

COMMUNITY PARTNERS INCENTIVE PROGRAM (CPIP)

COMMUNITY PARTNER PARTICIPATION AGREEMENT

Name of Community Partner: _____

Contact Person: _____
Name Title

Address: _____

Phone: _____ Fax: _____

Federal I.D. #: _____ Email address: _____

The Community Partner referenced above hereby agrees to:

1. Participate in the Maryland Department of Housing and Community Development's (DHCD) Community Partners Incentive Program (CPIP);
2. Provide financial assistance to eligible homebuyers to be made available at settlement; and,
3. Carry out these activities in accordance with the attached Department's CPIP Program Guidelines, as may be amended from time to time by DHCD in its sole discretion.

By: _____ (SEAL)
Community Partner's Authorized Representative

Printed Name: _____

Title: _____

Please provide the information requested below to complete your Community Partners Incentive Program (CPIP) agreement. Additional pages may be attached if necessary.

1. Approximate number of homebuyers anticipated to be assisted annually.

2. Type of Assistance to be provided: Please describe the type and amount of assistance you will provide to homebuyers. Will the assistance be in the form of a loan or a grant? If it will be a loan, please describe the interest rate and terms of the loan.

3. Plans for marketing the Program: Please describe your plans for marketing this program.

CDA may close CPIP or modify the terms of CPIP at any time if it determines it is in its best interest. If CDA closes CPIP, it will notify the Community Partner in writing at least 30 days prior to closing CPIP. CDA will honor all CPIP applications from homebuyers with a Verification of Partner Contribution from the Participating Community Partner in place prior to notification by CDA of the closing of CPIP.

If you have any questions, please call Vicky Grim at 410-514-7440 or email at grim@mdhousing.org.

Return completed Community Partner Participation Agreement to:

Vicky Grim
CDA Single Family Programs
Maryland Department of Housing and Community Development
100 Community Place
Crownsville MD 21032
Fax: 410-514-7499



Email: SingleFamilyHousing@mdhousing.org · 410-514-7530 · Toll-free 1- 800-638-7781 · Fax: 410-987-4136