

Floyd County Home Base Iowa Initiative Application

The Floyd County Home Base Iowa Initiative is designed to assist veterans in purchasing and/or improving residential homes in Floyd County. To be eligible: "Is or was a member of the National Guard, reserve or regular component of the United States armed forces; if discharged must have status other than dishonorable and must meet one of the following three conditions: Meet standards of service denoted in Chapter 35 "Veterans Affairs" subsection 35.1 "Definitions" of the Code of Iowa 2013; is a federal status injured person having served in active duty; is a surviving spouse of an eligible service person."

Should you prove eligible, Floyd County will provide you a check for \$10,000 at closing to assist with down payment, closing costs and/or improvements to the home you are purchasing. Floyd County shall secure a mortgage upon the real estate you are purchasing. You will repay, to the order of Charles City Area Development Corporation, this note at 0% interest beginning the month after closing at the monthly rate of \$166.66 or quarterly rate of \$500. If you sell the home before the 60-month repayment is complete, you are responsible for repaying the outstanding balance at time of sale.

At time of application submission you shall provide DD 214 form, government issued identification, employment affidavit or proof of injury/disability.

It is the policy of the Floyd County Board of Supervisors and the Charles City Area Development Corporation that no person shall be discriminated against on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program.

Name: _____ Phone: _____ Email: _____

Current Address: _____

Address of Home Purchase: _____

Closing Date: _____ Lender: _____

Realtor: _____ Service Dates: _____

Service Branch: _____ Discharge Status: _____

Do you wish to repay this note via automatic transfer from your account?: Yes No

Employer: _____

I have read the statements preceding and agree to comply with content thereof.

Date: _____

Signature