



San Francisco Redevelopment Agency
Resale Affordable Homeownership Application Packet
200 Brannan Street #114

The San Francisco Redevelopment Agency (the “Agency”), is announcing the Resale of a property located at 200 Brannan Street #114, San Francisco, CA 94107. **The sale of this property is conducted through the realtor and is sold by owner through the Agency’s Limited Equity Program (the “Program”). This property is available to qualified households with a minimum of 2 persons. The income limit is 100% Area Median Income (“AMI”). The purchase price of this property is \$205,720.**

200 Brannan #114 is a vibrant 2 bedroom 2 bath loft style home with over 1400 square feet of living space! The unit has 2 large bedrooms and receives a surprising amount of light in a bottom floor unit! This coveted complex has easy transportation, walking distance to BART, MUNI and Cal Train, as well as MUNI, not to mention 24/7 security, gym, common garden area, large covered parking place, and more. The neighborhood boasts world class restaurants, shopping, parks, weekly farmers market, easy access to both bridges, it’s all good! **This property is represented by Laura Martell of Daniel Winkler and Associates, Inc.**

Please contact Laura Martell directly for assistance with questions about this Property. Please contact the Agency directly with questions about the Program. You are encouraged to attend an Open House on Thursday, September 8, 2011 from 5:00 – 7:00pm OR Sunday, September 11, 2011 from 2:00 – 4:00pm. 200 Brannan Street #114 Application Packets are due by 5:00pm on September 27, 2011, postmarks not accepted. Any Application Packets received after September 27, 2011 will be held in reserve and will be reviewed *if* there are available units. Lottery is October 5, 2011 at 10:00am at the Agency.

200 Brannan Street #114

QUESTIONS ABOUT THE PROPERTY:

Laura Martell- Daniel Winkler and Associates, Inc.
 (415) 948-1282

QUESTIONS ABOUT THE PROGRAM AND TO RETURN COMPLETED APPLICATION PACKETS:

San Francisco Redevelopment Agency
Attention: Kerri Bock-Willmes
 1 South Van Ness Avenue, 5th Floor San Francisco, CA 94103
 (415) 749-2567 Monday-Friday 8:00am – 5:00pm

2011 Maximum Income	
Household Size	100% AMI
2 persons	\$81,300
3 persons	\$91,450
4 persons	\$101,600
5 persons	\$109,750
6 persons	\$117,850



Daniel Winkler and Associates, Inc.
 Complete Real Estate Services

APPLICATION PACKET

Must be completed by ALL Adults (aged 18 and over) in the household
Attach additional pages if needed.

- APPLICATION (pages 2- 8):** *must be completed and signed by ALL adults (aged 18 and over) in the household*

- HOMEBUYER EDUCATION CERTIFICATE (see page 6):**
-from an approved Housing Counseling Agency

- PRE-QUALIFICATION LETTER (from a lender of your choice):**
-Notify your lender that this property is part of the Agency's Program & direct them to our website for details:
www.sfraaffordablehousing.org
-Your prequalification letter must meet Agency loan guidelines (30 year fixed rate mortgage, no mortgage insurance, FHA allowed, 620 middle household credit score, ALL adults on loan, etc.).
-Pre-Qualification letter needs to list **200 Brannan Street #114 & purchase price of \$205,720**

- OTHER REQUIRED ATTACHMENTS:** *submit the following for ALL adults (18 and over) in the household*
 - CA Driver's license, CA ID Card or Passport** (copy)
 - Social Security/Alien Registration Card** (copy)
 - Income/Pay Stubs:** (2) most recent months for ALL sources (June/July/August months)
-Wages, Unemployment, Child Support/Alimony, Retirement/Pension, Social Security/Disability, etc.
-If you are self-employed, submit a year-to-date Profit & Loss Statement
 - Tax Returns*:** (3) most recent years, ALL pages (2008/2009/2010 years)
-include W-2s, schedules, forms, etc.
-include 1099-INT forms for the most recent year (provided by your bank at the end of the year)
-if an account issued a 1099-INT in the most recent year was closed, provide a statement showing proof
*If you did not file for any of the requested years- submit a Verification of Non-Filing from the IRS (800-829-1040). This will take 7-10 days- you may submit this form after your Application Packet.
 - Bank Statements:** (3) most recent statements (June/July/August months*)
-ALL accounts, ALL pages
-Savings, Checking, Credit Union, CD's, etc.
 - Financial Statements:** (3) most recent statements (June/July/August months*)
-ALL accounts, ALL pages
-Retirement/401k/IRA, Stocks, Bonds, Mutual funds, etc.
-*If statements are quarterly, please provide 3 most recent.

You must submit a complete Application Packet to be considered.

Please contact Laura Martell at (415) 948-1282 for assistance with the Property.

