



CalHFA Community Stabilization Home Loan “Program” (CSHLP)

LEGAL OWNER - INVESTOR - SELLER/SERVICER CERTIFICATION (CSHLP CERTIFICATION)

Property Street Address _____

Property City, State _____

Property Zip, County _____

Participating Financial Institution or Participating Seller/Service of the CalHFA Community Stabilization Home Loan Program hereby provides and certifies that the following information on the above referenced property is true and correct.

Please complete and provide to originating lender

Name of Legal Owner _____

Investor Name _____

Authorized Seller/Service _____

Property Eligibility Date “PED”: (the date the property was listed for this Program to CalHFA on or after the start date of the Program) _____

Estimated Value “EV” (based off of an Appraisal or one Broker Price Opinion [BPO])* \$ _____

Estimated Value Date “EVD” (appraisal date or BPO date) _____
(must not be greater than 90 days at “PED”)

Special Sales Price “SSP” \$ _____

*If more than one (1) BPO is used, the most current BPO must be used and must be within 90 days old.

Dated: _____

(May be signed by Legal Owner OR authorized Seller/Service)

Legal Owner (Name)

Seller/Service (Name)

(Title)

(Title)