

# PAUWELA HOMES WORKFORCE HOUSING APPLICATION

## PROJECT OVERVIEW & CHECKLIST

Pauwela Homes is a 100% workforce housing project, subject to income qualification requirements. The 33 single family homes will be sold as house and lot packages with an accompanying farm plot area (each house, lot, and farm plot area combined is referred to as "Unit"). The Units will be conveyed pursuant to the Declaration of Condominium Property Regime ("CPR") by Seller, Kauhikoa Land LLC. The following table is an overview of maximum household income and maximum sales prices:

HUD Income Range	Maximum Gross Annual Household Income (1)	Home Type (2)	Number of Units (2)	Maximum Sales Price (1)
<100%	\$81,500	3 Bedroom No Garage	5	\$449,200
<100%	\$81,500	4 Bedroom No Garage	5	\$516,580
<120%	\$97,800	3 Bedroom With Garage	9	\$539,100
<120%	\$97,800	4 Bedroom With Garage	8	\$619,965
<140%	\$114,100	3 Bedroom With Garage	3	\$628,900
<140%	\$114,100	4 Bedroom With Garage	3	\$723,235

- (1) Annual Household Income is in accordance with the 2016 Affordable Sales Price Guidelines prepared by DHHC, effective May 1, 2016;  
(2) The number and type of units are as of the date of this Notice and may be changed by Seller.

**For more information, please visit the website: PauwelaHomes.com.**

### CHECK ONLY ONE:

If you believe your household income is:

- Between \$65,200/year and \$81,500/year.  
 Between \$81,500/year and \$97,800/year.  
 Between \$97,800/year and \$114,100/year.

### APPLICATION CHECKLIST:

- Completed Application Signed by Applicant, Co-Applicant, Adult Members of Household  
 Legible photocopy of a picture ID of each adult household member  
 Pre-Qualification letter from a lender of your choice  
 Last 3-years of Federal Tax Returns

***APPLICATION SUBMITTAL: Completed Ownership Applications must be submitted by the Applicant in person to: Home Street Bank, 395 Dairy Road Unit G, Kahului, HI 96732 on before 4:30PM Monday, April 17, 2017. Applications submitted after the deadline may not be processed, but will be kept on file for a back-up applicant list.***

APPLICANT & CO-APPLICANT'S INITIALS \_\_\_\_\_/\_\_\_\_\_

PAUWELA HOMES WORKFORCE HOUSING APPLICATION

**A. HOUSEHOLD INFORMATION:**

NOTE: PLEASE INCLUDE A LEGIBLE PHOTOCOPY OF A PICTURE ID FOR EACH HOUSEHOLD MEMBER

1. Applicant's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Driver's License No. or State ID No. \_\_\_\_\_

Telephone Numbers: Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Number of Years Residing in the County of Maui: \_\_\_\_\_

I/We are interested in a 3 bedroom house package.

I/We are interested in a 4 bedroom house package.

2. Co-Applicant's Name: \_\_\_\_\_

Age: \_\_\_\_\_ Driver's License No. or State ID No. \_\_\_\_\_

Telephone Numbers: Cell: \_\_\_\_\_ Home: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Number of Years Residing in the County of Maui: \_\_\_\_\_

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**PAUWELA HOMES WORKFORCE HOUSING APPLICATION**

3. How many household members (other than Applicant and/or Co-Applicant) will be residing in the home you are trying to purchase? \_\_\_\_\_. Please list below:

NAME	AGE	RELATIONSHIP

**B. INCOME INFORMATION:**

1. APPLICANT:

Employer's Name (List all employers if more than one): \_\_\_\_\_

\_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's Telephone Number(s): \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Job Description: \_\_\_\_\_

Wages, salaries (per month):..... \$ \_\_\_\_\_

Tips (per month): ..... \$ \_\_\_\_\_

Self-Employment Income (per month):..... \$ \_\_\_\_\_

Pensions/Social Security (per month):..... \$ \_\_\_\_\_

Interest, Dividends (per month):..... \$ \_\_\_\_\_

Alimony/Child Support (per month):..... \$ \_\_\_\_\_

Other Income (per month): ..... \$ \_\_\_\_\_

(Source) \_\_\_\_\_

**APPLICANT'S TOTAL ANNUAL INCOME: ..... \$ \_\_\_\_\_**

APPLICANT & CO-APPLICANT'S INITIALS \_\_\_\_\_/\_\_\_\_\_

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2. CO-APPLICANT:

