



EQUAL HOUSING OPPORTUNITY

## Capital Area Housing Partnership (CAHP) Client Questionnaire

**Each item must be fully completed. Please print clearly.**

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Are you a first time homebuyer? A first time homebuyer is defined as someone who has not had ownership interest in the last three years.
<input type="checkbox"/>	<input type="checkbox"/>	I acknowledge that all properties receiving down-payment and/or rehabilitation assistance will be restricted, preventing any and all rental activity at the property for 30 years.
<input type="checkbox"/>	<input type="checkbox"/>	I acknowledge that there will be repayment required at the time of sale or transfer of the property. Further, it is my responsibility to familiarize myself with the specific repayment obligations of the CAHP program I am choosing. Full information related to repayment can be obtained by request of the CAHP Executive Director.
<input type="checkbox"/>	<input type="checkbox"/>	Do you intend to own and occupy this property for 7+ years? IF NO: How long do you intend to own and occupy this property? _____

**I certify to the best of my knowledge that all statement are true. I understand that providing false information will result in denial or termination of benefits.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return completed application and supporting documentation to:**

**Capital Area Housing Partnership**

**1290 Deerpath**

**East Lansing, MI 48823**