



**First Time Homebuyer (FTHB) Program**  
Down Payment (DPA) & Closing Cost Assistance  
Soft Second Mortgage - Forgivable After 10 Years  
HOME Investment Partnerships Program

**Authorization for Drawdown of Funds**

This form must be submitted to KHRC to confirm the actual amount of HOME funds needed to close. The amount indicated cannot exceed the amount originally reserved, but it may be less. This must be received by KHRC AT LEAST 10 working days prior to closing.

List all normal fees charged by lender which have been waived for match purposes: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Homebuyer(s): \_\_\_\_\_

KHRC Confirmation/Loan #: \_\_\_\_\_

HOME Funds Requested: \$ \_\_\_\_\_

Closing Date: \_\_\_\_\_ Occupancy Date: \_\_\_\_\_

Payment should be sent to: Lender or Title/Closing Company (circle one)

Payment should be sent by: EFT or Paper Check (no wires) (circle one)

Lender: \_\_\_\_\_  
Company Name Complete Mailing Address

Title/Closing: \_\_\_\_\_  
Company Name Complete Mailing Address

**\*\*\*Must be setup as KHRC vendor (W-9, Vendor Form, Bank Letter/Voided Check, Sam.gov)**

I certify the amount listed above is the confirmed amount of HOME funds requested for closing for this homebuyer. All of the amount will be used for the downpayment/closing costs.

\_\_\_\_\_  
Loan Officer's Printed Name Loan Officer Signature

FOR STATE USE ONLY

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Project #: \_\_\_\_\_

HOME Funding (EN): \$ \_\_\_\_\_ Recaptured (HP): \$ \_\_\_\_\_

HOME Funding Year & #: \_\_\_\_\_ / \_\_\_\_\_ FTHB Program Year: \_\_\_\_\_

IDIS #: \_\_\_\_\_ Voucher #: \_\_\_\_\_