



FIRST TIME HOMEBUYER PROGRAM BORROWER'S CLOSING AFFIDAVIT

SAN LUIS OBISPO COUNTY DEPARTMENT OF PLANNING AND BUILDING
976 OSOS STREET ♦ ROOM 200 ♦ SAN LUIS OBISPO ♦ CALIFORNIA 93408 ♦ (805) 781-5600

Promoting the Wise Use of Land ♦ Helping to Build Great Communities

**THERE ARE IMPORTANT LEGAL CONSEQUENCES TO THIS LEGAL AFFIDAVIT,
READ IT CAREFULLY BEFORE SIGNING**

We (I) the undersigned, as part of our (my) application for a San Luis Obispo County ("County") First-Time Homebuyer Program (FTHB) Loan ("Loan"), being first duly sworn, state the following:

1. We (I) executed the Loan Application as part of our (my) application for a First-Time Homebuyer Program (FTHB) Loan on _____, 20_____.

2. Check and complete either Section (a) or (b), whichever applies.

(a)_____ We (I) have reviewed the FTHB Loan Application and declare that there has been no change in the statements therein and said statements remain true and accurate.

(b)_____ We (I) have reviewed the FTHB Loan Application and declare that the following material changes have occurred from the statements therein (Please note any changes to household income and loan mortgage amount).

3. We (I) acknowledge and understand that our (my) Loan Application will be relied upon for purposes of determining our (my) eligibility for a FTHB Loan. We (I) acknowledge and understand that all statements made in this affidavit are under penalty of perjury and that any fraudulent statement or the fraudulent use of any instrument, facility, article, or other valuable thing or service pursuant to our (my) participation in this First-Time Homebuyer Program will result in the denial of our (my) application for a FTHB Loan or, if a Loan has been issued prior to discovery of the false statement, the immediate declaration of default by the borrower under the provisions of the Affordability/Recapture Agreement and Option to Purchase.

Signature of Applicant: _____ Dated: _____

Signature of Applicant: _____ Dated: _____

Subscribed and sworn before me this _____ day of _____ 20_____.

Notary Public

My Commission Expires: _____