

Homeowner Application for Surplus Funds

The following application is required for an applicant who was the homeowner, or successor in interest to a homeowner, to claim any surplus finds resulting from the sale of property that was acquired by Rhode Island Housing Mortgage and Finance Corporation ("RIHousing") as part of its Madeline Walker Program ("Surplus Funds").

For RIHousing to process any claim to Surplus Funds, an applicant must provide the following information:

- ✓ A completed, signed, and notarized Application for Surplus Funds
- ✓ A copy of your government-issued identification (i.e., driver's license or state/tribal identification card)
- ✓ A copy of the most recently recorded Deed to the property showing that the homeowner held title to the property at the time the subject property was foreclosed upon

If RIHousing determines that you are entitled to Surplus Funds, RIHousing will send you a communication and request for information regarding where to send the Surplus Funds.

Please be advised of the following:

- We will not review your application until we have received all the required documents.
- We reserve the right to request additional documents and information from you in connection with our review of your application.
- We may be unable to review your application if any document is incomplete or illegible, or if the documents have not been transmitted to our office in accordance with the above instructions.
- We will not return any documents to you.

If you have any questions, please contact us at (401) 457-1180, Monday through Friday, 8:30 a.m.-5:00 p.m. EST.

Sincerely,

Customer Service Enc.

Homeowner Application for Surplus Funds

Applicant Information		
Applicant Name	Relationship to Borrower	
Applicant Mailing Address	Applicant Email Address*	
Applicant Telephone Number*	Applicant Mobile Phone Number*	

Property Loan Information

Property Address:

*By providing RIHousing with your email address, telephone number, and mobile phone number, you consent and agree to our contacting you at the address/numbers about the above-referenced RIHousing loan(s). If you wish to change these preferences you may contact us at (401) 457-1180, Monday through Friday, 8:30 a.m.-5:00 p.m. EST.

Certification

By signing this Application Form and submitting it and the requested documents to RIHousing, I hereby represent to RIHousing that neither the Application Form nor any document that I have submitted to RIHousing in connection with my request for Surplus Funds as the former homeowner to the above-referenced property contains any misrepresentations or omissions of material fact. Further, I represent and certify that the submitted documents and the information, statements, and representations set forth in this Application Form are true, accurate, and complete.

Sign Applicant Name: _____

Print Applicant Name: _____

STATE OF ______ COUNTY OF ______

Subscribed and sworn to before me in _____ in said County on this ____ day of _____, j____, by _____, to me known and known by me or proved to me through satisfactory evidence to be the person executing the foregoing instrument.

Notary Public	
Printed Name:	
My commission expires:	



AFFIDAVIT OF HOMEOWNERSHIP

The undersigned hereby declares the following under pains and penalties of perjury:

1) I,	, possess an equity interest in the property located at:	
(Property Address)	,	
("the Property")		

- Rhode Island Housing Mortgage and Finance Corporation ("RIHousing") paid an outstanding tax lien on the property pursuant to its rights under the Madeline Walker Act (R.I. General Laws §44-9-8.3) and held an interest in the Property pursuant to a recorded collector's deed.
- 3) Title to the Property was then transferred to RIHousing free and clear of all other interests pursuant to a judgment of foreclosure of right of redemption of the collector's deed ("the Foreclosure").
- 4) RIHousing has since sold the Property to third party, and there exists surplus funds in excess of the amount owed to RIHousing for the payment of the tax lien(s), and other additional fees, costs, and intertest (the "Surplus").
- 5) I hereby swear that I:



was a fee simple owner of the Property and held title to the Property at the time of the Foreclosure; or



I am the successor in interest to the individual who was fee simple owner of the Property who held title to the Property at the time of the Foreclosure.

6) I have attached copy of the previously recorded the deed to the Property as evidence of the ownership interest referenced in Paragraph 5. (See Exhibit A)



7) Based on the interest described in Paragraph 5, I am owed a portion of the Surplus and hereby make a claim on said Surplus.

State of Rhode Island County of _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____, by

(name of document signer),

who proved to me through satisfactory evidence of identification, to be the person who appeared before me.

Notary Public Notary Public Printed Name Notary ID # My commission expires



Exhibit A

