Know

Sale/Law Date: (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/20\_\_\_\_

Are you currently working with a resource center or housing counseling agency?  Yes  No

If yes: HCA/ Resource Center Name Select one:

- Access Agency
- Alliance for Community Empowerment
- BNT (Bridgeport Neighborhood Together)
- Capital for Change
- Community Action Agency of NH
- Mutual Housing Association of Greater Hartford
- Mutual Housing Association of South Central Connecticut (Neighborhood Housing Works New Horizons)
- Neighborhood Housing Services of New Britain
- Neighborhood Housing Services of New Haven (New Haven Homeownership)
- Neighborhood Housing Services of Waterbury
- New London Homeless Hospitality Center

	<ul style="list-style-type: none"><li><input type="checkbox"/> Thames Valley Council for Community Action</li><li><input type="checkbox"/> The Workplace</li><li><input type="checkbox"/> Urban League of Greater Hartford</li><li><input type="checkbox"/> Urban League of Southern Connecticut</li><li><input type="checkbox"/> Not working with an Agency</li></ul>

**MyHomeCT**  
**(Connecticut's Homeowner Assistance Fund Program)**  
**Third Party Authorization**



“I” and “My” means and refers to individually and collectively the undersigned Owner(s) and/or Mortgagor(s), and any non-owner borrower identified below.

“Servicer” means the Owner’s first mortgage lender/servicer whether or not specifically identified below.

“Creditor” means a person or entity, other than a Lender or Servicer, to which the Owner owes a debt that may result in a lien or in the loss of the Owner’s principal dwelling.

“Third Party” means individually and collectively the Owner’s homeowner’s insurance company or agent, flood insurance company, condominium association/HOA, town taxing authority, water or sewer district, landlord under a ground lease or lot lease (if any), attorney, or other designated representative (including their employees, contractors, subcontractors, agents, successor, and assigns), whether or not specifically identified below.

I authorize the Servicer and any Creditor (including their respective legal representatives) and any Third Party (including their legal representatives) to obtain, share, release, discuss, and otherwise provide to and with each other my public and non-public personal information contained in or related to my mortgage loans, insurance policies and associated premiums, tax and homeowner payment obligations. This information may include (but is not limited to) the name, address, telephone number, social security number, credit score, credit report, income, government monitoring information, loss mitigation application status, account balances (including liabilities), program eligibility, and payment activity of the Owner and non-owner borrower. I also understand and consent to the disclosure of my personal information and the terms of any applications, agreements, or other communications under Homeowner Assistance Fund Programs by Servicer, any Creditor, Third Party, the State HFA, or the State of Connecticut Department of Housing to the State of Connecticut Department of Housing or the U.S. Department of the Treasury or their agents in connection with their responsibilities under the American Rescue Plan Act of 2021.

The Servicer, any Creditor, and any Third Party is authorized to take such steps as it may deem reasonable to verify the identity of a Third Party, but has no responsibility or liability to verify the identity of such Third Party. The Servicer and any Creditor also have no responsibility or liability for what a Third Party does with such information.

**Before signing this Third Party Authorization, beware of foreclosure rescue scams!**

- A HUD-approved housing counselor, HFA representative or other authorized third party may work directly with the Owner’s lender/mortgage servicer.
- The Owner can visit <https://www.hud.gov/findacounselor> to identify a HUD-approved housing counseling agency.
- Beware of anyone who asks for a fee in exchange for a counseling service or modification of a delinquent loan.

\_\_\_\_\_  
**First Mortgage Lender/Servicer Name, if applicable**

\_\_\_\_\_  
**Account/Loan Number**

**Property Address:** \_\_\_\_\_

All owners and non-owner borrowers should sign this Third Party Authorization. This Third Party Authorization is not revocable except as otherwise required by applicable law.

**I UNDERSTAND AND AGREE WITH THE TERMS OF THIS THIRD-PARTY AUTHORIZATION:**

**Owner/Borrower:**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

## Agreement for the MyHomeCT Program

The State of Connecticut Department of Housing (“DOH”) is conducting the U.S. Department of the Treasury’s Homeowner Assistance Fund (“HAF”) program that is being administered by the Connecticut Housing Finance Authority. The HAF program is known as MyHomeCT in the state of Connecticut. This program is designed to assist eligible homeowners who have experienced a qualifying financial hardship due to COVID-19.

### 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.

“Agreement” means this Agreement for the MyHomeCT program

“Application” means Applicant’s Application, whether completed electronically or in written form, for the MyHomeCT Program.

“Creditor” means the person or entity to which a Qualified Expense is due.

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

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

“Program” means the MyHomeCT Program.

“Property” means the Applicant’s principal dwelling.

