

**AFFORDABLE OVER-55 RE-SALE UNIT APPLICATION**

**ALL HOUSEHOLD MEMBERS MUST BE 55 YEARS OF AGE OR OLDER.** This unit will be sold to a qualifying applicant with household income at or below 80% of the area median income. 2025 income limits are as follows:

1-person \$92,650; 2-person \$105,850; 3-person \$119,100 4-person \$132,300.

Qualifying applicants must have total household income within the limits and household assets of not more than \$275,000. **The unit sale price is \$315,106.** Condo fee is \$229.00/mo. Taxes \$3,120/yr.

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

I learned of this lottery from (check all that applies):

Website: \_\_\_\_\_ Letter: \_\_\_\_\_  
Advertisement: \_\_\_\_\_ Other: \_\_\_\_\_

**THIS APPLICATION IS NOT COMPLETE IF NOT SUBMITTED WITH:**

- \_\_\_\_\_ Completed application signed by all household members.
- \_\_\_\_\_ Proof that all household members is are at or above the age of 55.
- \_\_\_\_\_ Copy of 3 prior years **Federal** tax returns with 1099's, W-2's and schedules, for every household member.
- \_\_\_\_\_ Copy of 5 most recent pay stubs for employed household members.
- \_\_\_\_\_ Copy of 3 most recent statements and documents from all other sources of income of all members listed on the application, on organization letterhead.
- \_\_\_\_\_ Copy of 3 most recent statements of all assets showing current value including all bank accounts, investment accounts, retirement accounts.
- \_\_\_\_\_ Mortgage pre-approval and proof of funds to cover down payment & closing costs.
- \_\_\_\_\_ Documentation regarding current or past interest in real estate, if applicable.
- \_\_\_\_\_ No Income Statement, signed and notarized, for any household member over 18 with no source of income, if applicable.

# THE SEASONS CONDOMINIUMS – 1 HAYLOFT LN. #29, MARSHFIELD

---

**Household Information:**

List all members of your household including yourself.

Names of all Persons to Reside in Dwelling (First Name, Middle Initial, Last Name)		Relation to Head	Age	Date of Birth
1				
2				
3				
4				

**Minimum Age Requirement:**

Are all household members that will reside in the unit at or above the age of 55? Proof of age required.

☐ YES

☐ NO

**Property:**

Do you currently own or have you sold real estate or other property in the past three years?

☐ YES

☐ NO

If yes, attach a copy of the current tax bill or settlement statement.

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

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

**Income:**

List all income of all household members listed on the application such as wages, child support, Social Security benefits, all types of pensions, employment, Unemployment Compensation, Workman's Compensation, alimony, disability or death benefits and any other form of income; including rental income from property. Adults with no income are required to submit a notarized statement. If additional space is needed, please attach another sheet.

## THE SEASONS CONDOMINIUMS – 1 HAYLOFT LN. #29, MARSHFIELD

---

#	Source of Income	Address/Phone# of Source	Amount per Year
1			
2			
3			
4			
<b>TOTAL</b>			

### **Assets:**

List all checking, savings accounts, CD's, stocks, bonds, retirement accounts, savings bonds and any other investments below. If additional space is needed, please attach another sheet.  
Household assets do not include necessary personal property.

#	Type of Asset	Bank/Credit Union Name	Account No.	Value, Balance
1	Checking account			
2	Savings account			
3	Retirement account			
4	Other: _____			
5	Other: _____			
6	Other: _____			
		<b>TOTAL</b>		

**APPLICANT(S) CERTIFICATION**

I/We certify that our household size is \_\_\_\_ persons, as documented herein.

I/We certify that our total household income equals \$\_\_\_\_\_, as documented herein.

I/We certify that our total household assets equal \$\_\_\_\_\_, as documented herein.

I/We certify that the information in this application and in support of this application is true and correct to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that false or incomplete information may result in disqualification from further consideration.

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

I/We understand the provisions regarding resale restrictions and agree to the restrictions. You must notify EOHLC and the Monitoring Agent when you wish to sell. The unit can't be refinanced without prior approval of EOHLC and/or the Monitoring Agent, no capital improvements can be made without EOHLC and/or the Monitoring Agent pre-approval; the unit must be owner's primary residence; the resale price is calculated according to the deed rider; and an increase in equity is very minimal to ensure affordability over time; the deed rider remains in effect in perpetuity. All prospective buyers are advised to review the deed rider with their own attorney to fully understand its provisions.

I/We have been advised that a copy of the EOHLC Universal Deed Rider is available with the Lottery Agent and on the EOHLC website.

I/We understand that if I/we are selected to purchase a home, I/we must continue to meet all eligibility requirements of the Lottery Agent and any participating lender(s) until closing.

I/We understand that I/we must be qualified and eligible under any and all applicable laws, regulations, guidelines, and any other rules and requirements. I/We understand that the Lottery Agent makes no representation on the availability of the unit.

My/Our signature(s) below gives consent to the Lottery Agent or its designee to verify information provided in this application. I/We agree to provide additional information on request to verify the accuracy of all statements in this application. No application will be considered complete unless signed and dated.

---

Applicant Signature

Date

---

Co-Applicant Signature

Date