



SALES APPLICATION

Pailolo Place Application for a Residential Workforce Housing (MFWH)

Form of Affidavit of Eligibility to Purchase a RWH Home in Pailolo Place

Approved Project Lender Contact Information

***Certificate of Completion of Homebuyers Education Program**

(TO BE ATTACHED BY APPLICANT)

IF YOUR SALES APPLICATION PACKAGE IS DEEMED INCOMPLETE OR THE INFORMATION PROVIDED IS INSUFFICIENT IN ANY MANNER, AS DETERMINED BY THE DEVELOPER OR ITS SALES BROKER IN THEIR SOLE DISCRETION, THE SALES APPLICATION PACKAGE WILL BE RETURNED AND YOU MAY NOT BE ELIGIBLE FOR THE WAIT LIST UNTIL YOU COMPLETE THE SALES APPLICATION PACKAGE TO THE DEVELOPER'S OR ITS SALES BROKER'S SATISFACTION AND YOU WILL MISS THE OPPORTUNITY TO BE ELIGIBLE FOR ANY LOTTERY OR ANY RWH HOME SELECTION.

Pailolo Place Residential Workforce Housing

Sales Application Package (Exhibit A)

Updated: April 29, 2019

County of Maui Department of Housing and Human Concerns Housing Division Area Median Income Limits

Your income bracket will determine the type and pricing of home you will be eligible to purchase. The limits for each income bracket are determined by the County of Maui Area Median Income (AMI) as established by the United States Department of Housing and Urban Development (HUD) annually for the Island of Maui (excluding Hana).

For 2018, the income limits are:

CATEGORY	INCOME GROUP	% OF AREA MEDIAN INCOME - SALES PRICE RANGE	MAXIMUM INCOME LIMIT
A	BELOW MODERATE	81% - 100% (\$73,260 - \$81,400) <i>\$254,380 - \$343,230</i>	\$81,400
B	MODERATE	101% - 120% (\$81,401 - \$97,680) <i>\$310,940 - \$411,910</i>	\$ 97,680
C	ABOVE MODERATE	121% - 140% (\$97,681 - \$113,960) <i>\$367,500 - \$480,590</i>	\$113,960

Income requirements are subject to change at the discretion of HUD.

See <http://www.co.maui.hi.us/1825/affordable-sales-price-guidelines> for AMI information updated annually.

**PAILOLO PLACE SALES APPLICATION FOR MULTI-FAMILY WORKFORCE
HOUSING UNIT**

A. APPLICANT INFORMATION

Full Legal Name: (include Jr. or Sr. if applicable)		
Date of Birth:		Place of birth:
Current Address:		<input type="checkbox"/> Rent <input type="checkbox"/> Own
City:	State:	Zip Code:
Mailing Address, if different from current address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	Email:
Are you a U.S. Citizen OR a Permanent Resident Alien who is a resident of the County of Maui?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a resident of Maui County? You must meet one of the following: <input type="checkbox"/> Currently employed in the County <input type="checkbox"/> Retired from employment in the county, having worked in the County immediately prior to retirement <input type="checkbox"/> A full-time student residing in the County <input type="checkbox"/> A disabled person residing in the County who was employed in the County prior to becoming disabled <input type="checkbox"/> The parent or guardian of a disabled person residing in the County <input type="checkbox"/> A spouse or dependent of any such employee, retired person, student, or disabled person, the spouse or dependent of any such person residing in the County <input type="checkbox"/> None of the above		

B. APPLICANT EMPLOYMENT INFORMATION

Name of current employer:		
Employer address:		
City:	State:	Zip Code:
Position/Type of Business:		How Long:
Work Phone:		Email:

C. CO-APPLICANT INFORMATION

Full Legal Name: (include Jr. or Sr. if applicable)		
Date of Birth:		Place of birth:
Current Address:		<input type="checkbox"/> Rent <input type="checkbox"/> Own
City:	State:	Zip Code:

