

**CERTIFICATE REQUEST FORM**  
**HOMEBUYER'S EDUCATION WORKSHOP**  
*(An 8-hour Study of the Home Buying Process)*



315 N. San Joaquin St.  
 Stockton, CA 95202  
 Main: (209) 466-6811  
 Fax: (209) 466-3465  
 www.visionaryhomebuilders.org

**New Homebuyer or Buyer's Agent:** Please complete as much information as possible on this certificate request form and present it to your lender.

**Lenders:** Please complete any remaining information, attach the Good Faith Estimate and return to Visionary Home Builders of California, Inc. (VHB) Homeownership and Rental Center for an approved Certificate of Completion.

**ALL REQUESTED INFORMATION MUST BE PROVIDED.**  
**Missing information may delay processing of Certificate.**

**Processors & Underwriters:** **DO NOT FUND FROM THIS FORM.** This is not an approved Certificate and does not confirm attendance. This voucher **MUST** be redeemed for an approved Certificate of Completion through Visionary Home Builders of California, Inc.

Date of Certificate Requested: \_\_\_\_\_ Class Date: \_\_\_\_\_ Instructor: \_\_\_\_\_

**PLEASE PRINT CLEARLY OR TYPE**

**Buyer's Information:**

Name: \_\_\_\_\_  
 Current Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Tel: \_\_\_\_\_ Work Tel: \_\_\_\_\_  
 Annual Income \$ \_\_\_\_\_ Household Size \_\_\_\_\_

**Property Information:**

New Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Estimated Close of Escrow: \_\_\_\_\_  
 Sales Price: \_\_\_\_\_  
 NSP Home (yes/no) \_\_\_\_\_

**Title Company Information:**

Escrow Officer: \_\_\_\_\_  
 Title Company: \_\_\_\_\_  
 Phone(s): \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Real Estate Agent / Company Information:**

Company: \_\_\_\_\_  
 Agent's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone(s): \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Originator Lender / Broker Information:**

Company: \_\_\_\_\_  
 Loan Officer's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone (s): \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Type of Loan:**

- FHA
- VA
- CalHFA
- CAL-VET
- PERS
- 203(K):
- Other: \_\_\_\_\_

**Type of Assistance:**

- City of Stockton DPAP
- County of San Joaquin DPAP
- Emerging Market
- HiRAP
- CalHFA CHAP
- CalHFA CHDAP
- Other: \_\_\_\_\_

**Int. Rate:**

1<sup>st</sup> Loan: \_\_\_\_\_ 2<sup>nd</sup> Loan: \_\_\_\_\_  
 3<sup>rd</sup> Loan: \_\_\_\_\_ 4<sup>th</sup> Loan: \_\_\_\_\_

**Total Loan Amount**      **Total Assistance Amount**  
 \$ \_\_\_\_\_                      \$ \_\_\_\_\_

**FEE FOR CERTIFICATE AND SERVICES**

- **\$50.00 Fee is paid by the Lender as a Direct Out of Pocket Fee.**
- The Completed Certificate Request Form, Copy of Good Faith Estimate & Program Service Fees must be received by 5:00 p.m. for distribution on the following day.  
**Note: This charge CANNOT show up on any closing documents as a fee to the borrower.**
- Email the completed Certificate Request Form and Good Faith Estimate to the Homebuyer Education Class Housing Coach. Call our office if you do not have their email address or have any questions.