

SHIP
 Estimated Project Costs
Rehabilitation/Replacement
15384.340554028.5334420

Homeowner: Stanley J. White Case No. RC25-SHIP-004
Cynthia Denise Bellmon
1810 East Georgia St.
Bartow, Fl. 33830

Bid Amount	\$	175,900.00	\$	175,900.00
HO Contribution				
0% Payback Mortgage				
Deferred Mortgage	\$	175,900.00	\$	175,900.00

Soft Costs (Replacement SHIP GRANT)

Service Delivery	\$	4,570.00	\$	4,570.00
Appraisal	\$	400.00	\$	400.00
Survey	\$	-	\$	-
Blue Prints	\$	450.00	\$	450.00
Soil Test	\$	-	\$	-
Septic Tank Pumpout	\$	-	\$	-
Septic Tank Permit	\$	-	\$	-
Temp. Relocation	\$	3,825.00	\$	3,825.00
NOC Filing Fee	\$	13.00	\$	13.00
Mortgage Doc. Fee	\$	616.00	\$	616.00
Mortgage Recording Fee	\$	78.00	\$	78.00
Add'l Recording Fees	\$	-	\$	-
Total	\$	9,952.00	\$	9,952.00

TOTAL PROJECT COSTS **\$ 185,852.00**

Polk Deferred Mortgage & Security Agreement	\$	175,900.00
0% Payback Mortgage	\$	-
Grant Agreement	\$	9,952.00
TOTAL	\$	185,852.00

Prepared By: Paul DiRocco
Housing and Neighborhood Development
Housing Development Section
P.O. Box 9005, Drawer HS04
Bartow, FL 33831-9005

STATE HOUSING INITIATIVES PARTNERSHIP (SHIP) REHABILITATION/REPLACEMENT DEFERRED MORTGAGE AND SECURITY AGREEMENT

This Mortgage and Security Agreement ("Mortgage") is given this _____ day of _____, 2025. The Mortgagor(s) **Stanley J. White, a single man** whose post office address is: **1810 East Georgia St., Bartow, FL 33830** and **Cynthia Denise Bellmon, a single woman** whose post office address is: **1449 Lucerne RE. NE., Winter Haven, FL. 33881, individually and collectively** ("Owner(s)"), agrees to give the Mortgage to Polk County, a political subdivision of the State of Florida ("Lender"). Owner(s) owes the Lender the principal sum of **One Hundred Seventy-Five Thousand Nine Hundred and No/100 Dollars (\$175,900.00)**. This debt is evidenced by Owner's Mortgage Note ("Note") dated the same date as this Mortgage which provides for the debt of this Mortgage.

I. DUTIES AND OBLIGATIONS

1. Owner(s), in order to secure the performance of the Owner(s) of all agreements and conditions in the Note, this Mortgage, and any other loan agreement or instruments securing the Note does hereby mortgage, pledge, assign and grant a security interest to Lender in the following described property (hereinafter referred to as "Property"), situated at **1810 East Georgia St., Bartow, FL 33830**, and more particularly described as:

The West ½ of Lots 1, 2, 3, 4, 5, and 6, Block B, HIGHLAND PARK, according to the plat thereof recorded in Plat Book 9, Page 4 of the public records of Polk County, Florida

- A. All improvements now or hereafter erected on the Property; and
 - B. All easements, rights, appurtenances, rents, royalties, mineral, oil and gas rights and profits, water rights and improvements, structures, and fixtures attached to the Property, now and hereafter; and
 - C. All rents, issues, profits, revenue, income, condemnation awards, insurance proceeds and other benefits from the property described above; provided, however, that permission is hereby given to Owner so long as no default has occurred hereunder, to collect, receive and use such benefits from the property as they become due and payable.
2. Owner(s) warrants that Owner is indefeasibly seized of the Property in fee simple, and that the Owner has lawful authority to convey, mortgage, and encumber the Property. Owner warrants and will defend generally the title to the Property against all claims and demands, subject to any encumbrances of record.

