

REQUEST FOR CERTIFICATE HOME BUYER EDUCATION COMPLETION



Loan Officer: Lender: Phone: ______ Fax: _____ Email: ______ The following information and a Good Faith Estimate of the property being purchased is needed to issue a Certificate of Completion. After the form has been completed, please fax to 513-737-9304 attention Program Assistant or email to melissa.taylor@fuse.net. Once the completed information is received, the Certificate of Completion will be faxed or emailed to you. Borrower Name: ______ Date of Birth: _____/ _____/ Co-Borrower Name: _____ Date of Birth: ___/____/____ Property Address : _____ City: State: Zip: County: Estimated Closing Date: ____ / ___ Current Monthly Rent: \$_____ Sales Price: \$_____ Appraised Value: \$_____ Earnest Money: \$ Total Estimated Settlement Costs: \$ Down Payment: \$ Other sources of funds:

 P & I Payment: \$______Fixed Rate?
 YES _____NO Interest Rate: _____%

 Mortgage Insurance:
 Yes _____NO
 MI Amount: \$______ Yes ____NO

 2nd: \$______2nd interest rate:
 % Monthly payment: \$______

Monthly Taxes: \$ ______ Monthly Hazard Insurance: \$ ______ HOA \$ _____

Current Gross Monthly Household income: \$ ______ Realtor Name/Real Estate Company: ______

Escrow Officer: ______ Escrow Company: ______

Escrow Officer Phone: ______ Escrow Officer Email: ______

EQUAL HOUSING OPPORTUNITY 100 S. Martin Luther King Jr. Blvd * Hamilton, Ohio 45011 * 513-737-9301 * fax 513-737-9304