Kansas Housing Loan Deposit Program

Borrower's Certification of Eligibility

Date: _____

For purposes of obtaining an operating loan under the provisions of the Kansas Housing Loan Deposit Program, created by K.S.A. 75-4276 *et seq*, the undersigned housing borrower hereby certifies the following:

This loan is for a (check one):

 \Box residential home \Box adult care home \Box assisted living, residential health care, or home plus facility

- 1. The undersigned is a person, firm, or corporation involved in building newly constructed residential structures or rehabilitating existing residential structures, as defined in K.S.A. 75-4277.
- 2. The initial sale or appraisal of the home will be at or below values as defined in K.A.R. 3-3-2.
- 3. The loan obtained pursuant to the Kansas Housing Loan Deposit Program will be used exclusively for the expenses involved in building or rehabilitating residential structures as defined in K.S.A. 75-4277 in Kansas.
- 4. For adult care homes, assisted living, residential healthcare, and home plus facilities, the undersigned is a not-for-profit entity that meets the definitions of K.S.A. 39-923.

Borrower(s) Printed Name(s)			Date				
		, KS					
Address		City	Zip				
Primary Borrower Signature Co-Borrower Signature			SSN/FEIN				
			SSN/FEIN				
STATE OF KANSAS							
COUNTY OF	, SS:						
Public in and for the County a	nd State aforesa	aid, came	, before me, the undersigned, a Notary				
	-		o me to be the same person(s) who execu mowledged the execution of the same.	ited			
6 6	•	• • • •	y official seal the day and year last writte	en			
above.							
Notary Public							

Form to be completed by the borrower and submitted by fax to 785-296-6976.

Kansas Housing Loan Deposit Program

Lending Institution Certification of Compliance

Date:

For purposes of complying with the provisions of the Kansas Housing Loan Deposit Program, created by K.S.A. 75-4276 *et seq*, the undersigned lending institution certifies the following:

- 1. The lender has received written certification from each developer/borrower evidencing their eligibility for this program.
- 2. The lender has approved the housing loan deposit loan package submitted by each developer/borrower based on its internal guidelines of creditworthiness.
- 3. Upon placement of the Housing Loan Deposit Program deposit with the lender, the lender will fund the loan(s) to each approved developer/borrower as hereinafter agreed.
- 4. Per K.A.R. 3-3-2, the State reserves the right to request written verification of the final appraised/sale price of all homes built under this program.

The lending institution hereby agrees to lend an amount equal to the housing loan deposit to the eligible developer/borrower(s) herein named at an interest rate which is not more than 4.00% above the interest rate on the housing production loan deposit as determined under K.S.A. 75-4237. <u>Such interest rate shall be recalculated on the first business day of January and July each calendar year using the market rate then in effect.</u>

The lending institution hereby agrees to reduce the housing loan deposit in an amount equal to any payment of loan principal by the eligible developer/borrower.

The lending institution hereby requests that the State Treasurer accept its request for a total of

\$_______to enable the lender to fund the following loan(s) as provided under the Kansas
Housing Loan Deposit Program:

(The remainder of this page was intentionally left blank.)

Requested Loan Information			For STO Use Only:	
Primary Developer/Borrower	Amount	Maturity Date	Interest Rate (determined by PMIB)	Certification by State Treasurer
Name:				
SSN/FEIN:				
SSN/FEIN:				
SSN/FEIN:				
SSN/FEIN:				
SSN/FEIN:				

The lending institution agrees to issue a separate certificate of deposit, or like instrument, for each housing loan listed above which is approved by the State Treasurer.

Name of Lending Institution			ABA #		Home Office City	
Address of Lending Branch			City, State, Zip			
Authorized Officer S	ignature	Printed	Name	Title		
Officer Phone #	Officer Fax	#	Officer Email	Address	_	
STATE OF KANSA	S					
COUNTY OF	, S	S:				
On this	day of		, 20, be	efore me, the ur	ndersigned, a Notary	
Public in and for the	•					
		-	•		person(s) who executed	
the foregoing instrur	-	-	. ,	-		
	nto subscribed m	iy name and	d affixed my off	ficial seal the da	y and year last written	
above.						
Notary Publ	ic					

Form to be completed by lender and submitted by fax to 785-296-6976.