

Joplin Consortium Homebuyers Assistance Application

PROPERTY INFORMATION		
Subject Property Address	City	Year Built
Purchase Price	Required Downpayment	Closing Costs

APPLICANT INFORMATION					
Applicant Name			Co-Applicant Name		
Social Security Number	Home Phone	Age	Social Security Number	Home Phone	Age
<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	Dependents No. Ages		<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	Dependents No. Ages	
Position/Title/Type of Business		Business Phone	Position/Title/Type of Business		Business Phone
Name & Address of Employer <input type="checkbox"/> Self-Employed		Yrs. on Job	Name & Address of Employer <input type="checkbox"/> Self-Employed		Yrs. on Job
Position/Title/Type of Business		Business Phone	Position/Title/Type of Business		Business Phone
Name & Address of Employer <input type="checkbox"/> Self-Employed		Yrs. on Job	Name & Address of Employer <input type="checkbox"/> Self-Employed		Yrs. on Job
Position/Title/Type of Business		Business Phone	Position/Title/Type of Business		Business Phone
Name & Address of Employer <input type="checkbox"/> Self-Employed		Yrs. on Job	Name & Address of Employer <input type="checkbox"/> Self-Employed		Yrs. on Job

INCOME

For each type of income your household receives, give the source of income and the amount of income that can be expected from source during the next 12 months.

Household Member	Source of Income/Type of Income	Annual Amount

INCOME INFORMATION

Please answer each of the following questions. For each "yes" answer, provide details in the chart following the questions.

1. Does any member of your family now receive, or expect to receive unemployment in the (last/next) 12 months?
 Yes No
2. Is any member of your household now receive, or expect to receive child support in the (last/next) 12 months?
 Yes No
3. Is any member of your household entitled to child support that he/she is not now receiving?
 Yes No
4. Does any member of your household now receive or expect to receive alimony?
 Yes No
5. Is any member of your household entitled to alimony that he/she is not now receiving?
 Yes No
6. Does any member of your household receive or expect to receive Welfare/AFDC?
 Yes No
7. Does any member of your household receive or expect to receive Social Security?
 Yes No
8. Does any member of your household receive or expect to receive income from a pension or annuity?
 Yes No
9. Does any member of your household receive regular cash contributions from individuals not living in the unit or from agencies?
 Yes No
10. Does any member of your household receive income from assets including interest on checking, savings, and dividends from CD's, stocks or bonds, or rental property?
 Yes No

ASSETS			
Description	Location	Account Number	Cash or Market Value

DECLARATIONS	
<p>1. Are you a party to a lawsuit? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Have you directly or indirectly been obligated on any loan in the last 7 years which resulted in foreclosure, transfer or title in lieu of foreclosure, or judgement? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Are you presently delinquent or in default on any Federal debt or any other loan mortgage, financial obligation, bond, or loan guarantee? If "Yes," give details. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>5. Are you a permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>6. Do you intend to occupy the property as your primary residence? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p align="center">IMPORTANT! READ THIS BEFORE SIGNING</p> <p>I/we certify that the information provided in this Application is true and complete to the best of my/our knowledge and belief. I/we consent to the disclosure of such information for purposes of income and verification related to my/our application for financial assistance. I/we understand that any willful misstatement of material fact will be grounds for disqualification. I/we understand that this application shall remain the property of the agency to which it is submitted and or Joplin Consortium.</p> <p>I/we hereby consent to and authorize the agency and the Joplin Consortium, after giving reasonable notice, to enter the improved property to determine that the approved improvements specific to this Application have been completed and meet codes and standards set forth by the Joplin Consortium.</p> <p>I/we understand that in pre-1978 homes, HUD lead-based paint regulations must be followed as a condition of this application.</p> <p>I/we understand that it may be a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the facts in this Application as applicable under the provisions of the United States Criminal Code.</p>	
Signature of Applicant: _____	Date: _____
Signature of Applicant: _____	Date: _____