



AFFORDABLE HOUSING PARTNERSHIP PROGRAM

SUPPLEMENT TO THE MORTGAGE SUBMISSION VOUCHER, PART 1

(Form must be typed and fully completed)

Lender Name: _____

Borrower Name(s): _____

Local Government Agency: _____

Address: _____

Contact: _____ Phone: _____

Fax: _____

Amount of Local Government Assistance: \$ _____

Nature of Local Government Financial Assistance (must be direct financial assistance):

- Subordinate Loan Closing Cost Assistance Down Payment Assistance
- Other (Describe type): _____
- Describe terms and nature of Local Government Financial Assistance: _____
- _____
- _____

Indicate the appropriate answer(s):

1. Does the assistance include resale controls? Yes No
2. Have the subordinate loan/resale control documents been approved by CalHFA?
Yes No Not Applicable
3. Has the Subordinate Lender/CalHFA Agreement (see Bulletin #2002-18) been executed between Local Government Agency and CalHFA?
Yes No Not Applicable

NOTE: FAILURE TO SUPPLY A FULLY COMPLETED ADDENDUM TO THE MSV, PART 1 WILL RESULT IN DENIAL OR DELAY OF THE LOAN RESERVATION.