



**Are you a first Time Buyer (you do not currently own a home and have not owned a home in the past three years)?**

Yes                      No

**Household Type (please select the most accurate)?**

- 1. Female headed single parent household    2. Male headed single parent household    3. Single adult
- 4. Two or more unrelated adults    5. Married with children    6. Married without children    7. Other

**Family/Household Size:** \_\_\_\_\_ **How many dependents (other than those listed by any co-borrower)?** \_\_\_\_\_

**What ages are they?** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Are there non-dependents who will be living in the home?**                      Yes                      No                      *If yes, list below:*

Relationship	Age	Relationship	Age
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**Annual Family or Household Income:** \$ \_\_\_\_\_

All income entering the household

**Education (please circle one):**

- 1. Below High School Diploma
- 2. High School Diploma or Equivalent
- 3. Two-Year College
- 4. Bachelors Degree
- 5. Masters Degree
- 6. Above Masters Degree

**Referred to by (please circle all that apply):**

- Print Advertisement
- Bank
- Government
- TV
- Realtor
- Staff/Board member
- Walk-In
- Friend
- Radio
- Newspaper Article

*If you were referred by a bank, which one?* \_\_\_\_\_

*If referred by another source not listed above, which one?* \_\_\_\_\_

**PARTICIPANT INCOME/ EMPLOYMENT — Last 2 Years** *Please Print Clearly*

**Primary Employer:** \_\_\_\_\_

\_\_\_\_\_  
*Title* *Hire Date*

\_\_\_\_\_  
*Street Code* *City* *State* *Zip*

**Phone:** (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Part-Time    or    Full-Time    (Please Circle)**

**Gross Income (before taxes):** \$ \_\_\_\_\_

*Is this amount paid*    \_\_\_\_\_ hourly    \_\_\_\_\_ weekly    \_\_\_\_\_ every two weeks    \_\_\_\_\_ twice a month  
   \_\_\_\_\_ monthly?

**Previous Employer:** \_\_\_\_\_

\_\_\_\_\_  
*Title* *Length of Employment*

\_\_\_\_\_

Street Code City State Zip  
Phone: ( ) -

Part-Time or Full-Time (Please Circle)

Continue listing previous employers on a separate sheet of paper.

Secondary Employer: \_\_\_\_\_

Title Hire Date

Street Code City State Zip  
Phone: ( ) -

Part-Time or Full-Time (Please Circle)

Gross Income (before taxes): \$ \_\_\_\_\_

Is this amount paid hourly weekly every two weeks twice a month monthly?

CO-PARTICIPANT

Name: First MI Last

Street

City Home: ( ) - Work: ( ) - Zip Code Email:

Social Security Number

Birth Date / /

VOLUNTARY INFORMATION

Race (please circle):

- 1. White 2. Black or African American 3. American Indian/Alaskan Native
4. Asian 5. Native Hawaiian/Other Pacific Islander
6. American Indian/Alaskan Native and White 7. Asian and White 8. Black/African American and White
9. American Indian/Alaskan Native and Black 10. Other

Ethnicity (please select "yes" or "no" for Hispanic Origin. You should select both a "Race" category and a "yes" or "no" for Hispanic origin:

Hispanic: Yes No

Immigrant Status (please select one):

- 1. You are U.S. born and 1 or both of your parents are foreign born
2. You are U.S. born but 1 or both grandparents are foreign born
3. You are foreign born
4. You, your parents and grandparents are all U.S. born

Marital Status (please circle): Single Married Divorced Separated Widowed

Gender (please circle): Male Female



**INCOME**

*Please Print Clearly*

<i>Type of Income</i>	<i>PARTICIPANT Monthly Amount</i>	<i>CO-PARTICIPANT Monthly Amount</i>
Salary		
Alimony/Child Support		
Rental Income		
Social Security		
Pension Income		
Public Assistance		
Self-employment Income		
Dependent SSI Income		
Disability Income		
Other Employment		

