

Disbursement Request #:

Housing Trust Fund Corporation  
New York State HOME Program  
**Purchase Assistance/Closing costs**  
**Project Detail Sheet**

Attach one detail sheet for each activity or project for which funds are being requested. If requesting funds for construction expenses associated with a purchase assistance project, also attach rehabilitation detail sheet.

SHARS ID #:	Client Name:	
Activity#:	Amount of this draw:	
HOME funds in project:	Total paid to date:	Percent complete:
Property Address:		
Partial / Final Payment: (Check one) <input type="checkbox"/> P <input type="checkbox"/> F		
<b>Attach Closing Statement</b>		
Amount of primary loan		
Interest rate of primary loan		
Term of primary loan		
Other financing		
Appraisal date		
Appraised value		
Property insurance company		
Financial institution holding tax/insurance escrow account		
<b>The following items are required for final payment requests</b>		
Date this site was determined free from environmental hazards:		
Final Property Standards Inspection Approval Date:		
Date unit was determined lead-safe:		