3. Owner(s) agree that Owner(s), his heirs, and legal representatives shall;
 - A. perform and comply with, and abide by all stipulations, agreements, conditions and covenants of this Mortgage and the Note, and
 - B. shall duly pay all taxes and all insurance premiums reasonable required, and
 - C. keep the buildings on the premises in good repair and preservation, and
 - D. pay all costs and expenses including reasonable attorney's fees that Lender may incur in collecting money secured by this Mortgage, and also enforcing this Mortgage by suit or otherwise, and
 - E. fulfill all Owner's obligations under any home rehabilitation, improvement, repair or other loan agreement which Owner enters into with Lender.

II. EVENTS OF DEFAULT

1. Any one of the following shall constitute an event of default:
 - A. Owner(s) fails to repair or replace any buildings or improvements damaged by fire or other casualty to the satisfaction of the Lender, or
 - B. Owner(s) fails to maintain the Property in conformance with all local building, zoning and other applicable ordinances or codes, or
 - C. the Property is sold or otherwise transferred without Lender's written approval, or
 - D. if the dwelling ceases to be the full-time residence of the Owner while the Mortgage remains a lien thereon without Lender's written approval, or
 - E. Owner refinances the property without prior consent from the Lender, or
 - F. Owner(s) violates any other terms, covenants, provisions, or conditions of this Mortgage, the Note, other loan agreements or instruments securing the Note, or the Homeowner Assistance Agreement.
2. Acceleration; Remedies. If an event of default shall have occurred, the Lender, at the Lender's option, may declare the outstanding principal amount of the Note and all other sums secured hereby, to be due and payable immediately. Upon such declaration, such principal and other sums shall immediately be due and payable without demand or notice and said principal sum shall bear interest from the date of default until paid at a rate not to exceed three percent (3%) per annum.

The County, at its option, may prepare an alternative promissory note ("Alternative Note") requiring monthly payments of principal and interest. All payments on the Alternative Note shall be applied first to the interest due on the Note, and the remaining balance shall be applied to late charge, if any. The Owner has the right to reject the Alternative Note by paying the principal amount of the Note within thirty (30) days of default. Failure of the Owner to pay the principal amount of the Note or execute an Alternative Note within thirty (30) days of default of the deferment will constitute failure on the part of the Owner. Such failure will be subject to suit by the County to recover the Note.

Furthermore, the Owner agrees that the Lender may proceed by suit or suits at law or in equity or by any other appropriate proceeding or remedy to; (a) enforce payment of the Note or the performance of any term hereof or any other right; (b) foreclose this Mortgage and to sell, as an entirety or in separate lots or parcels, the Property under the judgment or decree of a court or courts of competent jurisdiction; and (c) pursue any other remedy available to it.

No right, power or remedy conferred upon or reserved to Lender by the Note, this Mortgage or any other instrument securing the Note, is exclusive of any other right, power of remedy, but each and every such right, power and remedy shall be cumulative and concurrent and shall be in addition to any other right, power and remedy given hereunder on under the Note or any other instrument security the Note, now or hereafter existing at law, in equity or by statute.

III. GENERAL PROVISIONS

1. No Waiver. No delay or omission of Lender to exercise any right or remedy accruing upon any event of default shall exhaust or impair any such right, power or remedy or shall be construed to waive any event of default or to constitute acquiescence therein.
2. Governing Law. This Mortgage and all disputes as to the subject matter of this Mortgage between Owner(s) and Lender shall be governed by the laws of Florida.
3. Venue. All disputes involving the subject matter of this Mortgage shall be brought in a competent court in Polk County, Florida.
4. Modification of Agreement. All modification to this Mortgage must be in writing and signed by both Owner(s) and Lender.
5. Separation of Inappropriate Provisions. If any provision of this Mortgage shall be deemed inappropriate by a court, the inappropriate provision shall be severed, and the rest of this Mortgage shall remain enforceable between Owner(s) and Lender.
6. Successors and Assigns Bound. This mortgage shall be binding on the parties, their assigns, successors, representatives or administrators. In the event that a sole Owner should die, or upon the death of the survivor of Joint Owners, the obligations created herein shall be binding upon the Estate, personal representative, heirs, or devisee of the deceased Owner.