**PARTICIPANT**

**CO-PARTICIPANT**

*Can you document your child support/alimony income?  
If yes, how long will it continue?*

Yes No  
\_\_\_\_\_

Yes No  
\_\_\_\_\_

*If your child or a family member receives SSI,  
how many more years will the payments continue?*

\_\_\_\_\_

\_\_\_\_\_

*If you receive disability income,  
is it for a permanent disability?*

Yes No

Yes No

*Regarding other employment, have you worked  
in this field for two years or more?*

Yes No

Yes

**LIABILITIES/DEBT**

*Please list any debts you have, including credit cards, auto loans, student loans, and child-care expenses. Do NOT include rent or utilities.*

<i>Paid To</i>	<i>Current Balance</i>	<i>Monthly Payment</i>	<i>Who's Debt? P=PARTICIPANT, A=Co-PARTICIPANT B=Both</i>
1.			
2.			
3.			
4.			
5.			
6.			
7.			

8.				
9.				
10.				

Please use additional sheets if necessary.

	<b>PARTICIPANT</b>		<b>CO-PARTICIPANT</b>	
Have your payments been made on time?	Yes	No	Yes	No
Are you currently in Chapter 13 bankruptcy?	Yes	No	Yes	No
If yes, when did it begin? _____				
If yes, when will it be paid out? _____				
If yes, how much is the payment? _____				
Have you had a Chapter 7 bankruptcy?	Yes	No	Yes	No
If yes, when was it discharged? _____				

**LIQUID FUNDS/SAVINGS/INVESTMENTS**

*Please Print Clearly*

Please list the approximate value of the following:

	<b>PARTICIPANT</b>	<b>CO- PARTICIPANT</b>
Checking account		
Savings account		
Cash		
CDs		
Securities (stocks, bonds, etc.)		
Retirement account		
Other Liquid Funds		

Are you about to receive additional funds (e.g., tax refunds, property sales, etc.)? (circle) Yes  
No

If yes, how much? \$ \_\_\_\_\_

**LIVING EXPENSES**

	<b>PARTICIPANT</b>	<b>CO- PARTICIPANT</b>
Current monthly rent or mortgage		
Electric/Gas/Solid Waste		
Telephone		
Cellular/Pager		
Cable/Satellite TV		
Other Living Expenses		

**ADDITIONAL INFORMATION**

	<i>CUSTOMER</i>		<i>CO-APPLICANT</i>	
<i>Have you owned a home in the last three (3) years?</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
<i>Are you a Veteran?</i>	<i>Yes</i>	<i>No</i>	<i>Yes</i>	<i>No</i>
<i>Do you have a contract on a house at this time?</i>	<i>Yes</i>	<i>No</i>		
<i>Are you currently working with a real-estate agent?</i>	<i>Yes</i>	<i>No</i>		
<i>Most convenient time for an individual appointment?</i>	_____ <i>AM</i>	_____ <i>PM</i>		

**AUTHORIZATION**

I authorize the Housing Counseling Agency to:

- (a) pull my/our credit report to review my/our credit file for housing counseling in connection with my pursuit on a loan to purchase real property;
- (b) pull my/our credit report and review my/our credit file for informational inquiry purposes; and
- (c) obtain a copy of the HUD-1 Settlement Statement, Appraisal, and Real Estate Note(s) when I purchase a home, from the lender who made me/us a loan and/or the title company that closed the loan.

I/We understand that any intentional or negligent representation(s) of the information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

\_\_\_\_\_

*Customer*

*Date*

\_\_\_\_\_

*Co-Applicant*

\_\_\_\_\_

*Date*

RETURN COMPLETED FORM TO:  
 Melphy Antuna, Homebuyer Club Coordinator  
**HAPHousing**  
 322 Main Street  
 Springfield, MA 01105  
 Fax: 413-731-8723

QUESTIONS? CALL Melphy Antuna at 413-233-1731 or mantuna@haphousing.org