AFFORDABLE RESALE

2A Rose Crest Way
Groton MA 01450

Attached is the information you requested regarding the
Two Bedroom Town Home
Sale Price: $262,398

Unit Availability: First Come First Serve

(Applications will **not** be accepted via email)

The first applicant to submit all documentation as noted below will have the first opportunity to purchase

Please **MAIL** 1 copy of all required financial documentation, application affidavit, and disclosure form and mortgage pre-approval to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451

**or**

**DELIVER** To:
206 Ayer Road
Harvard MA 01451

*During Business Hours*
*Monday thru Friday 9AM - 5PM*
Two Bedroom Town Home

2A Rose Crest Way
Groton MA 01450

Sale Price: $262,398

<table>
<thead>
<tr>
<th>Unit Information</th>
<th>Eligibility Criteria</th>
<th>People</th>
<th>Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Bedrooms: 2</td>
<td>1. Income Limits</td>
<td>1</td>
<td>$55,950</td>
</tr>
<tr>
<td># of Bathrooms: 2.5</td>
<td>2</td>
<td>2</td>
<td>$63,950</td>
</tr>
<tr>
<td>Parking: 1 Car Garage</td>
<td>3</td>
<td>3</td>
<td>$71,950</td>
</tr>
<tr>
<td>Year Built: 2009</td>
<td>4</td>
<td>4</td>
<td>$79,900</td>
</tr>
<tr>
<td>Sq. Ft.: 1515</td>
<td>5</td>
<td>5</td>
<td>$86,300</td>
</tr>
<tr>
<td>Heat: Gas</td>
<td>6</td>
<td>6</td>
<td>$92,700</td>
</tr>
<tr>
<td>Appliances: Dishwasher, Microwave, Range</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HOA Fee: $206 / Month</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Estimated Annual Taxes: $2,589 / Year</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2A Rose Crest Way
Groton MA 01450

Sale Price: $262,398

1. Income Limits
2. Asset Limits @ $75,000
3. Must be first time homebuyer
   (exceptions may apply)

Please go to www.mcohousingservices.com for more info and to download the application.

Great Commuter Location

Karen Morand
(978) 235-5595
Harvard MA 01451
www.mcohousingservices.com
REQUIRED FINANCIAL DOCUMENTATION

(Please check circles below to indicate you have included the following documentation in your package)

Following are the required financial documentation. Please provide a copy of all applicable information.

○ a. A mortgage pre-approval letter showing you are able to secure a mortgage. The mortgage must be from a Mass Housing approved lender and they must have determined your mortgage eligibility based on your credit score. An online mortgage pre-approval will not be accepted. This mortgage must be a 30 yr conventional loan.

○ b. Federal Tax Returns –Last 3 years (DO NOT SEND MASS STATE TAXES)

○ c. W2 and/or 1099-R Forms: Last 3 years

○ d. Asset Statement: Current statements including 6 months checking accounts (full statement showing activity/every page front and back), saving accounts (full statement), investment accounts including retirement, certificate of deposit, property, down payment gift amount etc.

○ e. Five (5) consecutive pay stubs ending within one month of unit application for all jobs (check/direct deposit stubs). For unemployment, copies of unemployment checks or DOR verification stating benefits received.

○ f. Social Security: official statement of monthly amount received for year in review and statement of total amount received for latest tax year.

○ g. Pension: statements indicating amount received for year in review and statement of total amount received for latest tax year.

○ h. Child support and alimony: document indicating the payment amount.

○ i. Proof of student status for dependent household members over age of 18 and full-time students.

○ j. If you intend to utilize a gift from a family member to assist with the down payment, please advise us of the gift amount with the name and telephone number of the person providing the gift.

○ k. If you have a home to sell a market analysis is required along with a copy of your last mortgage statement.

MAIL all documentation, mortgage pre-approval, and application to:

MCO Housing Services
P.O. Box 372
Harvard, MA 01451
BUYER APPLICATION

2A Rose Crest Way, Groton MA 01450

PERSONAL INFORMATION

Date: ____________

Name: ____________________________________________________________

Street: _____________________________ Town: ____________________________

Telephone: ________________ Email: _________________________________

Have you owned a home? _____________ If so, when did you sell? ____________

FINANCIAL WORKSHEET: (Include all Household Income, including gross wages, retirement income (if drawing on it for income), business income, veterans benefits, alimony/child support, unemployment compensation, social security, pension/disability income, supplement second income and dividend income.)