IN WITNESS WHEREOF, the parties hereto have caused this contract to be executed by the undersigned as duly authorized.

ATTEST:

OWNER(s):

Witness

Stanley J. White

Printed name of Witness

Address of Witness:

Housing & Neighborhood Development-
1290 Golfview Avenue, Suite 167
P. O. Box 9005 Drawer HS04
Bartow, FL 33831-9005

Witness

Cynthia Denise Bellmon

Printed name of Witness

Address of Witness:

Housing & Neighborhood Development-
1290 Golfview Avenue, Suite 167
P. O. Box 9005 Drawer HS04
Bartow, FL 33831-9005

(Notary signature appears on following page)

**STATE OF FLORIDA
COUNTY OF POLK**

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, 2025, by Stanley J. White, who is personally known to me or has produced _____ as identification.

(AFFIX NOTARY SEAL)

Notary Public
Print Name _____

My Commission Expires _____

**STATE OF FLORIDA
COUNTY OF POLK**

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, 2025, by Cynthia Denise Bellmon, who is personally known to me or has produced _____ as identification.

(AFFIX NOTARY SEAL)

Notary Public
Print Name _____

My Commission Expires _____

Prepared By: Paul DiRocco
Housing and Neighborhood Development
Housing Development Section
P.O. Box 9005, Drawer HS04
Bartow, FL 33831-9005

**STATE HOUSING INITIATIVES PARTNERSHIP (SHIP)
Rehabilitation/Replacement
DEFERRED MORTGAGE AND SECURITY AGREEMENT
MORTGAGE NOTE**

NAME: Stanley J. White
Cynthia Denise Bellmon
ADDRESS: 1810 East Georgia St., Bartow, FL. 33830
CASE NUMBER: RC25-SHIP-004
LOAN AMOUNT: \$175,900.00

This Mortgage Note ("Note") is made on the date last signed below ("Effective Date"). The Grantor is Stanley J. White, whose post office address is: 1810 East Georgia St., Bartow, FL. 33830 and Cynthia Denise Bellmon, whose post office address is: 1449 Lucerne Rd. N.E., Winter Haven, FL. 33881, individually and collectively ("Owner(s)"). For value, the Owner jointly and severally promise to pay to the order of Polk County ("County"), a political subdivision of the State of Florida One Hundred Seventy-Five Thousand Nine Hundred and No/100 Dollars (\$175,900.00), payable in one installment at Bartow, Florida or at such a place as may hereafter be designated in writing by the County. This debt is secured by the Mortgage and Security Agreement ("Mortgage") dated the same date as this Note.

The Note shall be for a period of **fifteen (15) years** the date of recording the Deferred Mortgage and Security Agreement as referenced in the SHIP Program Rehabilitation/Replacement Program Homeowner Assistance Agreement. Repayment of this Note shall take place in the following manner:

1. If a default occurs, the Note shall be due and payable in full.
2. If no default occurs, the debt shall be permanently forgiven at the expiration of the **fifteenth (15th) year**.

This Note incorporates, and is incorporated into, the Mortgage of even date of the Property described above.

The Owner reserve(s) the right to prepay at any time all or any part of the principal amount of this Note without the payment of penalties or premiums.

If default be made in the payment of any sums mentioned herein or in said Mortgage, or in the performance of the mortgage, then the entire principal sum shall at the option of the County become at once due and collectible without notice, time being of the essence, and said principal sum shall bear interest from the date of default until paid at a rate not to exceed three percent (3%) per annum. Failure to exercise this option shall not constitute a waiver of the right to exercise the same in the event of any subsequent default.

