

HOUSE KEYS 4 EMPLOYEES PROGRAM (HK4E)

Verification of Partner Contribution

Instructions to Participating Employer: The employer shall provide this form to employees whom the employer has agreed to provide a financial contribution under the House Keys 4 Employees Program (HK4E). After the employee has completed and signed Part I of this form, the employer is responsible for completing and signing Part II. The employer shall then return the form to the employee and instruct them to return it to their CDA-approved participating lender.

Instructions to Employee: Complete and sign Part I of this form, then have your employer complete and sign Part II. After your employer has completed Part II, you must provide this form to your CDA-approved participating lender. If you are receiving additional contributions from a non-profit organization, union, or local government, you must have these entities complete page 2 of this form before returning it to your lender. For a list of CDA-approved participating lenders, you may visit the More House 4 Less website www.morehouse4less.com or call the CDA Single Family Programs at 1-800-638-7781.

I. Employee Information

Name: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

New Home Address: _____

City: _____ State: Maryland Zip Code: _____

Signature of Employee

Date

II. Participating Employer Verification

Participating Employer Name: _____

I hereby verify that:

- A. The employee meets the employer's eligibility requirements for the HK4E;
- B. The employer will provide a grant/loan in the amount of \$ _____ to the employee to be used for the purchase of the home.

Authorized Signature

Title

Date

(Continued)

III. Non-Profit Verification

Non-Profit Organization's Name: _____

I hereby verify that:

- A. The borrower meets the non-profit's eligibility requirements for the HK4E;
- B. The non-profit will provide a grant/loan in the amount of \$_____ to the borrower to be used for the purchase of the home.

Authorized Signature

Title

Date

IV. Union Verification

Union Name: _____

I hereby verify that:

- A. The borrower meets the union's eligibility requirements for the HK4E;
- B. The union will provide a grant/loan in the amount of \$_____ to the borrower to be used for the purchase of the home.

Authorized Signature

Title

Date

V. Local Jurisdiction Verification

Local Jurisdiction Name: _____

I hereby verify that:

- A. The borrower meets the local jurisdiction's eligibility requirements for the HK4E;
- B. The local jurisdiction will provide a grant/loan in the amount of \$_____ to the borrower to be used for the purchase of the home.

Authorized Signature

Title

Date



The House Keys 4 Employees program is administered by the Community Development Administration (CDA)
of the Maryland Department of Housing and Community Development
100 Community Place ■ Crownsville, MD 21032-2023

Email: SingleFamilyHousing@mdhousing.org ■ 410-514-7530 ■ Toll-free (Maryland Only): 800-638-7781 ■ Fax: 410-987-4136

