



## Homeownership Program (HOP) Application

**\*THIS PROGRAM IS ONLY AVAILABLE TO CURRENT LMHA HCV PARTICIPANTS\***

Voucher Holder's Name: _____		SS#: _____
Address: _____		
	Apt. # _____	City _____
Home Phone: _____	Best Time to Call: _____	
Cell Phone: _____	Best Time to Call: _____	

Are you currently receiving Housing Choice Voucher (Section 8) assistance from LMHA? \_\_\_ Yes \_\_\_ No

Are you currently employed? \_\_\_ Yes \_\_\_ No

If yes, how much do you make an hour? \_\_\_\_\_ How many hours you work per week? \_\_\_\_\_

Have you been full time employed (average of 30 hours a week) for one year? \_\_\_ Yes \_\_\_ No

If you are not employed, what type of income do you have? \_\_\_\_\_

How much per month do you receive? \_\_\_\_\_

Have you ever owned a home before? \_\_\_ Yes \_\_\_ No

If yes, please list dates and places: \_\_\_\_\_

When was the last time you checked your credit? \_\_\_\_\_

Do you know what your credit score is? \_\_\_ Yes \_\_\_ No If so, what is it? \_\_\_\_\_

Have you ever declared bankruptcy? \_\_\_ Yes \_\_\_ No If so, what year? \_\_\_\_\_

**\*\*\* Please attach a copy of at least one of your most recent credit reports. You can get your credit reports for free at <http://www.annualcreditreport.com>.\*\*\***

*Note: Your answers to the above questions will be used to assess your eligibility in the HOP program. Please answer all questions as completely and honestly as possible.*

I understand that this is an application for the Housing Choice Voucher (Section 8) Homeownership Program (HOP). I also understand that the number of people that can be accepted into this program is limited and that no guarantee of acceptance into the program has been made or implied by Lake Metropolitan Housing Authority. Participants in HOP must meet certain guidelines and criteria as outlined by HUD rules and Regulations and LMHA policy. Applications for HOP are taken by date and time and processed based on eligibility of participant and availability of open slots for participation.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



189 First Street • Painesville, Ohio 44077  
440.354.3347 • fax 440.354-5008 • TDD/TTY 711 or 800.750.0750  
[www.lakehousing.org](http://www.lakehousing.org)

**To be eligible for the homeownership program families must meet these requirements:**

- ❖ Must be a current voucher holder in the HCV Program at Lake MHA
- ❖ Not have a current outstanding debt with LMHA
- ❖ Must be in full compliance with their lease and HCV program requirements
- ❖ Meet minimum income requirement:
  - Non elderly/disabled families – The income of adult family members who will own the home must not be less than **\$14,500** (the Federal minimum hourly wage multiplied by 2000)
  - Elderly/disabled families – The income of adult family members who will own the home must not be less than **\$9,252** (the monthly Federal Supplemental Security Income (SSI) benefit for an individual living alone multiplied by 12) Welfare assistance can be counted in determining whether the family meets the minimum income requirement
- ❖ Non-elderly/disabled families must meet the employment requirement. One or more adults in the family who will own the home must be currently employed on a full time basis (average of 30 hours per week) and have been continually employed on a full time basis for at least one year
- ❖ Qualify as a first time home buyer
- ❖ No family member has owned or had ownership interest in their residence for at least 3 years
- ❖ No member of the family has any ownership interest in any residential property
- ❖ Has not defaulted on a mortgage while participating in the Homeownership Program