The County, at its option, may prepare an alternative promissory note ("Alternative Note") requiring monthly payments of principal and interest. All payments on the Alternative Note shall be applied first to the interest due on the Note, and the remaining balance shall be applied to late charge, if any. The Owner has the right to reject the Alternative Note by paying the principal amount of this Note within thirty (30) days of default of the deferment. Failure of the Owner to pay the principal amount of this Note or execute an Alternative Note within thirty (30) days of default of the deferment will constitute failure on the part of the Owner. Such failure will be subject to suit by the County to recover on this Note.

If a suit is instituted by the County to recover on this Note, the Owner agree(s) to pay all costs of such collection, including reasonable attorney's fees and court costs.

This Note is secured by a Mortgage on real estate of even date duly filed for record in Polk County, Florida. The terms of said Mortgage are by this reference made a part hereof.

Demand, protest and notice of demand and protest are hereby waived, and the Owner hereby waives, to the extent authorized by law, any and all homestead and other exemption rights which otherwise would apply to the debt evidenced by this Note.

Each person liable hereon whether maker or his heirs, legal representatives or assigns, hereby waives presentment, protest, notice, notice of protest and notice of dishonor and agrees to pay all costs, including a reasonable attorney's fee, whether suit be brought or not, if, after maturity of this Note or default hereunder, or said Mortgage, counsel shall be employed to collect this Note or to protect the security of said Mortgage.

Whenever used herein the terms "holder", "maker", and "payee" shall be construed in the singular or plural as the context may require or admit.

(Signatures appear on following page)

IN WITNESS WHEREOF, the parties hereto have caused this contract to be executed by the undersigned as duly authorized.

ATTEST:

OWNER(s):

Witness

Stanley J. White

Printed name of Witness

Address of Witness:

Housing & Neighborhood Development-
1290 Golfview Avenue, Suite 167
P. O. Box 9005 Drawer HS04
Bartow, FL 33831-9005

Witness

Cynthia Denise Bellmon

Printed name of Witness

Address of Witness:

Housing & Neighborhood Development-
1290 Golfview Avenue, Suite 167
P. O. Box 9005 Drawer HS04
Bartow, FL 33831-9005

(Notary signature on following page)

**STATE OF FLORIDA
COUNTY OF POLK**

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, 2025, by Stanley J. White, who is personally known to me or has produced _____ as identification.

(AFFIX NOTARY SEAL)

Notary Public
Print Name _____
My Commission Expires _____

**STATE OF FLORIDA
COUNTY OF POLK**

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____, 2025, by Cynthia Denise Bellmon, who is personally known to me or has produced _____ as identification.

(AFFIX NOTARY SEAL)

Notary Public
Print Name _____
My Commission Expires _____

Effective January 1, 2025

RESIDENT INCOME CERTIFICATION – Homeownership/DPA
Florida Housing Finance Corporation
State Housing Initiatives Partnership (SHIP) Program

Effective Date: _____ Allocation Year: _____

A. Recipient Information (select one)

- a. Current homeowner
 b. Home buyer Existing Dwelling Newly Constructed Dwelling

B. Subsidy Use (check all that apply)

- Down Payment Assistance Principal Buy Down
 Closing Costs Rehabilitation
 Interest Subsidy Emergency Repair
 Loan Guarantee Other

C. Household Information: Include all household members

Member	Full Name	Relationship to Head	Age
1	Stanley White	HEAD	51
2			
3			
4			
5			
6			
7			
8			

D. Assets: All household members including assets owned by minors

Member	Asset Description	Cash Value	Income from Assets
1	Comerica Bank *9382 (\$11.69)	\$ 0.00	
2	Mid Florida *2843 (\$10.00)	\$ 0.00	
3			
4			
5			
6			
7			
8			
Total Cash Value of Assets		D(a) \$ 0.00	
Total Income from Assets		D(b)	\$ 0.00
If line D(a) is greater than \$51,600: Add the income from any assets for which actual income can be calculated, then calculate the imputed income for the assets where actual income cannot be calculated. To calculate imputed income, multiply the amount of assets where actual income cannot be calculated by the HUD specified rate		D(c)	\$


Effective January 1, 2025

(.45%). Combine both amounts and enter results in D(c), which must be counted on page two alongside other sources of household income.	0.00
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E. **Anticipated Annual Income:** Includes unearned income and support paid on behalf of minors.

