

Telluride Association of REALTORS® (TAR) First Time Homebuyers Assistance Fund (FTHBAF)

A combined effort of REALTORS®, Title Companies and Lenders

ALL APPLICANTS ARE ENCOURAGED TO APPLY! Please call the TAR OFFICE WITH ANY QUESTIONS!

APPLICATION FORM

PURCHASER INFORMATION:

Name: _____

SS #: _____

Address: _____

Phone #: _____ Email _____

Currently: Own _____ Rent _____

Is Purchaser a first time homebuyer? Yes _____ No _____

Will subject property be used as primary residence? Yes _____ No _____

IF NO EXPLAIN ON BACK OF FORM

Is purchaser related to any Board member of TAR?

Yes _____ No _____ **IF YES EXPLAIN ON BACK OF FORM**

CO-PURCHASER INFORMATION

Name: _____

SS #: _____

Address: _____

Phone#: _____ Email _____

Currently: Own _____ Rent _____

Is Co-Purchaser a first time homebuyer? Yes _____ No _____

Will subject property be used as primary residence? Yes _____ No _____

IF NO EXPLAIN ON BACK OF FORM

Is purchaser related to any Board member of TAR?

Yes _____ No _____ **IF YES EXPLAIN ON BACK OF FORM**

APPLICANT MUST PROVIDE THE FOLLOWING FOR CONSIDERATION:

ENCLOSURES

_____ FULLY EXECUTED CONTRACT FROM REALTOR

_____ LOAN APPLICATION FROM LENDER

_____ GOOD FAITH ESTIMATE FROM LENDER

_____ PERSONAL LETTER REQUESTING FUNDS
(addressed to TAR)

_____ THIS APPLICATION SIGNED AND COMPLETED

INFORMATION

CLOSING DATE _____

LENDER NAME _____

TITLE COMPANY _____

PURCHASE PRICE _____

CASH NEEDED TO CLOSE _____

YEARS RESIDENCY? _____

DOES YOUR REALTOR® GIVE TO THE FTHBAF PROGRAM? CIRCLE ONE:

YES

NO

The undersigned Purchaser(s) have read the Guidelines for Applicants and voluntarily agree(s) and understand(s) the lender is hereby authorized to present this information to the TAR FTHBAF Committee for the sole purpose of aiding the Committee in consideration of the Purchaser(s) request for a grant. I will allow my name to be used in publicity for the fund. I hereby certify that the information disclosed here is accurate and true to the best of my knowledge.

Purchaser's Signature

Date

Co-Purchaser's Signature

Date

PLEASE SUBMIT ALL PAPERWORK INVOLVED IN YOUR REQUEST TO:

Robyn Pale
Executive Vice President
Telluride Association of REALTORS®
PO Box 2485
Telluride, CO 81435
970-728-5172 phone
970-728-5270 fax

DON'T FORGET THE ITEMS ON THE CHECKLIST ABOVE
APPLICATION DEADLINE IS THE LAST WEDNESDAY OF THE MONTH PRIOR TO THE MONTH OF YOUR CLOSING!