Please contact the Agency at (415) 749-2567 for assistance with the Program.

Return Completed Application Packet:

San Francisco Redevelopment Agency

Attention: Kerri Bock-Willmes

1 South Van Ness Avenue, 5th Floor San Francisco, CA 94103

(415) 749-2567 Monday-Friday 8:00am-5:00pm

APPLICATION- Resale 200 Brannan Street #114

Must be completed by ALL Adults (aged 18 and over) in the household

Date Of Application: _____

1) How Did You Hear About The Program? Newspaper: _____ Email: _____
 Mailing: _____ Other: _____

2) Are You A First-Time Homebuyer? Yes No
 -First-Time Homebuyer is defined as not having owned ANY residence in the past three years.
(If No, you are not eligible for the Program)

3) Do You Have Any Ownership Interest In Any Real Property? (ALL geographic locations) Yes No
 - Residential (primary residence, rental, etc.): Yes No (If Yes, you are not eligible for the Program)
 - All Other (commercial, raw land, timeshares, etc.): Yes No (If Yes, please provide details)

4) Do You Have The Required Minimum 5% Down Payment (\$7,161)? Yes No
 Of the 5%, 3% must be your own funds held in a financial institution & 2% can be gift funds, not yet received.
(If No, you are not eligible for the Program)

5) Are Any Adult Household Members A Full Or Part-Time Student? Yes No
 If Yes, please give name of household member(s) & student status: _____
(If ALL adult members in your household are full-time students, you are not eligible for the Program)

6) Are You A SF Redevelopment Agency Certificate Of Preference* Holder? Yes No
 *Certificates of Preference holders are primarily households displaced by Agency action in Redevelopment Project Areas during the 1960's and 1970's. San Francisco Redevelopment Agency Certificate Hotline: 415-749-2432.

7) Were You Referred To This Project By A Real Estate Agent? Yes No
 If Yes, please list name: _____

HOUSEHOLD MEMBERS

List ALL person(s) who intend to occupy the home.

ALL unrelated members of the household must live together at the time of application.

	Name	Age	Date of Birth	Relationship to Primary Applicant
Primary Applicant				-Self-
Household Member #2				
Household Member #3				
Household Member #4				

8) What Is Your Household Size? _____ (Minimum 1 person per bedroom required)

9) What Is Your Annual Household Income? \$ _____ (ALL adults- aged 18 and over- in the household)

APPLICANT INFORMATION

Primary Applicant		Household Member #2	
Name:		Name:	
Preferred Contact Phone #: () -		Preferred Contact Phone #: () -	
Alternate Phone #: () -		Alternate Phone #: () -	
Email Address:		Email Address:	
Social Security #:		Social Security #:	
Marital/Domestic Partner Status:		Marital/Domestic Partner Status:	
Present Address (Street, City, Zip Code):		Present Address (Street, City, Zip Code):	
Monthly Rent Payment: \$		Monthly Rent Payment: \$	
If less than 2 years, Former Address (Street, City, Zip Code):		If less than 2 years, Former Address (Street, City, Zip Code):	
Household Member #3		Household Member #4	
Name:		Name:	
Preferred Contact Phone #: () -		Preferred Contact Phone #: () -	
Alternate Phone #: () -		Alternate Phone #: () -	
Email Address:		Email Address:	
Social Security #:		Social Security #:	
Marital/Domestic Partner Status:		Marital/Domestic Partner Status:	
Present Address (Street, City, Zip Code):		Present Address (Street, City, Zip Code):	
Monthly Rent Payment: \$		Monthly Rent Payment: \$	
If less than 2 years, Former Address (Street, City, Zip Code):		If less than 2 years, Former Address (Street, City, Zip Code):	
ETHNICITY/RACE			
Check ALL boxes that apply to household			
<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American	
<input type="checkbox"/> Alaska Native	<input type="checkbox"/> Native Hawai'ian	<input type="checkbox"/> White	
<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Latino	

10) Do You Receive Any Other Income? Yes No

If yes, please list ALL sources below.

OTHER INCOME			
Wages, Additional Jobs, Unemployment, Child Support, Alimony, Retirement/Pension, Social Security, Disability, etc.			
Primary Applicant		Household Member #2	
Source	Monthly Amount	Source	Monthly Amount
	\$		\$
	\$		\$
Household Member #3		Household Member #4	
Source	Monthly Amount	Source	Monthly Amount
	\$		\$
	\$		\$

11) Have You Disclosed ALL Sources Of Income? Yes No

HOMEBUYER EDUCATION CERTIFICATE- Approved Housing Counseling Agencies		
PLEASE INDICATE WHERE YOU RECEIVED YOUR CERTIFICATE:		
<input type="checkbox"/> Asian, Inc. (415)928-5910 www.asianinc.org	<input type="checkbox"/> SFHDC (415)822-1022 www.sfhdc.org	<input type="checkbox"/> MEDA (415)282-3334 www.medasf.org
<input type="checkbox"/> CCCSF (800)777-7526 www.cccssf.org	<input type="checkbox"/> LGBT Center (415)856-5658 www.sfcenter.org	
Note: Certificates issued by SFUrbanCHC within the last 2 years will be accepted.		
If you would like assistance in locating a Homebuyer Education Class, please contact Homeownership SF at www.homeownershipsf.org or 415-202-5463.		