Member	Wages / Salaries (include tips, commission, bonuses and	Benefits / Pensions	Public Assistance	Other Income	*Asset Income
1		\$ 11,604.00			(Enter the greater of box D(b) or box D(c), above, in box E(e) below)
2					
3					
4					
5					
6					
7					
8					
	(a)	(b)	(c)	(d)	(e)
Totals	\$ 0.00	\$ 11,604.00	\$ 0.00	\$ 0.00	\$ 0.00
Enter total of items E(a) through E(e). This amount is the Annual Anticipated Household Income					\$ 11,604.00

F. **Recipient Statement:** The information on this form is to be used to determine maximum income for eligibility. I/we have provided, for each person set forth in Item C, acceptable verification of current and anticipated annual income. I/we certify that the statements are true and complete to the best of my/our knowledge and belief and are given under penalty of perjury. **WARNING:** Florida Statute 817 provides that willful false statements or misrepresentation concerning income and assets or liabilities relating to financial condition is a misdemeanor of the first degree and is punishable by fines and imprisonment provided under S 775.082 or 775.83.


 Signature of Head of Household Date 03-06-25

 Signature of Spouse or Co-Head of Household Date _____

 Signature of Household Member (over 18 years) Date _____

 Signature of Household Member (over 18 years) Date _____

 Signature of Household Member (over 18 years) Date _____

 Signature of Household Member (over 18 years) Date _____

Effective January 1, 2025

G. **SHIP Administrator Statement:** Based on the representations herein, and upon the proofs and documentation submitted pursuant to item F, hereof, the family or individual(s) named in item C of this Resident Income Certification is/are eligible under the provisions of Chapter 420, Part V, Florida Statutes, the family or individual(s) constitute(s) a: (check one)

- Extremely Low Income (ELI) Household** means individuals or families whose annual income does not exceed 30% of the AMI as determined by HUD with adjustments for household size.
Maximum Income Limit: \$ 16,050.00
- Very Low Income (VLI) Household** means individuals or families whose annual income does not exceed 50% of the AMI as determined by HUD with adjustments for household size.
Maximum Income Limit: _____
- Low Income (LI) Household** means individuals or families whose annual income does not exceed 80% of the AMI as determined by HUD with adjustments for household size.
Maximum Income Limit: _____
- Moderate Income (MI) Household** means individuals or families whose annual income does not exceed 120% of the AMI as determined by HUD with adjustments for household size.
Maximum Income Limit: _____
- 121-140% Income Household** means individuals or families whose annual income does not exceed 140% of the AMI as determined by HUD with adjustments for household size.
Maximum Income Limit: _____

Based upon the _____ (year)
Income Limits for 2024 (MSA or County) Polk

Signature of the SHIP Administrator or His/Her Designated Representative:

Signature *[Handwritten Signature]* Date 03/11/2025
Name (print or type) _____ Title Housing Administrative Supervisor

H. **Household Data** (to be completed by Head of Household only)

Household elects to not participate.						_____	(Initials of Household Head)			
Head of Household Data										
By Race / Ethnicity						By Age				
White	Black	Hispanic	Asian	American Indian	Other	0 - 25	26 - 40	41 - 61	62 +	
	1							1		
Household Members Data										
Special Target / Special Needs (Check all that apply to any member)										
Farm worker	Developmentally Disabled	Homeless	Elderly	Special Needs (define)	Special Needs (define)					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SSI						

NOTE: Information in this Section H is being gathered for statistical use only. No resident is required to give such information

Effective January 1, 2025

unless they desire to do so. Refusal to provide information in this Section will not affect any right household has as residents. There is no penalty for households that do not complete the form.

