



Exhibit E - Applicant's and Adult Household Member's Certification and Authorization

The Undersigned certify the following:

1. I/We have applied for the Home Buyer/Below Market Rate (BMR) Program to purchase a home. I/We completed a Program Application with information about all our household members, income, assets and liabilities. I/We certify under penalty of perjury that all of the information is true and complete. I/We made no misrepresentations in our Program Application or other documents, nor did I/We omit any pertinent information.
2. I/We understand and agree that HouseKeys reserves the right to verify any information provided on our Program Application with the employers, financial institutions, government agencies, landlords, credit reporting bureaus, lenders, etc.
3. I/we understand that if one or more of the household members misrepresent any information, provide any conflicting, inaccurate or false information in order to obtain qualification, the household will be deemed ineligible to participate in the program.

Authorization to Release Information

To Whom It May Concern:

4. I/we authorize HouseKeys to release and share my/our information with the City, Other Time Homebuyer Programs, Funders, Down Payment Assistance Programs, Lenders, NeighborWorks of America and HUD.
5. I/We have applied for the Program through HouseKeys. As part of the application process, HouseKeys may verify information contained in my/our Program Application and in other documents required in connection with this program for determination of eligibility to purchase a Home Buyer/Below Market Rate (BMR) Program.
6. I/We authorize you to provide HouseKeys, City, County or Program Providers in connection with the purchase/ownership of a Home Buyer/Below Market Rate (BMR) Program home, any and all information and documentation that they may request. Such information includes, but is not limited to, employment history and income sources, investment accounts, bank account balances, credit history, mortgage information, real estate ownership, rental history verification, and income tax returns, etc.
7. A copy of this authorization may be accepted as an original.

PLEASE USE ADDITIONAL FORMS IF NEEDED

Borrower Name: _____ Signature _____

SSN: _____ Date: _____

Co- Borrower Signature Name: _____ Signature _____

SSN: _____ Date: _____

Additional Adult Household Member Name: _____ Signature _____

SSN: _____ Date: _____

Additional Adult Household Member Name: _____ Signature _____

SSN: _____ Date: _____