## HOUSE KEYS 4 EMPLOYEES (HK4E): EMPLOYER PARTICIPATION AGREEMENT



Contact	Contact Person:Title:			
Compa	ny Address:			
City:		State:	Zip Code:	
Phone: _		Email:		
The emp	oloyer referenced above hereby a	grees to:		
1. 2. 3.	Participate in the Maryland Department of Housing and Community Development's (the "Department") House Keys 4 Employees Program (HK4E); Provide financial assistance to eligible employee(s) to be made available at settlement in accordance with the Verification of Partner Contribution; and, Carry out these activities in accordance with the Partner Match Programs Fact Sheet, as may be amended from time to time by the Department in its sole discretion.			
	Signature:		(SEAL)	
Please n		pelow to complete your House Keys		
agreem				
1.	Total number of employees:			
2.	Total number of employees antic	al number of employees anticipated to be assisted annually through HK4E:		
3.	Will the assistance be in the form of a loan o	Of assistance to be provided: Please describe the type and amount of assistance you will provide to employees. assistance be in the form of a loan or a grant and what amount do you plan on contributing (if known at this time)? If it will be a lease describe the interest rate and terms of the loan.		
	Loan or Grant?			
	Amount:			
	Terms:			
4.	Plans for marketing the program:	Please describe your plans for marketing this p	rogram.	
	All HK4E applications where a Verification of Po	iny time. The Department will notify the partner artner Contribution was submitted prior to notifi	cation will be honored.	
	•	d Employer Participation Agreemer	•	

For more information, please visit:

## mmp.Maryland.gov



