DOWN PAYMENT PRODUCTS REPAIR/REHAB WORKSHEET
Scope of Work and Member Certification

Homeowner: _____ **Member:** _____

If any funds were deposited in escrow for repair or rehab, the member must submit this worksheet and the property inspection report, along with the contracts, proposals/bids, paid receipts/invoices, lien waivers, cancelled checks and escrow transaction history. If actual costs were less than the amount escrowed, provide evidence (such as a loan transaction history) that any remaining escrow funds have been applied to the mortgage principal balance. Reimbursement of DP funds to the member will not occur until all repair or rehab is completed.

Total Repair or Rehab Escrow: $ _____

Description of Work and Justification	Vendor Name	Estimated Repair/Rehab	Actual Repair/Rehab
	Subtotal:		
	Contingency:		
	Total Funds Escrowed:		
	Total Actual Repair Expenses:		
	Unused Amount to Principal:		

The undersigned certifies that the assigned costs, as presented, are true, complete, and accurate. Member further certifies that the funds have been disbursed through an escrow account and that ***any unused funds were applied toward the principal balance of the first purchase mortgage.*** *Member acknowledges that providing false representations on this Scope of Work form may constitute an act of fraud.*

_____ _____ _____

Member Signature **Printed Name** **Date**