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**Assumption of a New York State Housing Trust Fund Corporation HOME Program Grant Enforcement Mortgage Directions**

The HOME Program Grant Enforcement Mortgage (Note and Mortgage) may potentially be assumed with its original terms and conditions by another HOME-eligible buyer during the term of the Note and Mortgage or Period of Affordability (POA). The Local Program Administrator (LPA) is required to assist the current owner by qualifying the potential new home buyer and submitting documentation to the HTFC for review. It is within the HTFC’s sole discretion to agree to permit an assumption of its HOME Grant Enforcement Mortgage.

Documentation required for review:

1. The currently recorded HOME Note & Mortgage including the corresponding County Clerk recording. It must contain a clause allowing assumption and *the clause must be allowed by HOME Program regulations based on the dates of the Note and Mortgage and the dates the regulations allowing assumption took effect.*
2. The contract of sale
3. The new mortgage commitment, which must reflect a fixed-rate mortgage with a reasonable interest rate free of other predatory terms such as balloon payments, negative amortization, and similar terms.
4. LPA income eligibility calculation for proposed home buyer and source documentation required by HOME regulations used to establish the eligibility of proposed new homebuyer. HTFC shall when available ensure the eligibility complies with the respective HOME contract between HTFC and the LPA.
5. Completed form attached

All documentation must be submitted to HTFC for approval. ([HomeProgram@hcr.ny.gov](mailto:HomeProgram@hcr.ny.gov))

Allow approximately 10 business days for review and response. If the HTFC determines the new homebuyer is not eligible to assume the HOME Note & Mortgage, the grant must be recaptured and repaid to HTFC according to guidelines by the seller and LPA.

The LPA shall arrange for a copy of the fully executed and recorded deed or conveyance to be sent to HTFC at its offices at 38-40 State Street, Albany, New York 12207.

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| **KATHY HOCHUL**  Governor | **RUTHANNE VISNAUSKAS**  Commissioner/CEO |  |

**Assumption Request Form**

This form is required to provide the information necessary for the HTFC to respond to a request for assumption of a HOME Grant Enforcement Mortgage (Note and Mortgage). It is within the HTFC’s sole discretion to agree to permit an assumption of its HOME Grant Enforcement Mortgage (Note and Mortgage).

Submit to [HOMEProgram@hcr.ny.gov](mailto:HOMEProgram@hcr.ny.gov)

LPA Name:  HOME SHARS ID: HOME IDIS Activity #:

Original Grant to Homeowner: **$** Original Note and Mortgage: **$**

HOME Grant Enforcement Mortgage (Note and Mortgage) Recording Information:

Current Homeowner(s) (*first initial, last name*):

Mortgage Property Address:

Date of HOME Mortgage (*ex. June 12, 2015*):

County: Recording Date (*ex. June 12, 2015*):

Liber:  Page:  OR Control/Instrument #:

New Borrower Information:

Purchaser(s) (*first initial, last name*):

Purchaser’s Current Address:

Lending Institution (to which HTFC is requested to subordinate its HOME Note & Mortgage):

Amount of New Loan: $ Interest Rate:

Purchase Price: $ Contract Date:

Purchaser’s Statement:

I hereby agree to assume the HOME Grant Enforcement Mortgage (Note and Mortgage) and take possession to the property as my primary residence subject to the terms and conditions thereof, including but not limited to the Recapture Obligations set forth therein.

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Purchaser -Signature Date

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

Purchaser -Signature Date

LPA Recommendation

The signature below certifies we have qualified the new homebuyer as HOME-eligible and the assumption of the HOME Grant Enforcement Mortgage (Note and Mortgage) is allowed. We have reviewed and retained the documents and information listed above.

We hereby recommend the approval of the proposed Assumption

Name of Grantee:

Address:

Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_