Florida Housing Finance Corporation State Housing Initiatives Partnership (SHIP) Program Asset Guidelines
Follow these guidelines when completing Section D of the Resident Income Certification (RIC) form.
Net family assets are defined as the net cash value of all assets owned by the family, after deducting reasonable costs that would be incurred in disposing of real property, savings, stocks, bonds, and other forms of investment, except as excluded.

ANNUALLY ADJUSTED ASSET THRESHOLD AMOUNT AND VERIFICATION REQUIREMENTS
• When the total net value of assets is equal to or less than \$51,600 , the family may self-certify assets.
• The threshold amount effective January 1, 2025 is \$51,600 .
• When the total net value of assets exceeds \$51,600 , each asset must be verified.
• The most current bank statement may be used to verify checking and savings account.

INSTRUCTIONS FOR COMPLETING SECTION D (NET FAMILY ASSETS) ON RESIDENT INCOME CERTIFICATION FORM
• Include assets owned by all family members, including assets owned by minors. Do not include assets owned by foster adults or foster children.
• Include only those assets that are not excluded from net family assets (see below for a list of exclusions).
• Actual income from assets is always included in a family's annual income, regardless of the total value of net family assets or whether the asset itself is included or excluded from net family assets, unless that income is specifically excluded by 24 CFR § 5.609(b).
• Calculate and include imputed income only when the following 3 conditions are met: 1. The value of net family assets exceeds \$51,600. 2. The specific asset is included in net family assets; and 3. Actual asset income cannot be calculated for the specific asset.
• The Passbook Rate should be used to calculate imputed income. The current rate is 0.45%.
• Actual income can be \$0.00. For example, a checking account with a 0% interest rate has an actual income of \$0.00. Imputed income would not be calculated.
• The cash value of real property or other assets with negative equity would be considered \$0 for the purposes of calculating net family assets.

REQUIRED EXCLUSIONS FROM NET FAMILY ASSETS
• The value of necessary items of personal property (see below for a list of necessary personal property).
• The value of all non-necessary items of personal property with a total combined value of \$51,600 or less, annually adjusted for inflation.
• The value of any account under a retirement plan recognized as such by the Internal Revenue Service, including Individual Retirement Accounts (IRAs), employer retirement plans (e.g., 401(k), 403(b)), and retirement plans for self-employed individuals.
• The value of real property that the family does not have the effective legal authority to sell in the jurisdiction in which the property is located.
• Any amounts recovered in any civil action or settlement based on a claim of malpractice, negligence, or other breach of duty owed to a family member arising out of law that resulted in a member of the family being a person with disabilities.
• The value of any Coverdell education savings account under section 530 of the Internal Revenue Code of 1986; the

Effective January 1, 2025

value of any qualified tuition program under section 529 of such Code; and the amounts in, contributions to, and 61 distributions from any Achieving a Better Life Experience (ABLE) account authorized under section 529A of such code.
• The value of any “baby bond” account created, authorized, or funded by the federal, state, or local government (money held in trust by the government for children until they are adults).
• Interests in Indian trust land.
• Equity in a manufactured home where the family receives assistance under 24 CFR Part 982.
• Equity in property under the Homeownership Option for which a family receives assistance under 24 CFR Part 982.
• Family Self-Sufficiency accounts.
• Federal tax refunds or refundable tax credits for a period of 12 months after receipt by the family.
• The full amount of assets held in an irrevocable trust.
• The full amount of assets held in a revocable trust where a member of the family is the beneficiary, but the grantor/owner and trustee of the trust is not a member of the participant family or household.

