

CONTRA COSTA COUNTY
COMMUNITY DEVELOPMENT DEPARTMENT
Mortgage Credit Certificate Program
2530 Arnold Drive, Suite 190
Martinez, CA 94553
925-335-7206

MCC NO: _____
NAME: _____
SOCIAL SECURITY: _____
NAME: _____
SOCIAL SECURITY: _____

NOTICE OF INCOMPLETE APPLICATION

TO: _____
(Lender)

(Address)

FROM: CONTRA COSTA COUNTY MORTGAGE CREDIT CERTIFICATE PROGRAM

RE: _____
(Name of Borrower (s)) (Social Security No.)

(Name of Borrower (s)) (Social Security No.)

(Address)

The initial request for the above-named borrower was incomplete for the following reason(s):

_____ Necessary documents were not received. Documents needed are:

_____ Application was not enclosed in an 8 1/2 x 14 file folder. (No further applications will be accepted unless enclosed in file folder).

_____ Necessary signatures were not obtained on the following document(s):

_____ Other _____

Please correct the application and resubmit to the County's Community Development Department.

CONTRA COSTA COUNTY
MCC PROGRAM COORDINATOR