Borrowers Monthly Base Income (Gross) _____________________________

Other Income, specify _____________________________

Co-Borrowers Monthly Base Income (Gross) _____________________________

Other Income, specify _____________________________

TOTAL MONTHLY INCOME:

HOUSEHOLD ASSETS: Complete all that apply with current account balances

Checking (avg balance for 3 months) _____________________________

Savings _____________________________

Stocks, Bonds, Treasury Bills, CD or Money Market Accounts and Mutual Funds _____________________________

Individual Retirement, 401K and Keogh accounts _____________________________

Retirement or Pension Funds (amount you can withdraw without penalty) _____________________________

Revocable trusts _____________________________

Equity in rental property or other capital investments _____________________________

Cash value of whole life or universal life insurance policies _____________________________

Down payment Gift _____________________________

TOTAL ASSETS _____________________________
EMPLOYMENT STATUS
(include for all working household members. Attach separate sheet, if necessary)

Employer: ___________________________________________ __________________________
Street Address: _____________________________________ City/State/Zip: _______________________
Date of Hire (approximate): ______________
Annual Wage - Base: ____________________________ (Bonus, Commission, Overtime, etc.)

ABOUT YOUR FAMILY: (OPTIONAL)
You are requested to fill out the following section in order to assist us in fulfilling affirmative action requirements. Please be advised that you should fill this out based upon family members that will be living in the unit. Please check the appropriate categories:

(#{ of Dependent

<table>
<thead>
<tr>
<th>White</th>
<th>Applicant</th>
<th>Co-Applicant</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>________</td>
<td>________</td>
<td>___</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>________</td>
<td>________</td>
<td>___</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>________</td>
<td>________</td>
<td>___</td>
</tr>
<tr>
<td>Native American of Alaskan I</td>
<td>________</td>
<td>________</td>
<td>___</td>
</tr>
<tr>
<td>Cape Verdean</td>
<td>________</td>
<td>________</td>
<td>___</td>
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The total household size is _______ (This is very important to determine the maximum allowable income for your household.)

HOUSEHOLD COMPOSITION (including applicants)

Name ____________________ Relationship__________________ Age_____
Name ____________________ Relationship__________________ Age_____
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Name ____________________ Relationship__________________ Age_____
Name ____________________ Relationship__________________ Age_____

ADDITIONAL INFORMATION:
The MAXIMUM allowable annual income is as follows:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
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<tbody>
<tr>
<td>Max Income Limits</td>
<td>$55,950</td>
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<td>$71,950</td>
<td>$79,900</td>
<td>$86,300</td>
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These income limits are FIRM and cannot be adjusted. Please be advised that the income to be used should include income for all members of the household that are to be residing in the home. Applicants will be responsible for all closing costs and down payments associated with the purchase of a home.

Signature __________________________ Date: ______________
Applicant

Signature __________________________ Date: ______________
Co-Applicant

(Include for all working household members. Attach separate sheet, if necessary)
AFFIDAVIT AND DISCLOSURE FORM

I/We understand and agree to the following conditions and guidelines regarding the distribution of resale unit(s):

1. The annual household income for my family does not exceed the allowable limits as follows:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>1</th>
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2. I/We understand that we need to be first time homebuyers, defined as not having owned a home for 3 years or one buyer must be 55 or older

3. I/We certify that my/our total assets do not exceed the asset limit. I/We understand the full value or portion of retirement accounts do apply.

4. The household size listed on the application form includes only and all the people that will be living in the residence.

5. I/We certify all data supplied on the application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand providing false information will result in disqualification from further consideration.

6. I/We understand that by submitting this application it does not guarantee that I/we will be able to purchase a unit. I/We understand that all application data will be verified and additional financial information will be required, verified and reviewed in detail prior to purchasing a unit.

7. I/We understand that it is my/our obligation to secure the necessary mortgage for the unit purchase and all expenses, including closing costs and down payments, are my responsibility.

8. I/We further authorize MCO Housing Services to verify any and all income, assets and other financial information, to verify any and all household, resident location and workplace information and directs any employer, landlord or financial institution to release any information to MCO Housing Services and consequently the project’s monitoring agency, for the purpose of determining income eligibility.

9. I/We understand this unit is available on a first come first serve basis.

10. Resale program requirements are established by the Projects Monitoring Agent I/We agree to be bound by whatever program changes that may be imposed at any time throughout the process. If any program conflicts arise, I/we agree that any determination made by Monitoring Agent is final.

I/We have completed the application and have reviewed and understand the process that will be utilized to distribute the available units. I/We am qualified based upon the program guidelines and agree to comply with applicable regulations.

Applicant ________________________ Co-Applicant ________________________ Date ________________________

MAIL all documentation, mortgage pre-approval and application to:
MCO Housing Services, P.O. Box 372, Harvard, MA 01451