

**FIRST TIME HOMEBUYER DOWNPAYMENT ASSISTANCE PROGRAM –
POLICY AND PROCEDURES MANUAL
APPLICANT ACKNOWLEDGEMENT**

Date: _____

I, _____, (full name) WHOSE ADDRESS IS

_____, (address), as applicant for the Gloucester County
First Time Homebuyer Downpayment Assistance Program, have read the County's Policies and Procedures
regarding this program. I understand and acknowledge these policies and agree to adhere to these.

Signed:

Applicant(s)