EXAMPLES OF NECESSARY AND NON-NECESSARY PERSONAL PROPERTY (This is not an exhaustive list.)	
Necessary Personal Property (Excluded from Net Family Assets)	Non-Necessary Personal Property (Excluded when total is equal to/less than \$51,600)
• Car(s)/vehicle(s) that a family relies on for transportation for personal or business use (e.g., bike, motorcycle, skateboard, scooter)	• Recreational car/vehicle not needed for day-to-day transportation (campers, motorhomes, travel trailers, all-terrain vehicles (ATVs))
• Furniture, carpets, linens, kitchenware	• Bank accounts or other financial investments (e.g., checking account, savings account, stocks/bonds)
• Common appliances	• Recreational boat/watercraft
• Common electronics (e.g., radio, television, DVD player, gaming system)	• Expensive jewelry without religious or cultural value, or which does not hold family significance
• Clothing	• Collectibles (e.g., coins/stamps)
• Personal effects that are not luxury items (e.g., toys, books)	• Equipment/machinery that is not used to generate income for a business
• Wedding and engagement rings	• Items such as gems/precious metals, antique cars, artwork, etc.
• Jewelry used in religious/cultural celebrations and ceremonies	
• Religious and cultural items	
• Medical equipment and supplies	
• Health care-related supplies	
• Musical instruments used by the family	
• Personal computers, phones, tablets, and related equipment	
• Professional tools of trade of the family, for example professional books	
• Educational materials and equipment used by the family, including equipment to accommodate persons with disabilities	
• Equipment used for exercising (e.g., treadmill, stationary bike, kayak, paddleboard, ski equipment)	
• Items of personal property not considered necessary will be classified as non-necessary.	

Effective January 1, 2025

Florida Housing Finance Corporation State Housing Initiatives Partnership (SHIP) Program Asset Self-Certification <i>(Complete only <u>one</u> form per household; include assets of children.)</i>	
For the following asset types, include the current Cash Value of <u>each</u> asset held by any family member and the actual income that the asset earns. *Cash value is current market value minus cost to convert an asset to cash, such as broker's fees, settlement costs, outstanding loans, penalties for early withdrawal, etc.*	
Household Name:	

PART I. ASSETS DISPOSED OF FOR LESS THAN FAIR MARKET VALUE(FMV)		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Within the past two (2) years, I/we have sold or given away assets below their fair market value (FMV).

Asset #1:		Date of Disposal:		FMV - amt received:	\$
Asset #2:		Date of Disposal:		FMV - amt received:	\$

PART II: FEDERAL TAX RETURN OR REFUNDABLE FEDERAL TAX CREDIT		
Have you received a federal tax return or refundable federal tax credit in the last 12 months?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Amount of return/credit:		\$

PART III: NON-NECESSARY PERSONAL PROPERTY (NNPP)	
<input type="checkbox"/>	I/we have non-necessary personal property which is listed here'
<input type="checkbox"/>	I/we do not have any non-necessary personal property

Type of Asset	(A) Cash Value*	(B) Annual Income	Type of Asset	(A) Cash Value*	(B) Annual Income
Cash on Hand	\$	N/AP	Cryptocurrency	\$	\$
Pre-paid Debit Card (including Govt. Benefits)	\$	N/AP	Money Market/ CD	\$	\$
Checking/Savings	\$	\$	Annuities	\$	\$
Checking/Savings	\$	\$	Brokerage Account	\$	\$
Savings	\$	\$	Stocks/Bonds	\$	\$
Internet based assets (Cash App, Venmo, PayPal, Crowdfunding,	\$	\$	Other: _____	\$	\$

Effective January 1, 2025

etc.)					
Whole Life Ins	\$	\$	Other: _____	\$	\$

Non-Account Based	
Possessions not general held in an account such as vehicles used for recreation (e.g., RVs, ATVs, and Boats), antique cars, collectibles (e.g. stamps, jewelry, coins, and artwork.), and equipment/machinery that is not used to generate income for a business	
Description	(A) Cash Value *
	\$
	\$
	\$
	\$

PART IV. REAL PROPERTY	
<input type="checkbox"/>	I/we have real property which is listed here.
<input type="checkbox"/>	I/we do not have any real property.

Description of Property	(C) Cash Value*	(D) Income
	\$	\$
	\$	\$

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of a lease agreement.

