

M-26 Homeownership Activity Set Up Form



(Authority Use Only) HUD Activity Number: _____ Date Completed: _____ CPS #: _____
Year: _____ UOG Code: _____

SECTION A: General Information

Name of Participant: _____ Name of Person Completing Form: _____
Participant Number: _____ Telephone Number: _____
Participant Address: _____ County Project Is Located In: _____
City, State Zip: _____ Federal Tax ID #: _____

Check the Appropriate Box: Original Submission
 Ownership Transfer Change Owner's Address Revision

(Authority Use Only)
County Code: _____

Section B: CHDO Information (if applicable)

CHDO Acting As: Owner Sponsor Developer
Is This a CHDO Loan? Yes No

Section C: Activity Information

Activity Type (check one) New Construction Only Acquisition Only
 Acquisition & New Construction Acquisition & Rehabilitation

Homebuyer's Name: _____
Property Street Address: _____ Estimated HOME Cost: \$ _____
City, State, Zip: _____ Estimated HOME Units: _____
Is the homebuyer coming from subsidized housing? Yes No Loan Guarantee: Yes No
Is the homebuyer coming from subsidized housing? Yes No 504 Accessible: Yes No

Section D: Developer Information (Only applicable if this is a multi-address activity)

Developer Type (check one): Individual Corporation Publicly Owned
 Partnership Not-for-Profit Other

Developer's Name: _____
Address: _____
City, State, Zip: _____

Section E: Contractor Information (Only applicable if this is a multi-address rehabilitation activity)

Contractor Type (check one): Individual Corporation Publicly Owned
 Partnership Not-for-Profit Other

Contractor's Name: _____
Address: _____
City, State, Zip: _____