Employer's Name (List all employers if more than one): \_\_\_\_\_

\_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's Telephone Number(s) \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Job Description: \_\_\_\_\_

Wages, salaries (per month):..... \$ \_\_\_\_\_

Tips (per month): ..... \$ \_\_\_\_\_

Self-Employment Income (per month):..... \$ \_\_\_\_\_

Pensions/Social Security (per month):..... \$ \_\_\_\_\_

Interest, Dividends (per month):..... \$ \_\_\_\_\_

Alimony/Child Support (per month):..... \$ \_\_\_\_\_

Other Income (per month): ..... \$ \_\_\_\_\_

(Source) \_\_\_\_\_

**CO-APPLICANT'S TOTAL ANNUAL INCOME: ..... \$ \_\_\_\_\_**

3. **OTHER HOUSEHOLD MEMBERS.** List on a separate sheet all other adult household members who are living with you or are contributing to the family income and provide the same income information requested above.

4. **TOTAL HOUSEHOLD INCOME FOR 2016:..... \$ \_\_\_\_\_**

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**C. CURRENTLY OWNED REAL ESTATE:**

Do you currently own any residential real estate (single family house, condo, or vacant lot)?

Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is “Yes”, then please provide the following information:

Address: \_\_\_\_\_

TMK No.: \_\_\_\_\_

Single family, condo, or vacant lot: \_\_\_\_\_

Date Purchased: \_\_\_\_\_

Purchase Price: \_\_\_\_\_

Current Mortgage Balance: \_\_\_\_\_

Current Monthly Payment: \_\_\_\_\_

**(Note: If you currently own any other real property, please attach a separate sheet with the above information for each property you currently own.)**

**D. PREVIOUSLY OWNED REAL ESTATE:**

Have you owned any real estate in the last three (3) years? \_\_\_\_\_ (Yes/No)

If your answer is yes, then for each property owned, provide the following information:

	Property #1	Property #2
Address		
Property Type: single family, condo, vacant lot, commercial, etc.		
Purchase Date		
Purchase Price		
Sales Date		
Sales Price		
Reason for Selling		

APPLICANT & CO-APPLICANT’S INITIALS \_\_\_\_\_ / \_\_\_\_\_

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**E. ASSET STATEMENT:**

Account Type	Current Balance	6 Month Average Balance
Checking		
Savings		
Money Market		
Cert. of Deposit		
Stocks/ Bonds		
Retirement (401K, IRA, etc.)		
Trust Funds		
List any other accounts not listed above:	Current Balance	6 Month Average Balance

APPLICANT & CO-APPLICANT'S INITIALS \_\_\_\_\_/\_\_\_\_\_

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**CERTIFICATION OF ACURACY AND COMPLETENESS**

**I hereby declare under penalty of perjury** that the information contained in this application and all attached materials are correct, true, and complete. I acknowledge and agree that the Seller is relying on the accuracy of this information and my representations in order to process this application and that any Sales Contract may be rescinded, in the Seller’s sole discretion, if it is determined that any information and materials submitted are not true and correct. I further acknowledge that I may be liable for any costs associated with this, including, but not limited to, any litigation costs, and further acknowledge that there may be criminal penalties if I knowingly and willfully submit any information I know, or should know, is false or incorrect.

Signature \_\_\_\_\_  
Applicant

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Co-Applicant

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Adult Household Member

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Adult Household Member

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Adult Household Member

Date: \_\_\_\_\_

APPLICANT & CO-APPLICANT’S INITIALS \_\_\_\_\_/\_\_\_\_\_

PAUWELA HOMES WORKFORCE HOUSING APPLICATION

**Declaration of Intent to Reside**

I hereby declare that if I am able to purchase one of the residential workforce homes available in the Pauwela Homes, I will use the home as my primary place of residence and at no time will rent it out either in whole or in part without the approval of Department of Housing and Human Concerns (“DHHC”) and Seller.

Furthermore, I agree that each deed for a Residential Workforce Home shall require that for a period of five (5) to ten (10) years (depending on income category) after the purchase of a Workforce Housing Home, the Workforce Housing Home shall at all times be owned and occupied by me as a purchaser. Finally, I agree to fully cooperate with Seller in its effort to ensure that each purchaser complies with this owner-occupancy provision by requiring the purchaser to provide Seller & DHHC (a) information that will indicate the purchaser’s occupancy of the Workforce Housing Home as said purchaser’s primary residence during this 5-10 year period (depending on income category), and (b) notice of the purchaser’s intent to sell the Workforce Housing Home before the purchaser signs any contract of sale for said Workforce Housing Home.