Signature of Applicant/Tenant	Date	Signature of Applicant/Tenant	Date	

PENALTIES FOR MISUSING THIS CONTENT: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7), and (8). Violations of these provisions are cited as violations of 42 USC 408 (a), (6), (7), and (8).

BOCC

RECORDING FEES / COPY CHARGES

*** This form must be completed to utilize Court House / Court House Branch services to record documents such as liens, deeds, easements, Satisfactions, etc. and for copy services. >>>>>> **These services will not be rendered without this completed form.** <<<<<<

Recording Fees Type of document: RC SHIP Deferred Mortgage and Security Agreement
 Copy Charges

Number of documents: 1

ACCOUNTING INFORMATION

FUND (5)	COST CENTER (9)	ACCOUNT (7)	PROJECT (7)	AREA (2)	TBD (7)
15384	340554028	5334420	0000000	00	0000000

If not Project-related = 0000000

PROJECT-RELATED ***

TASK	AWARD	PROJECT EXPENDITURE ORGANIZATION
Stanley J. White and Cynthia Denise Bellmon		

RC25-SHIP-004

*** DNKP

DO NOT CHARGE INTANGIBLES

DEPT / DIVISION: Housing & Neighborhood Development
Paul DiRocco 09/12/2025
EMPLOYEE SIGNATURE DATE

ATTACH RECEIPT

TELEPHONE: 534-5616 EXTENSION: NA

1997 AUG 14 PM 1:14

Prepared By and Return to:

Connie P. Brown
COMMONWEALTH LAND TITLE INSURANCE COMPANY
205 1/2 South Broadway
P. O. Box 817
Bartow, FL 33830-0817
(941) 533-0891

File No.: BA970940
Property Appraisers Parcel ID#: 093025-245000-002012
Grantee(s) S.S.#(s):

WARRANTY DEED

THIS INDENTURE, made August 12, 1997 between:

Gary McKinsey, a single man

08/14/97

DEPT 115 6.00
DEPT 291 1.00
DEPT 251 189.00
623 H
CHECKS 196.00
5788A

whose post office address is:
Hereinafter called the grantor, to:

Clarence White and Hazel Lee White, husband and wife, Cynthia Denise Bellmon and Stanley J. White, as joint tenants with full rights of survivorship

whose post office address is: 1810 E. Georgia Street
Bartow, FL 33830

hereinafter called the grantee:
("grantor" and "grantee" are used for singular or plural, as context requires)

WITNESSETH: That the grantor, for and in consideration of the sum of TEN and No/100 (\$10.00) Dollars, and other good and valuable consideration to the grantor in hand paid by the grantee, the receipt of which is hereby acknowledged, has granted, bargained and sold to the grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Polk County, Florida, to-wit:

The West 1/2 of Lots 1, 2, 3, 4, 5 and 6, Block B, HIGHLAND PARK, according to the plat thereof recorded in Plat Book 9, Page 4 of the public records of Polk County Florida.

TO HAVE AND TO HOLD, the same in fee simple forever.

AND the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever.

SUBJECT TO covenants, restrictions, easements of record and taxes accruing subsequent to December 31, 1996.

IN WITNESS WHEREOF, the grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Connie P. Brown
CONNIE P. BROWN
Darlene Gilley
DARLENE GILLEY

Gary McKinsey
Gary McKinsey

Documentary Tax Pd. \$ 189.00
Intangible Tax Pd. \$
E.D. "Bud" Dixon, Clerk, Polk Co.
By: Bud Dixon Deputy Clerk

State of Florida
County of Polk

THE FOREGOING instrument was acknowledged before me on August 12, 1997 by Gary McKinsey, who has produced driver's license as identification.

My Commission Expires:

Connie P. Brown
Notary Signature (IMPRESS SEAL)
CONNIE P. BROWN
Printed Notary Signature

CONNIE P BROWN

109777

A. R. COMMONWEALTH LAND TITLE OFFICE BOX

189.00

POLK OFF. REC. PAGE 3884 1494