

Welcome Home SLC Home Buyer Application

Office Use Only:
Date Submitted
Received by:

Applicant Information Head of House	ehold Co-Applicant Information
Name:	Name:
Address:	Address:
City: Zip:	City: Zip:
Phone: Cell Home	Phone: Cell Home
Do you accept text messages? Yes No	Do you accept text messages? Yes No
Email:	Email:
SSN: DOB:	SSN: DOB:
US Citizen Legal Resident Alien No:	US Citizen Legal Resident Alien No:
Years of school:	Years of school:
Sex: Male Female Race:	Sex: Male Female Race:
Ethnicity: Hispanic Non-Hispanic	Ethnicity: Hispanic Non-Hispanic
Marital Status: Married Unmarried Separated	Marital Status: Married Unmarried Separated
Veteran: Yes No Disabled: Yes No	Veteran: Yes No Disabled: Yes No
	yment Information
Employer:	Employer:
Title: State date:	Title: State date:
Work address:	Work address:
Annual income: \$	Annual income: \$
If you've been at your job less than 2 years, please provide additional employment history below	If you've been at your job less than 2 years, please provide additional employment history below
Employer:	Employer:
Title: Start date:	Title: Start date:
Work address:	Work address:
Annual income:	Annual income:
Language most often spoken at home? Number of people living in the home?	How did you hear about us?

Household Information

Please list all people that will be living in the home. If they are receiving an income, please indicate the amount and the source of their monthly income. If you need additional space, please write on an additional sheet of paper.

Name	Relationship	Date of birth	Monthly income	Source of income
			\$	
			\$	
			\$	
			\$	

Other Income

Please list all payment any household member (including minors) receive from any source other than employment. This includes child support, SSI, alimony, disability, rental income, pensions, gifts, etc. Current year award letters or statements must be provided.

APPLICANTS OTHER INCOME SOURCE	AMOUNT PER MONTH	CO-APPLICANTS OTHER INCOME SOURCE	AMOUNT PER MONTH

DEBTS

Include debts held by all household members

NAME	ACCOUNT #	ORIGINAL AMOUNT	CURRENT BALANCE	MONTHLY PAYMENT	AMOUNT PAST DUE
AUTO LOAN CREDITOR	YEAR	MAKE	PRESENT BALANCE	MONTHLY PAYMENT	AMOUNT PAST DUE

I/We certify all of the information contained and submitted in support of this application is true and complete to the best of my/our knowledge and belief. I/We understand that any willful misstatement of material fact will be grounds for disqualification.

DECLARATIONS

The following questions apply to both the applicant and co-applicant. If a "YES" is given to a question in this section , please provide a letter of explanation.

	APPLICANT	CO-APPLICANT
HAVE YOU ANY OUTSTANDING JUDGMENTS?	YES NO	YES NO
IN THE LAST SEVEN YEARS HAVE YOU DECLARED BANKRUPTCY? DISCHARGE DATE: FILING DATE:	YES NO	YES NO
HAVE YOU EVER OWNED YOUR OWN HOME? IF SO WHEN: ADDRESS:	YES NO	
HAVE YOU HAD PROPERTY FORECLOSED UPON OR GIVEN TITLE OF DEED IN LIEU THEREOF?	YES NO	YES NO
ARE YOU A CO-MAKER OR ENDORSER ON ANY NOTES?	YES NO	YES NO
ARE YOU OBLIGATED TO PAY ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE? HOW MUCH?	YES NO	
DO YOU CURRENTLY OWN ANY REAL ESTATE? IF SO WHERE?	YES NO	
HAVE YOU OBTAINED CREDIT UNDER ANOTHER NAME? IF YES, GIVE NAME?	YES NO	YES NO
HAVE YOU EVER BEEN CONVICTED OF A FELONY? IF YES, PLEASE EXPLAIN ON A SEPARATE SHEET OF PAPER.	YES NO	YES NO

THIS APPLICATION WITH THE \$25 PER APPLICANT CREDIT REPORT FEE MUST BE RE-CEIVED BY THE DIVISION OF HOUSING AND NEIGHBORHOOD DEVELOPMENT IN ROOM 445.

APPLICATIONS MUST INCLUDE PAYSTUBS, TAX RETURNS AND VERIFICATION OF ANY

By signing this application, you authorize Salt Lake City Corporation to pull a credit report on all applicants.

Applicant Signature

Co-applicant Signature

Date



PRIVACY ACT NOTICE:

The information requested in this form is to be used by the Salt Lake City Corporation, Division of Housing And Neighborhood Development, in accounting for and monitoring its Homebuyer Program. It will not be disclosed or released outside of the Division, which is administering the program except as required and permitted by law. You do not have to give us this information, but if you do not provide the information necessary to evaluate credit worthiness, your application may be delayed or rejected. By signing this application you authorize Salt Lake City Corporation to obtain a credit report on all applicants or adult members of the household.

GENERAL INFORMATION:

Applicants are required to provide their social security number. Answers to questions relating to marital status, race, age and sex are voluntary and are requested solely for the purpose of determining compliance with Federal Civil Rights Law and your response will not affect consideration of your application. By providing this information, you will assist us in assuring that this program is administered in a non-discriminatory manner.

Income Type	Documentation
W-2 or salary employee	2 months of <u>most recent</u> paystubs, and last year's tax return
Social Security	Social Security award letter, last year's tax return
Retirement	Award letter or monthly statement showing the amount of retirement benefit, last year's tax return
Self-employed or 1099 income	Last year's tax return, year-to-date profit and loss for business
Property rental income	Last year's tax return with Schedule E

Return the application by email, fax, mail, or by bringing the information into the office. If you would like to expedite the process, please include the income documentation listed above. Feel free to contact us with any questions.

Email: HANDtech@slcgov.com

Fax: 801-535-6269

Mailing address: Salt Lake City Corp.

Housing and Neighborhood Development, Room 445 PO Box 145488 Salt Lake City, UT 84114-5487

Office address: 451 S. State St., Room 445