

**Kentucky Housing Corporation  
Homeowner Assistance Fund Program  
Notice Regarding Second Lien Mortgage**

**NOTICE**

The undersigned has applied for assistance under the Kentucky Housing Corporation Homeowner Assistance Fund Program (HoAF) and as a condition to participation in HoAF acknowledges the following:

I understand that because my second mortgage lender/servicer will not agree to accept payments from HoAF OR I have opted to omit my second mortgage from HoAF assistance, HoAF will not pay the monthly mortgage payment on the Second Lien Mortgage described below:

Name of Second Mortgage Lender: \_\_\_\_\_

Mortgage/Account Number \_\_\_\_\_

Property Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

I/We acknowledge (i) receipt of a copy of this Notice and (ii) that I/we have read and understood the terms and conditions contained herein.

\_\_\_\_\_  
Signature of Borrower Date

\_\_\_\_\_  
Signature of Co-Borrower Date