ASSET TEST
<p>Please note that the Agency will perform an asset test to determine imputed income from assets. The amount calculated in this test will be included in Total Income (Gross / Yearly), even though your assets may not yield that actual income. Prior to performing the asset calculation, the Agency does the following:</p> <ul style="list-style-type: none"> • \$15,000 is subtracted from total assets to account for savings needed for down payment/closing costs. • Retirement funds are not included in the Asset Test. <p>You are advised not to move funds until instructed to do so by a lender as part of the escrow process.</p>

**Please Note- The Agency Requires That You Disclose ALL Assets (including cash).
Failure To Disclose May Result In Disqualification.**

ASSET INFORMATION

Savings, Checking, Credit Union, CD's, Stocks, Bonds, Mutual Funds, Retirement/401k/IRA, Cash, etc.
Do not include gift funds not yet received.
Attach additional pages if needed.

Owner	Type of Asset	Account Name	Account #	Amount	Date
<i>Example 1: Primary Applicant</i>	<i>Savings</i>	<i>Bank of SF</i>	<i>12345</i>	<i>\$10,000</i>	<i>3/1/2010</i>
<i>Example 2: Household Member #2</i>	<i>Retirement</i>	<i>US Investments</i>	<i>678910</i>	<i>\$20,000</i>	<i>3/6/2010</i>

TOTAL \$

12) Have You Disclosed ALL Assets (Including Cash)? Yes No

13) Do You Plan To Use Gift Funds? Yes No

If yes, please list ALL sources below.

GIFT FUNDS*

List the amount of gift funds from family/friends, not yet received, that you intend to use to purchase a unit.

Primary Applicant		Household Member #2	
Source/Name	Amount	Source/Name	Amount
	\$		\$
Household Member #3		Household Member #4	
Source/Name	Amount	Source/Name	Amount
	\$		\$

***Gift Funds:** This amount is considered an asset and will be counted in the income/asset calculation to determine Program eligibility. Also, your loan qualification will be based on the amount of gift funds listed. Guidelines: 1) You may **only** increase the amount of gift funds if the lender requires more funds for down payment/closing costs **and** requests approval from the Agency in advance. 2) You may use fewer funds than listed when purchasing the home; however, that will not change the amount of gift funds used to calculate your income/assets; 3) If the Agency determines that the amount of gift funds listed put you over the Program income limit, we will allow you to decrease this amount (as long as funds are not in your name) to bring you back under the income limit.

**APPLICANT ACKNOWLEDGEMENT AND
PERSONAL INFORMATION DISCLOSURE AUTHORIZATION**

Must be completed by ALL Adults (aged 18 and over) in the household

- I agree to provide documentation required by the Agency to verify Program eligibility of all household members.
- I verify that I intend to occupy this home as my primary residence.
- I understand that if I am approved to purchase a unit through the Agency, I will be required to sign several documents including a Promissory Note, Deed of Trust, and Declaration of Restrictions and Option to Purchase Agreement.
- By my signature below, I hereby authorize the San Francisco Redevelopment Agency to release to the Developer and/or Sales Agent, Realtor, Lender, approved housing counseling agencies, and their employees and agents, my personal information contained in this Application Packet for the purpose of determining eligibility for the Agency's Limited Equity Program. I understand that this information, except for my name, address and phone number, will not be shared with or sold to any other third parties. My name, address and phone number may be disclosed pursuant to the Agency's Public Records Policy adopted by Agency Resolution #182-2005.
- I have listed ALL persons in my household.
- I have provided acceptable verification of ALL current income.
- I have also disclosed ALL assets held by each household member, and have provided documentation thereof.
- I understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of the purchase. I declare under penalty of perjury that the information on this application is true, correct and complete to the best of my knowledge.

Signatures:

_____ Primary Applicant Signature	_____ Primary Applicant Printed Name	_____ Date
_____ Household Member #2 Signature	_____ Household Member #2 Printed Name	_____ Date
_____ Household Member #3 Signature	_____ Household Member #3 Printed Name	_____ Date
_____ Household Member #4 Signature	_____ Household Member #4 Printed Name	_____ Date