Surviving Spouse Affidavit

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as applicant for a home mortgage loan originated by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, pursuant to the Georgia Dream Homeownership Program (the “Program”) of the Georgia Housing and Finance Authority (“GHFA”) and administered by the Georgia Department of Community Affairs (“DCA”), do hereby represent and warrant that I am the surviving spouse of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who was a military serviceman or servicewoman or a “Protector”, who was killed while on active duty or in the line of duty.

I fully understand that the above statements and the information set forth in this affidavit are material to the application for a mortgage loan from the Program are public information and may be subject to public disclosure and/or verification by GHFA and/or DCA, and I declare under penalty of perjury, which is a felony offense in the State of Georgia, that the above statements and information are true, correct and complete;

I fully understand that in the event that I receive a mortgage loan, I hereby acknowledge that any false statement, representation or misstatement made by me creates a legal and binding obligation for me to make immediate and full repayment of the mortgage loan, and may result in a fine and/or imprisonment;

I fully understand that I hereby release GHFA, DCA and the originating lender from any claims related in any way to my application for this loan or to their verification or enforcement of the requirements of the Program.

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Applicant Date

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

My Commission expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Notary Seal Affixed Here)