Mailing Address, if different from current address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	Email:
Are you a U.S. Citizen OR a Permanent Resident Alien who is a resident of the County of Maui?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a resident of Maui County? You must meet one of the following: <input type="checkbox"/> Currently employed in the County <input type="checkbox"/> Retired from employment in the county, having worked in the County immediately prior to retirement <input type="checkbox"/> A full-time student residing in the County <input type="checkbox"/> A disabled person residing in the County who was employed in the County prior to becoming disabled <input type="checkbox"/> The parent or guardian of a disabled person residing in the County <input type="checkbox"/> A spouse or dependent of any such employee, retired person, student, or disabled person, the spouse or dependent of any such person residing in the County <input type="checkbox"/> None of the above		

D. CO-APPLICANT EMPLOYMENT INFORMATION

Name of current employer:		
Employer address:		
City:	State:	Zip Code:
Position/Type of Business:		How Long:
Work Phone:		Email:

E. GROSS ANNUAL FAMILY INCOME (not to include the income of minors – less than 18 years old)

Gross monthly income (before deductions)	Use only one method of calculations (paid weekly or twice a month)	Total of Gross Annual Income
For Applicant: If you get paid weekly:	\$ x 52 =	\$
OR If you get paid twice a month:	\$ x 24 =	\$

For Co-Applicant: If you get paid weekly:	\$	x 52 =	\$
OR If you get paid twice a month:	\$	x 24 =	\$

Your Total Gross Annual Income (Applicant and Co-Applicant's pay)

\$

Other Gross Annual Income (Include 2 nd Job, interest, alimony, child support, and any other source)	Use only one method of calculation (Paid Weekly or Twice a Month)	Total of Other Gross Annual Income
If you get paid weekly:	\$ x 52 =	\$
OR If you get paid twice a month:	\$ x 24 =	\$
Total Gross Annual Family Income (Annual Gross Pay + Other Annual Gross Income)		\$
Does your total gross annual family income exceed 140% of County's AMI (See Income Chart)		<input type="checkbox"/> Yes <input type="checkbox"/> No

F. ASSETS:

Cash, Bank Accounts, Securities, and Real Property

(Excludes amounts in retirement account, cash surrender value of any life insurance policies, and the amount used for down payment to acquire the MFWH unit, which cannot exceed 10% of the down payment)

THIS PORTION MAY BE COMPLETED JOINTLY BY BOTH MARRIED AND UNMARRIED CO-BORROWERS IF THEIR ASSETS ARE SUFFICIENTLY JOINED SO THAT ASSET STATEMENT CAN BE PRESENTED ON A COMBINED BASIS; OTHERWISE A SEPARATE ASSET FORM IS REQUIRED.

Completed: Jointly Not Jointly

1. CASH on hand or held by others for applicants:	<input type="checkbox"/> None	Cash Balance
Total Cash Balance:		\$
2. Credit Union Accounts:	<input type="checkbox"/> None	
Name of Credit Union	Type of Account	Account Balances
Total Balance of Credit Union Accounts		\$
3. Bank and Savings Accounts:	<input type="checkbox"/> None	
Name of Bank	Type of Account	Account Balances

Total Balances of Bank and Savings Accounts		\$
4. Securities (Stocks, Bonds, mutual Funds, Certificate of Deposit, etc):		<input type="checkbox"/> None
Name of Company		Market Value
Total Balance of Securities		\$
5. Real Property: Do you currently own real property:		<input type="checkbox"/> Yes <input type="checkbox"/> No
6. In the last 3 years prior to the submittal of this form, have you owned real property with less than 50% interest, whether owned in fee or leasehold, in the United States?		<input type="checkbox"/> Yes <input type="checkbox"/> No
7. If Yes, what is the fair market value of the real property minus liabilities on such real property?		\$
Total Balance of Assets #1 – 4 + 7		\$
Does your total assets exceed 140% of the County's AMI		<input type="checkbox"/> Yes <input type="checkbox"/> No

G. OWNERSHIP AND LOAN QUESTIONS

Will you be purchasing this home as your principal residence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, will you be willing to own and live in this unit for more than 10 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In the last 6 months prior to submittal of this Sales Application, have you been pre-qualified for a residential loan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, what is the maximum purchase price you have been pre-qualified for?	\$	
Name of Lender: (Company)		
Name of Loan Officer:	Work Phone:	
Email:	Cell Phone:	

H. HOMEBUYER EDUCATION PROGRAM REQUIREMENT

Have you completed a pre-purchase homebuyer education program that is approved by the Developer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
All prospective buyers named on the deed of any RWH home must complete a homebuyer education program approved by the Developer and submit a certificate of completion with their Pailolo Place Sales Application.		

