

Whitecap Dakota First Nation

First Time Homeownership Program Application

For individuals applying to the Whitecap Dakota First Nation First Time Homeownership Program (the "Program"), in order to deem your application as complete, please ensure your package contains the following forms:

- Completed application form
- Mortgage pre-approval from a certified mortgage lender

To qualify for the Program, you must meet under the following criteria:

1.0 Applicant Criteria:

- 1.2 Primary applicant must be a member of the Whitecap Dakota First Nation.
- 1.3 The applicant must be 18 years or older.
- 1.4 The property subject to the Program must be located in the neighborhood of Stonebridge, a neighborhood in the City of Saskatoon.
- 1.5 Preference given to applicants who have dependents attending the Chief Whitecap School in Stonebridge or have dependents attending high school.
- 1.6 The Program is limited to first-time homebuyers only.

To qualify for the Program, you must adhere to the following loan criteria:

3.0 Loan Criteria:

- 3.1 A forgivable loan of up to \$25,000.00 will be advanced to the applicant and will not require repayment if the applicant lives in the house for five (5) years and has not defaulted on the mortgage in any way. If the loan is forgiven or discharged at the will of Whitecap Dakota First Nation, said interest will be removed from the title.
- 3.2 If the property is sold before or prior to the five (5) year term, any amounts owing to Whitecap Dakota First Nation shall be paid to Whitecap Dakota First Nation. Whitecap Dakota First Nation must be informed of the sale prior to the property being listed.
- 3.3 The applicant covenants to keep the property in good repair and insured against loss with Whitecap Dakota First Nation listed as second loss payee, keep the title to the property in the applicant's name and continue to occupy it, pay the property taxes and comply with all of the terms and conditions of the Program.

- 3.4 The applicant covenants to keep the property insured against loss with Whitecap Dakota First Nation listed as second loss payee. The applicant will provide annual proof of insurance and the status of Whitecap Dakota First Nation as a second loss payee.
- 3.5 The applicant must not have income tax arrears with the Canada Revenue Agency.
- 3.6 As part of the approval of the loan, the applicant may be requested to attend an educational workshop on basic home maintenance and financial budgeting.

1. Primary Applicant: Primary applicants are those who will assume responsibility for the mortgage and have legal ownership to the property.

Last Name	First Name			
Present Address		_		
City/Town	Province	Postal Code		
Mailing Address if different than above	:			
Telephone (Primary)	_ (Work)			
Email Address				
Date of Birth	-			
Are you a member of the Whitecap Dakota First Nation? Yes No				
Are you a member of another First Nat	ion?			
Status Number No	n status 🔲			
Marital Status				
Occupation	_			

/Town Province Postal Code ling Address if different than above sphone (Primary) (Work) of Birth you a member of the Whitecap Dakota First Nation? Yes \Box No \Box you a member of another First Nation? us Number Non status \Box ital Status	.ast Name	First Name _	
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2. Co-Applicant #____: Anyone who will be on title of the subject property and will be residing in the

home. If more than one co-applicant, please submit additional copies of this form with their

3. Household Composition: Anyone who will be residing in the home other than the applicant and co-
applicant. (ie: children, dependents, grandparents, etc)

Name	Age	Grade	Relationship to Applicant	Employment Status

4. First-time Homeowner Declaration: To qualify for this Program, you must not have owned a home at any time prior to your submittal of this application.

Have you or a co-applicant ever owned a home, currently own a home, or are presently on title to a property (including vacant lands) at the time of submitting this application?			
If not, please sign your name in declaration:			
Applicant	Co-Applicant		
If yes, please explain:			

Offer Date _		Price	Condition Removal D	oate
Address			Possession Date	
f you have	a cosigner, please	e provide their name(s) _		
rtgage lend	• •	s Program, you must be this section and attach w	• • •	
Name of Lei	nding Firm		Address	
Phone numl	ber	Amount a	pproved for	
Other Cont	acts: If you have	retained a lawyer or rea	tor, please provide their	contact informat
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Declaration of Applicant

- i. I/We declare that the information provided in this application is true, complete, and no information has been deliberately excluded.
- ii. I/We hereby grant permission/consent to Whitecap Dakota First Nation to carry out any necessary inquiry and to disclose and use any information provided by me/us in this application for the purpose of confirming my/our income and determining my/our eligibility towards purchasing a home and for ongoing inquiries for collection issues should they arise.
- iii. I/We hereby grant permission/consent to Whitecap Dakota First Nation to disclose any information provided by me in this application to a private lending institution for the purpose of determining eligibility for mortgage financing and insurance.
- iv. I/We hereby grant permission/consent to Whitecap Dakota First Nation to carry out any necessary inquiry with my/our lender, broker or financial institution to confirm details of mortgage financing and insurance.
- v. I/We hereby grant permission/consent to the disclosure and use of any information provided by me/us in this application to Whitecap Dakota First Nation for the purpose of conducting internal evaluations of the Program.
- vi. I/We hereby acknowledge that if a house is purchased before receiving written confirmation from Whitecap Dakota First Nation of funding approval, the applicant will not be eligible for funding.
- vii. I/We understand this application does not obligate Whitecap Dakota First Nation to approve any funding.
- viii. I/We hereby agree to reimburse WDFN the full amount of the loan if it is later found that there is not full disclosure of information in this application.
- ix. I/We hereby agree to reimburse WDFN the full amount of the loan if I/We breach any terms and conditions of the Program.

Primary Applicant Name (print)	Primary Applicant (signature)	Date (mm/dd/yyyy)
Co-applicant Name (print)	Co-Applicant (signature)	Date (mm/dd/yyyy)
Co-applicant Name (print)	Co-Applicant (signature)	

Applications can be submitted to:

Whitecap Housing Corp (Attention: Director of Housing)
182 Chief Whitecap Tail
Whitecap, SK S7K 2L2