



**APICIA RESERVATION REQUEST
FORM #1**

Lender Information

Name of Lender: _____

Contact Person: _____

Phone Number: _____ Fax # _____

E-mail: _____

Address _____

City: _____ State: _____ Zip: _____

Applicant Information

Name of Applicant: _____ *(must be first-time homebuyer)*

Name of Co-Applicant: _____ *(must be first-time homebuyer)*

Additional Information

Property Address: _____

Estimated Closing Date: _____

Lender Certification

I certify that the total amount of assistance needed from the APICIA Program for the above-referenced borrower(s) is \$ _____.

I certify that the total annual household income from the above-referenced borrower(s) is \$ _____, which is less than 80% of the area median income for a household of _____ *(insert number of persons who will occupy the property)* in _____ County, Oregon.

I certify that the borrowers have attended the APICIA Homebuying Fair _____ (year) and the APICIA sponsored HUD approved Homebuying Seminar (date attended _____). Include proof of certificate).

Name and signature of Lender

Fax 1.866.690.6372 or e-mail to contact@apicia.org

FORM #1 PAGE 2

Reservation Confirmation

(To be completed by APICIA staff)

Reservation Date: _____ Expiration Date: _____

Authorized by: _____

Amount = \$ _____

Applicant's Name & Account #: _____

(for internal use only)