I. SIGNATURES

Each of the undersigned specifically represents to Developer, and agrees and acknowledges the following: (1) the information provided in this Sales Application is true and correct as of the date set forth opposite your signature, (2) the Developer may continuously rely on the information contained in the Pailolo Place Sales Application, and you are obligated to amend and/or supplement the information provided if any of the material facts that you have represented herein should change any time prior to closing of RWH home, (3) you authorize the Developer to use the information provided herein to request any documentation necessary from third parties to verify the information you provided, (4) your transmission of this Sales Application as "electronic record", containing "electronic signatures" as those terms are defined in applicable Federal or State Laws (excluding audio and video recordings) or your facsimile transmission of this Sales Application containing a facsimile of your signature, shall be as effective, enforceable and valid as if a paper version of this Sales Application were delivered containing your original written signature.

This Sales Application will be used to review and evaluate your qualification for a RWH home in the Pailolo Place Project and does not in any way guarantee you a position on any wait list, participation in the lottery selection event, or an opportunity to purchase a RWH unit. The Developer may reject any Pailolo Place Sales Application that the Developer deems incomplete in its sole discretion.

Signature of Applicant	Date:
Signature of Co-Applicant	Date:



CENTRAL PACIFIC BANK

Works. For You.

Cindi Pojas Smith

VP & Mortgage Loan Manager
Central Pacific Bank

Direct 808-872-6354 | *Cell* 808-283-8371 | *eFax* 808-203-2073

Email cindi.smith@centralpacificbank.com

Website www.centralpacificbank.com

33 Lono Avenue, Kahului, HI 96732

NMLS #525983

Linda Fagner

Sr. Mortgage Loan Officer
Central Pacific Bank

Direct 808-872-6355 | *Cell* 808-281-7446 | *eFax* 808-203-2077

Email linda.fagner@centralpacificbank.com

Website www.centralpacificbank.com

33 Lono Avenue, Kahului, HI 96732

NMLS #378758

Kim Macadangdang

Mortgage Loan Officer
Central Pacific Bank

Direct 808-281-5861 | *Cell* 808-281-5861 | *eFax* 808-203-2074

Email kim.macadangdang@centralpacificbank.com

Website www.centralpacificbank.com

33 Lono Avenue, Kahului, HI 96732

NMLS #543070

**AFFIDAVIT
OF ELIGIBILITY TO PURCHASE
A RESIDENTIAL WORKFORCE HOUSING UNIT IN KAIUALU**

I, the undersigned, on this _____ day of _____, 2018, do hereby declare I have reviewed the applicable buyer eligibility requirements in the Sales Application Package for Kaiaulu Residential Workforce Housing given to me by Pailolo Investment LLC ("**Developer**") and the requirements under Chapter 2.96 of the Maui County Code ("**RWH Rules**") for the purchase of a residential workforce housing ("**RWH**") home in the Pailolo Place Project (the "**Project**"). I hereby confirm, certify and agree to the following:

