

**RESERVATIONS WITH MISSING INFORMATION OR DOCUMENTATION WILL NOT BE CONSIDERED VALID**

FY 2012-2013  
 SPRINGFIELD HOME OWNERSHIP PROGRAM  
**RESERVATION FORM**



City of Springfield Housing and  
 Community Development  
 225 5<sup>th</sup> street  
 Springfield OR 97477  
 541 726 2799

**LENDER INSTRUCTIONS:** Please forward this form  
**ELECTRONICALLY** attaching the following items signed by the borrower:

1. 1003 and 1008 or MCAW
2. GFE and REG-Z

e-mail to:	<a href="mailto:polsen@springfield-or.gov">polsen@springfield-or.gov</a>
SHOP requested:	\$
Anticipated COE date:	

Subject Property Address:	
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Buyer(s) Name(s):		Phone:
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Seller(s) Name(s):		
Seller's Current Address:		
Lender Name and Address:		
Loan Officer:	Phone:	E-Mail:
Realtor Name/Company:	Phone:	E-Mail:

**ONLY BONA FIDE OPEN ESCROWS WILL BE ACCEPTED FOR RESERVATIONS.**

**Escrow Information:**

Title Company &Address: \_\_\_\_\_

Escrow Officer: \_\_\_\_\_ Escrow # \_\_\_\_\_

**Loan and Property Information:**

Loan Type: \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_

**NOTE:** The intent of the SHOP program is to assist borrowers with the payment of their downpayment and closing costs as well as the reduction of their monthly housing expense in the form of additional downpayment. In that spirit, all fees being charged to the borrower will be reviewed for reasonableness in the market place. Our intent with the SHOP assistance is to ensure that the applicants housing expenses are as minimal as possible.

**IN ORDER TO RECEIVE SHOP FUNDS ALL CONDITIONS OF THE PROGRAM MUST BE MET**