“Qualified Expense” means certain housing related expenses that are eligible under Program guidelines.

“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 Agreement, each Applicant hereby:

- a) certifies and attests to the Agencies and to the Treasury Department that the information contained in the Application and all supporting documents submitted to the Agencies 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 the Application and all submitted supporting documents and in this Agreement in making decisions in awarding assistance in connection with the Program.
- c) authorizes any Lender and any Servicer of the Applicant’s Loan(s) or any Creditor of a Qualified Expense to: (i) procure information from third persons (including an IRS transcript of my tax returns); and (ii) 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 or Qualified Expense.

- d) consents to the sharing of any information any Lender, Servicer or other Creditor (regardless of whether the Lender, Servicer or Creditor are specifically identified herein) may have with the Agencies and the Treasury Department and with service providers for purposes of processing the Application, and agree that any funds disbursed on the Applicant's behalf shall be applied by the Lender and Servicer of such Loan or Creditor of such Qualified Expense, as an Agency may direct.
- e) authorizes any employer to provide to the Agencies, Servicer, Creditor and the Treasury Department any information which an Agency, Servicer, Creditor 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 Program (if awarded) may be up to \$50,000.00 (but that the Agencies are under no obligation to make an award and that funds for this Program are limited).
- i) agrees that any and all Applicants named in the Application 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 the Application.
- j) agrees that: (I) the Agencies, the Treasury Department, Servicer, Lender and Creditor 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, Lender and/or Creditor 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, Creditor, 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, Creditor, or any person in connection with the Application.
- 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, and that the Applicants experienced financial hardship within Program guidelines.
- o) will continue to own and occupy the Property for so long as assistance under this Program is provided, and to notify the Agencies immediately if the Applicant accepts a contract to sell the Property or no longer occupies the Property.

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

***Owner/Borrower:***

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

# CHFA Privacy Policy

[www.chfa.org](http://www.chfa.org)

<b>FACTS</b>	<b>WHAT DOES CONNECTICUT HOUSING FINANCE AUTHORITY (CHFA) DO WITH YOUR PERSONAL INFORMATION?</b>
<b>Why?</b>	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
<b>What?</b>	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> <li>• Social Security number and income</li> <li>• Account balances and payment history</li> <li>• Transaction and assets</li> </ul> <p>When you are <i>no longer</i> our customer, we continue to share this information about you as described in this notice.</p>
<b>How?</b>	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons CHFA chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does CHFA share?	Can you limit this sharing?
<b>For our everyday business purposes</b> – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus.	<b>Yes</b>	<b>No</b>
<b>For our marketing purposes</b> – to offer our products and services to you	<b>No</b>	<b>No</b>
<b>For joint marketing with other financial companies</b>	<b>No</b>	<b>We don't share</b>
<b>For our affiliates' everyday business purposes</b> – information about your transactions and experiences	<b>No</b>	<b>We don't share</b>
<b>For our affiliates' everyday business purposes</b> – information about your creditworthiness	<b>No</b>	<b>We don't share</b>
<b>For our affiliates to market to you</b>	<b>No</b>	<b>We don't share</b>
<b>For non-affiliates to market to you</b>	<b>No</b>	<b>We don't share</b>

<b>Questions?</b>	Call 860-721-9501 or visit us online at <a href="http://www.chfa.org">www.chfa.org</a>
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## Who we are

Who is providing this notice?	Connecticut Housing Finance Authority (CHFA)
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## What we do

How does CHFA protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does CHFA collect my personal information?	<p>We collect personal information, for example, when you:</p> <ul style="list-style-type: none"> <li>· Give us your income information, apply for financing, provide account information, give us your contact information, provide your mortgage information</li> </ul> <p>We also collect your personal information from others, such as credit bureaus, affiliates or other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only:</p> <ul style="list-style-type: none"> <li>· Sharing for affiliates' everyday business purposes - information about your creditworthiness;</li> <li>· Affiliates from using your information to market to you;</li> <li>· Sharing for nonaffiliates to market to you.</li> </ul> <p>State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.</p>

## Definitions

Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> <li>· CHFA does not share with affiliates.</li> </ul>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> <li>· CHFA does not share with nonaffiliates to enable them to market to you.</li> </ul>
Joint Marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> <li>· CHFA does not joint market.</li> </ul>

