RESET

Acknowledgement of Housing Counseling Fee

Date _____

Client Name _____
Current Address _____
City, State, ZIP _____

Re: HomeChoice Counseling Fee

Dear Client,

Thank you for choosing _____ to provide your one-on-one counseling session. This session is required by the Washington State Housing Finance Commission in order to qualify you for the HomeChoice Downpayment Assistance Program.

This counseling session will include the following:

- Pre-purchase counseling
- Documentation of disability
- Verification of income
- Completion of the Fannie Mae Budget Worksheet

Sincerely,

_____
Housing Counselor

.....

Upon loan closing of qualifying property using the Housing Finance Commission's HomeChoice Downpayment Assistance Program, I agree to pay a fee of $260 from second mortgage proceeds.

Client Name _____

Client Signature _____ Date _____

Escrow/Settlement Agent, payment should be directed to:

Organization Name _____
Attn: _____
Organization Address _____
City, State, ZIP _____

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☐ Submitted to Lender Date _____

☐ Submitted to Escrow Agent Date _____

☐ Submitted to Housing Finance Commission Date _____