

Riverside County Housing and Workforce Solutions  
3403 Tenth Street, Suite 300  
Riverside, CA 92501  
951-955-0784

**RIVERSIDE COUNTY  
FIRST TIME HOME BUYER PROGRAM (ARPA FTHB)  
SUBMISSION PHASE COVER LETTER**

(Lenders should use this form or provide their own cover letter containing all of the following information)

Date Submitted: \_\_\_\_\_

**Lender Submitting ARPA FTHB Reservation:**

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Escrow Information:**

Escrow Company: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Escrow # : \_\_\_\_\_

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Name(s) of ARPA FTHB Applicant(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address of Home Being Purchased: \_\_\_\_\_

\_\_\_\_\_

Special Comments or Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_