1. It is my intention to purchase and reside in a designated RWH unit in the Project and to comply with all of the requirements for buyers in the RWH Rules.
2. I am in full compliance with the following terms and provisions of the buyer eligibility requirements of Section 2.96.090 of the RWH Rules:
 - (a) I am 18 years of age or older;
 - (b) I have a gross annual family income which does not exceed 140% of Maui County's Area Median Income ("**AMI**"), as established by the US Department of Housing and Urban Development for the island of Maui (excluding Hana);
 - (c) My qualifying assets do not exceed 140% of Maui County's AMI;
 - (d) I do not own 50% or more interest in any real estate suitable for dwelling and have not owned any within 3 years from the date of my Sales Application for the RWH unit ("**Sales Application**"), or if I do, the only interest I own is in another affordable or RWH home; and
 - (e) I have a Loan Prequalification Letter from a Developer-approved lender that is dated no more than 120 days prior from the date of my Sales Application.
3. I have completed a homebuyer education program with *Hale Mahaolu, Framework*[®] or other comparable program, as approved by Developer, and have a Certificate evidencing completion of the program.
4. I am a citizen of the United States or a permanent resident alien who is a "resident" of Maui County ("**County**"), as defined under Section 2.96.020 of the RWH Rules and meet the criteria set forth therein.
5. I promise and agree to comply with all deed restrictions on my RWH home for the "Restriction Period," based on my income group, as set forth in the Sales Application and the RWH Rules, including the following:
 - (a) I shall be the fee owner and occupant of the RWH unit for the duration of my ownership of the RWH home. I shall not sell or offer to sell, lease or offer to lease, rent or offer to rent, assign or offer to assign, or convey the designated RWH home; **AND**

(b) I will notify the County Department of Housing and Human Concern ("**DHHC**") upon my decision to sell the RWH home and shall comply with County's 120-day first option to purchase the RWH home pursuant to the RWH Rules.

6. I am in full compliance with the income and asset limitations and confirm my income group, as set forth in the RWH Rules and my Sales Application.

7. I understand and agree that during the restriction period, the County may from time to time request verification of my eligibility requirements and compliance with my deed restrictions. I understand if I fail to submit such verification within a reasonable time following such request, the County may conduct an investigation to determine and verify my ownership, occupancy and resident status and I shall upon demand promptly reimburse the County for all reasonable costs and expenses incurred by the County in connection with any such determination and verification.

8. I understand that if I make any knowingly false statement in this Affidavit or otherwise violate the applicable provisions of the RWH Rules, I may be subject to legal charges and, if convicted, I may be fined or imprisoned, or both.

9. If more than one person signs this Affidavit, all singular pronouns shall be deemed to refer to all signatories, jointly and severally.

By signing this Affidavit the undersigned represent(s) and affirm(s) that the undersigned has read, understand(s) and agree(s) to the above statements.

Purchaser's signature

Print Name

Date

Purchaser's signature

Print Name

Date

Purchaser's signature

Print Name

Date

Purchaser's signature

Print Name

Date

STATE OF HAWAII)

: SS.

COUNTY OF MAUI)

On this _____ day of _____, 20____, before me personally appeared _____, to me personally known, who, being by me duly affirmed, did say that such person executed the forgoing instrument as the free act and deed of such person, and in the capacity shown, having been duly authorized to execute such instrument in such capacity.

Name: _____

Notary Public, State of Hawaii

My commission expires: _____

Date of Doc: _____	Name _____	# Pages: _____
of Notary: _____		Notes: _____
Description:	Affidavit of Eligibility to Purchase a Doc. Residential Workforce Housing Home in Pailolo Place	
		(stamp or seal)
Notary Signature _____	Date _____	
_____ Circuit, State of Hawaii		
NOTARY CERTIFICATION		

STATE OF HAWAII)
: SS.

COUNTY OF MAUI)

On this _____ day of _____, 20____, before me personally appeared _____, to me personally known, who, being by me duly affirmed, did say that such person executed the forgoing instrument as the free act and deed of such person, and in the capacity shown, having been duly authorized to execute such instrument in such capacity.

Name: _____

Notary Public, State of Hawaii

My commission expires: _____

Date of Doc: _____

Pages: _____

Name of Notary: _____

Notes: _____

Affidavit of Eligibility to Purchase a
Doc. Description: Residential Workforce Housing Home in
Pailolo Place

(stamp or seal)

Notary Signature

Date

____ Circuit, State of Hawaii

NOTARY CERTIFICATION

UPON COMPLETION OF APPLICATION, PLEASE DELIVER TO:

Kalei Fisher or Shaun Pedersen

Island Sotheby's International Realty

5095 Napilihau Street, Suite 113A

Lahaina, Maui, HI 96761

808-281-3302 or 808-799-6922

***Deadline is 5:00PM**

January 16, 2019

