

**MORTGAGE CREDIT CERTIFICATE PROGRAM**  
**Washington State Housing Finance Commission**

**MORTGAGOR AFFIDAVIT**

**ADDENDUM TO RESIDENTIAL LOAN APPLICATION**  
**REGARDING FOSTER CARE PAYMENTS**

*(To be signed at time of loan application)*

**(Use Only As Applicable)**

STATE OF WASHINGTON

COUNTY OF \_\_\_\_\_

MCC # \_\_\_\_\_

The undersigned being first duly sworn, depose and say:

1. The information on my/our mortgage loan application is true and accurate.
2. I/We receive, or intend to receive, payments from a state, political subdivision, or tax exempt child-placement agency for providing care to qualified foster individuals (as defined in Section 131 of the Internal Revenue Code) in my/our personal principal Residence.
3. I/We will not use more than 15% of the Residence for the primary use of a trade or business providing foster care because:
  - 3.1 I/We do not and will not receive foster care payments for (i) more than five individuals at the same time who are not age 19 or older or (ii) more than ten individuals who have not attained the age of 19 and more than five individuals who have and for whom we receive payments for additional care required by reason of their physical, mental or emotional handicap.
  - 3.2 I/We do not and will not receive foster care payments solely to maintain space in such principal Residence for emergency foster care.
  - 3.3 I/We do not and will not receive foster care payments that I/we must include in my/our taxable income and we do not take a business expense deduction for foster care costs.

I/We fully understand that each of the above statements and the information on my/our residential loan application is material to obtaining a Mortgage Credit Certificate and I/we declare under penalty of perjury, which is a felony offense, that the above statements are true and accurate.

SIGNED:

\_\_\_\_\_  
Primary Mortgagor

\_\_\_\_\_  
Co-Mortgagor #1

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Mortgagor #2

\_\_\_\_\_  
Co-Mortgagor #3

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date

*CONTINUED*

STATE OF WASHINGTON )  
 ) ss:  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared \_\_\_\_\_, to me known to be the individual(s) described in and who executed the within and foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned.

WITNESS my hand and official seal.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Residing at: \_\_\_\_\_

\_\_\_\_\_

My commission expires: \_\_\_\_\_

*(Reserved for official seal)*