## Other important information

State Laws	Connecticut Law may provide you additional rights to limit sharing.
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Resource Center	Location(s)	Phone Number	Resource Center Details	Resource Center Hours
Access Agency	1315 Main Street, Suite 2, Willimantic, CT  231 Broad Street Danielson, CT	(860) 450-7400 (Willimantic)  (860) 412-1600 (Danielson)	Appointments only and Virtual appointments available.	Monday - Friday 8:00am - 4:00pm
Alliance for Community Empowerment	1070 Park Avenue, Bridgeport, CT  1768 East Main Street, Bridgeport, CT	(203) 366-8241	Both sites accept walk-ins and over the telephone clients.	Monday - Friday 8:30am - 4:30pm
* BNT (Bridgeport Neighborhood Trust)	570 State Street, Bridgeport, CT	(203) 290-4255 Ext. 106	In-person & virtual appointments available. Walk-ins welcome. Spanish available.	Monday - Friday 9:00am - 5:00pm
* Capital for Change	10 Alexander Drive, Wallingford, CT	(203) 233-5165 Ext. 2056	Appointment only.	Monday - Friday 9:30am - 4:00pm
Community Action Agency of New Haven	419 Whalley Avenue, New Haven CT	(203) 768-4791	In-person and virtual appointments available.	Monday - Friday 9:00am - 4:00pm
* Mutual Housing Association of Greater Hartford	95 Niles Street, Hartford, CT	(860) 206-5266	In-person and virtual appointments. Spanish available. Evening hours available by appointment.	Monday - Friday 9:00am - 5:00pm
* Mutual Housing Association of South Central Connecticut (NeighborWorks New Horizons)	235 Grand Avenue, New Haven, CT	(203) 562-4514 Ext. 105	Appointment only. Virtual appointments available. Spanish available.	Monday - Friday 9:00am - 5:00am
* Neighborhood Housing Services of New Britain	223 Broad Street, New Britain, CT	(860) 224-2433	Walk-ins welcome. Spanish available.	Mon. – Wed. 8:00am - 5:00pm, Thursday 8:00am - 6:00pm, Friday 8:00am - 1:00pm

Resource Center	Location(s)	Phone Number	Resource Center Details	Resource Center Hours
*Neighborhood Housing Services of New Haven (New Haven Homeownership Center)	333 Sherman Avenue, New Haven, CT	(203) 777-6925 Ext. 226	Appointments only. Virtual appointments available.	Monday - Friday 9:00am - 5:00pm
*Neighborhood Housing Services of New Haven (New Haven Homeownership Center)	333 Sherman Avenue, New Haven, CT	(203) 777-6925 Ext. 226	Appointments only. Virtual appointments available.	Monday - Friday 9:00am - 5:00pm
*Neighborhood Housing Services of Waterbury	193 Grand Street, 3rd Floor, Waterbury, CT	(203) 753-1896	Appointment preferred, Walk-ins welcome before 3:00pm.	Mon. – Wed. 8:45am - 5:00pm, Thursday 8:45am - 7:00pm, Friday 8:45am - 12:45pm
New London Homeless Hospitality Center	727 Bank Street, New London CT	(860) 501-9900	Appointment preferred. Walk-ins welcome.	Monday - Friday 9:00am - 4:00pm, Saturday 9:00am - 12:00pm
New Opportunities of Greater Meriden	55 West Main Street, 3 <sup>rd</sup> Floor, Meriden CT	(203) 639-5060	Appointment only.	Monday - Friday 7:30am - 5:00pm
New Opportunities of Greater Torrington	62 Commercial Blvd., Torrington	(860) 482-9749	Appointment only.	Monday - Friday 8:00am - 5:00pm
New Opportunities Headquarters – Family Development Center	232 North Elm Street, Waterbury	(203)575-4301	Appointments and phone screenings available.	Monday - Friday 8:00am - 5:00pm
Thames Valley Council for Community Action	401 W. Thames Street, Unit 201, Norwich, CT  83 Huntington Street, New London, CT	(860) 889-1365	Appointments preferred. Virtual appointments available.	Monday - Friday 8:00am - 4:30pm
The WorkPlace	1000 Lafayette Blvd, Suite 501, Bridgeport, CT  4 Fourth Street, Ansonia, CT	(203) 610-8500	Appointments only. Virtual appointments available.	Monday - Friday 8:30am - 4:30pm
* Urban League of Greater Hartford	140 Woodland Street, 4th FL., Hartford, CT	(860) 527-0147 Ext. 276	Appointments only.	Monday - Friday 9:00am- 5:00pm

<p>* Urban League of Southern Connecticut</p>	<p>137 Henry Street, Suite 202, Stamford, CT</p> <p>136 Sherman Ave, Suite 104, New Haven, CT</p>	<p>(203) 327-5810 Ext. 113</p>	<p>No walk-ins. Appointment only.</p>	<p>Monday 9:30am - 6:00pm, Tues -Thurs 8:30am - 4:30pm, Friday 8:30am - 2:00pm</p>
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\* HUD-approved Housing Counseling Agencies