Signature \_\_\_\_\_  
Applicant

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Co-Applicant

Date: \_\_\_\_\_

APPLICANT & CO-APPLICANT’S INITIALS \_\_\_\_\_/\_\_\_\_\_



**PAUWELA HOMES WORKFORCE HOUSING APPLICATION**

**Authorization to Release**

**Purpose:** Your signature on this Authorization to Release form authorizes a third party to release information to the Seller or Seller’s agent relative to your eligibility and participation in its Workforce Housing Purchase Program.

**Privacy Act Notice Statement:** The Seller or Seller’s agent is requiring the collection of information derived from this form to determine an applicant’s eligibility to participate in its Workforce Housing Purchase Program. This information will be used to establish applicant income level, and to verify the accuracy of the information furnished by the applicant. It may be released to appropriate Federal, State and local agencies and where relevant to civil, criminal, or regulatory investigators, and to prosecutors. Failure to provide any information may result in an applicant being deemed ineligible to participate in the program. West Maui Land Company, Inc., the Seller or Seller’s agent, is authorized to ask for this information by the National Affordable Housing Act of 1990.

**Instructions:** Each adult member of the household must sign this Authorization Form prior to participating in the Seller’s Workforce Housing Purchase Program. The Seller also reserves the right to monitor the program on an ongoing basis in order to determine conformity with the rules and regulations of it’s Workforce Housing Purchase Program.

**Authorization:** In signing below, I understand that the Seller or Seller’s agent may make inquiries regarding all sources of my household’s income, all sources of my household’s assets, as well as all other relevant financial information requiring program participation for a period of three (3) years after close of escrow. I authorize the Seller or Seller’s agent to request information from third parties about me and my household that is pertinent to eligibility for participation in its Workforce Housing Purchase Program. I acknowledge that:

- 1) A photocopy of this form is as valid as the original;
- 2) I have the right to review the file and the information received using this form (with a person of my choosing accompanying me).
- 3) I have the right to copy information from this file and to request correction of information I believe inaccurate;
- 4) All adult members will sign this form and cooperate with West Maui Land Company, Inc. and the Seller in this process.

Signature \_\_\_\_\_  
Applicant

Date \_\_\_\_\_

Signature \_\_\_\_\_  
Co-Applicant

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Adult Household Member

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Adult Household Member

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Adult Household Member

Date: \_\_\_\_\_

APPLICANT & CO-APPLICANT’S INITIALS \_\_\_\_\_/\_\_\_\_\_

**PAUWELA HOMES WORKFORCE HOUSING APPLICATION**

**Verification of Employment and Business Location**

Please fill in all fields that pertain to applicant's employment. **If there is more than one income contributor in the household, please photocopy this page.**

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

**Employer to fill out this section:**

Employer: \_\_\_\_\_

Business Address (Physical): \_\_\_\_\_

Authorized Representative: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Employed since: \_\_\_\_\_ Occupation: \_\_\_\_\_

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

(Employer)

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

Authorization to release information: I hereby authorize my employer to release the requested financial information to the Seller or Seller's Agent.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

APPLICANT & CO-APPLICANT'S INITIALS \_\_\_\_\_/\_\_\_\_\_

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IN ADDITION TO COMPLETING PAUWELA HOMES WORKFORCE HOUSING APPLICATION, FOR THE APPLICATION TO BE DEEMED COMPLETE, THE FOLLOWING MUST BE ATTACHED:

- 1) A PRE-QUALIFICATION LETTER FROM A LENDER OF YOUR CHOICE.
- 2) PHOTO-COPIES OF PHOTO IDs OF ALL ADULT HOUSEHOLD MEMBERS
- 3) LATEST THREE YEARS OF FEDERAL TAX FORMS

**APPLICATION SUBMITTAL DEADLINE\*:**  
**On or before 4:30PM Monday, April 17, 2017,**  
**the completed Ownership Applications must be submitted**  
**by the Applicant in person to:**

**Home Street Bank**  
**395 Dairy Road Unit G**  
**Kahului, HI 96732**

\* Applications submitted after April 17, 2017 will be accepted but will not be reviewed or processed unless the applications submitted on or before April 17, 2017 do not provide a sufficient number of qualified applicants.