



Our 35th Year!

**“BREAK THE BARRIER TO HOMEOWNERSHIP”
2026 Closing Cost Assistance Award Contest**

Since 2001, the Affordable Housing Conference of Montgomery County (AHCMC) and its sponsors have provided more than \$400,000 to more than 40 moderate income individuals and families through its “Break the Barrier Home Ownership” closing cost assistance program.

- **Are you a resident of Montgomery County, Maryland and are you a first-time home buyer?**
- **If so, you may be eligible to win up to \$10,000 to use toward down payment or closing cost assistance on the purchase of a home in Montgomery County.**
- **Have you applied before? Don’t be discouraged. All qualified applicants are welcome!**

Here’s how to apply:

1. Write an **original*** essay (one page, typed, 300 words or less, please), on “What Homeownership Means to Me,” sharing detailed and personal examples of your hopes for home ownership and what receiving closing cost assistance means to you and your family.
2. Fill out the attached application.
3. Mail or email your essay and application to:

*Affordable Housing Conference of Montgomery County •
Home Ownership Program • P.O. Box 2111 • Rockville, MD 20847
Or email it to **ClosingCostAward@affordablehousingconference.org***

****DEADLINE** TO APPLY: March 16, 2026**

Act Now! Complete the application and write an essay on **“What Home Ownership Means to Me”** and mail or email it with your application on or before March 16, 2026.

To be eligible, applicants must be first-time home buyers who live in Montgomery County, Maryland. **Minimum income requirement is \$40,000 per year. Maximum income limits relate to household size.**

<u>Household Size</u>	<u>Maximum Annual Income+</u>
1 person	\$80,500
2 person	\$92,000
3 person	\$103,500
4 person	\$124,000
5 person	\$133,000

⁺Maximum income refers to gross annual income (wages before taxes) earned by all working adults per household
*Essays submitted must be original work. Applicants who submit essays with plagiarized or borrowed content will be disqualified.

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All 2026 Closing Cost Program Recipients MUST be present at the 2026 AHCMC Summit on May 15, 2026, in order to receive recognition of their closing cost award. This award money can ONLY be used to cover down payment and closing cost expenses on homes purchased in Montgomery County Maryland within one year of receiving the voucher describing the applicant's selection. Applicants and winners need not be MPDU certificate holders. However, MPDU certificate holders are encouraged to enter the contest. The entry form requires financial and other information, so that we can ensure you have the ability to purchase a home within one year of receiving your voucher. Finalists will be interviewed in person by an awards committee of AHCMC representatives and its designees. We will keep applicants posted about the timing of interviews. Finalists could be asked to provide additional financial information. Finalists will be required to sign a permission form for criminal, credit, financial and employment background checks. All personal and financial information furnished will be reviewed by the awards committee members and appropriate financial institutions, and will remain confidential. Prior year applicants who were not chosen may re-apply but must submit a new application and essay. By submitting an application, applicants and their dependents will be asked, but not required, by AHCMC for permission to use their names and likenesses in promotional and published materials.

Affordable Housing Conference • 2026 Closing Cost Assistance Application

	Applicant	Co-Applicant (if any)
Name		
Street Address		
City/State/Zip		
Home Phone & Mobile Phone		
Email		

How many people will be living in the home you purchase? # Adults _____ # of children under 18 _____
 All children, under 18 and over, must be listed on this application, if living in the same residence.

Name	Relationship	Age & DOB

EMPLOYMENT INFORMATION *If employed less than two years, provide the information listed below for past employer as well.*

	Applicant	Co-Applicant (if any)
Name of Employer		
Position/Title		
Years Employed		
Business Phone/Email		
Supervisor's name, phone & email		

FINANCIAL INFORMATION *Please provide a separate sheet listing total sources of income and expenses if more space is required.*

Applicant Monthly Gross Income	Co-Applicant Monthly Gross Income
\$	\$

Applicant's Monthly Sources of Income				Co-Applicant's Monthly Sources of Income			
monthly wages	child support	interest income	other income	monthly wages	child support	interest income	other income
\$	\$	\$	\$	\$	\$	\$	\$

Applicant's Monthly Expenses					Co-Applicant's Monthly Expenses				
rent	car payment	student loans	credit card payments	other expenses	rent	car payment	student loans	credit card payments	other expenses
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

Applicant's Other Assets (if applicable)	Co-Applicant's Other Assets (if applicable)

Housing choice voucher? <input type="checkbox"/> Yes <input type="checkbox"/> No \$ Amount:	Montgomery County MPDU certificate holder? <input type="checkbox"/> Yes <input type="checkbox"/> No Time period of certificate:
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	Name of Bank/Account Number	Account Holder	Balance/Value
Checking Account		<input type="checkbox"/> Applicant / <input type="checkbox"/> Co-Applicant	\$
Savings Account		<input type="checkbox"/> Applicant / <input type="checkbox"/> Co-Applicant	\$
Other sources of Downpayment Funds		<input type="checkbox"/> Applicant / <input type="checkbox"/> Co-Applicant	\$

AUTHORIZATION: I hereby authorize the AHCMC and any credit reporting bureau designated by them to obtain any and all information concerning employment, checking and/or savings accounts, obligations, and all other credit matters which they may require in connection with my application for this contest. I certify that all of the information on this application is true. I understand that omitting or falsifying information will lead to immediate disqualification or forfeiture of any award given.

Applicant Signature:		Print Name:	
Date	Social Security #	Date of Birth	
Co-Applicant Signature:		Print Name:	
Date	Social Security #	Date of Birth	
<i>If other adults will be living in the home you purchase, signature, SSN and birthdate are required for credit report.</i>			
Signature:	PrintName:	Relationship to Applicant:	
Date	Social Security #	Date of Birth	

MAKE SURE TO ATTACH YOUR ONE PAGE ESSAY