

Date Received: _____
(For Office Use Only)

Appleton Housing Authority
Homeownership Program Application

Applicant Name: _____
(Last) (Middle Int.) (First)

Applicant Social Security Number: _____

Co-Applicant Name: _____
(Last) (Middle Int.) (First)

Co-Applicant Social Security Number: _____

Present Address: _____
(Street)

(City/Village/Town) (State) (Zip Code)

Telephone: _____
(Home) (Cell) (Work)

Number of children living in your Home under the age of 6: _____

List **All** persons, **including applicants**, who live in your household. List the total monthly gross (before taxes) income of all persons 18 years of age or older.

Name	Relationship to Applicant	Monthly Gross Income (If 18 or over)

Indicate TOTAL Gross (before taxes) monthly income from all other sources. Other income sources include but are not limited to: Commissions, income from Self-employment, Interest and/or Dividend Income, Social Security, Pensions, SSI, AFDC, Alimony, Child Support, Unemployment, Wisconsin Works, and other benefit income.

If you are uncertain about including something as income, please list it below and we will advise you.

Date Received: _____
(For Office Use Only)

Source of Income

Monthly Gross Amount

_____	_____
_____	_____
_____	_____
_____	_____

If receiving Alimony or Child Support are payments received as ordered?

Yes___ No___ Please Explain: _____

Do you feel you have a good credit rating? Yes___ No___ Not Sure___

Please explain: _____

Do you or anyone in your household currently own any real estate property such as a house, investment property, cabin or cottage? Yes___ No___

Are you currently receiving, or have you in the past received any form of subsidy or assistance from the Appleton Housing Authority? Yes___ No___

Dates_____

What is your current monthly rent? _____

Do you pay your own utilities? Yes___ No___

If yes, what are your average monthly utility costs?

Gas/Fuel Oil_____ Electric_____ Water_____

What monthly mortgage payment (principal, interest, taxes, insurance) would you feel comfortable paying? \$_____

Do you have a savings plan to buy a house? Yes___ No___

If yes, how much have you saved? \$_____

Have you contacted a banker? Yes___ No___

If yes, which one? _____

Are you a: _____ US Citizen _____ Qualified Alien

CONFLICT OF INTEREST

Do you have family or business ties to any of the following persons: Aaron Hilbert, Debra Dillenberg, Valerie Drier, Pat DeWall, Ed Schmidt, Judy Lange, Kathy Groat, Tim Hanna. Yes___ No___

If yes, please disclose the nature of the relationship below. The State of Wisconsin defines family as any: spouse, fiancée, children and children-in-law, brothers and brothers-in-law, sisters and sisters-in-law, parents and parents-in-law, aunt and uncles, nieces (first) and nephews (first), cousins (first), and anyone who receives more the 50% of their annual support from the person. (e.g., adopted child, foster child)

Name of person(s)	Relationship
_____	_____
_____	_____

Date Received: _____
(For Office Use Only)

No provision of a marital property agreement (including a Statutory Individual Property Agreement pursuant to Sec. 766.587, Wis. Stats), unilateral statement classifying income from separate property under Sec. 766.59, or court decree under Sec. 766.70 adversely affects the creditor unless the creditor is furnished with a copy of the document prior to the credit transaction or has actual knowledge of its adverse provisions at the time the obligation is incurred.

Signature of Applicant

Date

Signature of Co-Applicant

Date

You are not required to answer the questions below. If you choose not to answer them, please check this box.

Age of Applicant _____

Age of Co-Applicant _____

Are any household members Handicapped or Disabled? Yes _____ No _____

Racial/Ethnic Background, check the one that best describes your household.

____ White

____ American Indian/Alaskan Native & White

____ Black/African American

____ Asian & White

____ Asian

____ Black/African American & White

____ American Indian/Alaskan Native

____ American Indian/Alaskan Native & Black/African American

____ Naive Hawaiian/Other Pacific Islander

____ Balance/Other

Please attach any additional comments you feel may be helpful.

Return To:
Appleton Housing Authority
Attn: Homebuyer Manager
925 W. Northland Ave.
Appleton, WI 54914
920-739-6811 ext. 106 Fax 739-6817