

Program Sub-Recipient

Golden State Finance Authority (GSFA)

1215 K Street, Suite 1650

Sacramento, CA 95814

Phone: (855) 740-8422 Fax: (916) 444-3551

Email: info@gsfahome.org

Applicant Name: _____

SHADED AREA FOR PROGRAM SUB-RECIPIENT USE ONLY

DR-HBA001-Checklist Lender Pre-Screen

Applicant Name: _____

Lender Name:		Contact Name:	
Phone Number:		Fax Number:	
Email:			

This Compliance Package contains:

1. **DR-HBA002-Application and Affidavit**
2. **1003 Loan Application**
3. **DR-HBA003-Addendum to Loan Application**
4. **Verify Applicant(s) No Ownership in Any Real Estate**
5. **Start Duplicate of Benefits (DOB) – Completed by GSFA**
 - Worksheet**
 - FEMA Check (3rd Party Database from HCD)**
 - SBA Check (3rd Party Database from HCD)**
6. **County: _____ Year: _____ – Completed by GSFA**
Impacted Address: _____
7. **Assets Verification – Completed by GSFA**
 - Total Liquid Assets Verified: _____**
 - Amount exceeding \$100,000: _____**

The Lender Pre-Screen Package will not be processed, nor will a Commitment for the Lender Pre-Screen be issued for the Applicant, until all the items above are received, complete and correct, by the Program Sub-Recipient.