

Newtown CDC Homeownership Program Application

Office Use Only	
Date Received:	_____
Newtown Staff:	_____
Payment:	_____
Program:	_____

Applicant / Co-Applicant Information. Please complete the following section for the Applicant and Co-Applicant. Note: Co-Applicant is any other adult (age 18 or older) living in the household, even if that person is not going to be part of a home purchase transaction or a co-applicant on a home loan.

PRIMARY APPLICANT INFORMATION					
Applicant - Name (First, MI, Last):					Date:
Current Address:					
City:		State:		ZIP Code:	
Phone:			Email:		
What is your preferred method of contact? <input type="checkbox"/> Phone <input type="checkbox"/> Email					
How did you hear about Newtown?					
Race (please check one of the following): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> American Indian or Alaska Native <i>and</i> White <input type="checkbox"/> Asian <i>and</i> White <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <i>and</i> White <input type="checkbox"/> American Indian or Alaska Native <i>and</i> Black or African American <input type="checkbox"/> Other					
Ethnicity (check <u>one</u>): <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino			Preferred Language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other		
Number in household:		Number of Adults (over 18):		Number of Children (under 18):	
Gender:	Age:	Birthdate:		Disabled?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Highest Level of Education:	<input type="checkbox"/> High School/GED <input type="checkbox"/> BA/BS Degree	<input type="checkbox"/> Certificate Program <input type="checkbox"/> Some Graduate School	<input type="checkbox"/> AA Degree <input type="checkbox"/> Graduate Degree	<input type="checkbox"/> Some College <input type="checkbox"/> Other	
Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married	<input type="checkbox"/> Divorced <input type="checkbox"/> Separated	<input type="checkbox"/> Widowed		
Current Housing:	<input type="checkbox"/> Rent <input type="checkbox"/> Section 8	<input type="checkbox"/> Other <input type="checkbox"/> Live with Family/Friend	<input type="checkbox"/> Public/Subsidized Housing		
Years at Current Address:	Monthly Rent:	Have you paid rent late in past year? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Household Type:	<input type="checkbox"/> Single Adult <input type="checkbox"/> Married without children	<input type="checkbox"/> Married with children <input type="checkbox"/> Two or more unrelated adults	<input type="checkbox"/> Female-headed single parent <input type="checkbox"/> Male-headed single parent		
Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you an active member of the US Military? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No				
CO-APPLICANT INFORMATION					
Co-Applicant - Name (First, MI, Last):					
Phone:			Email:		
Relationship to Primary Applicant:					
Race (please check one of the following): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> American Indian or Alaska Native <i>and</i> White <input type="checkbox"/> Asian <i>and</i> White <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <i>and</i> White <input type="checkbox"/> American Indian or Alaska Native <i>and</i> Black or African American <input type="checkbox"/> Other					
Gender:	Age:	Birthdate:		Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ethnicity (check <u>one</u>): <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Hispanic or Latino			Preferred Language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other		
Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you an active member of the US Military? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a permanent resident alien? <input type="checkbox"/> Yes <input type="checkbox"/> No				

If there are other adults living in your household, please provide the above information (co-applicant section) on a separate sheet of paper.

Other Household Members: Please complete the following section for all household members younger than 18 who will occupy the property.

First Name	Last Name	Relationship to Applicant(s)	Gender	Age	Birthdate	# of months child lives with you during the year

Employment / Income Information

APPLICANT

Current Employment Status: Full Time Part Time
 Total Income Before Taxes: \$ _____ per
 Week 2 Weeks Twice per month Month Year
 Occupation: _____
 Employer: _____
 Start Date: _____ End Date: _____

If you have a second job or worked less than 2 years at your current job then complete the following for second / previous employer:

Occupation: _____
 Employer: _____
 Start Date: _____ End Date: _____

Other Sources of Income (interest, child support, SSI, trusts, etc.):
 Source: _____
 Monthly Amount: \$ _____
 Source: _____
 Monthly Amount: \$ _____

Liquid Assets (checking, savings, cash):
 Account: _____
 Amount: \$ _____

CO-APPLICANT

Current Employment Status: Full Time Part Time
 Total Income Before Taxes: \$ _____ per
 Week 2 Weeks Twice per month Month Year
 Occupation: _____
 Employer: _____
 Start Date: _____ End Date: _____

If you have a second job or worked less than 2 years at your current job then complete the following for second / previous employer:

Occupation: _____
 Employer: _____
 Start Date: _____ End Date: _____

Other Sources of Income (interest, child support, SSI, trusts, etc.):
 Source: _____
 Monthly Amount: \$ _____
 Source: _____
 Monthly Amount: \$ _____

Liquid Assets (checking, savings, cash):
 Account: _____
 Amount: \$ _____

Self-Employment: Please complete the following if either the Applicant or Co-Applicant is self-employed.

Applicant <input type="checkbox"/>	Co-Applicant <input type="checkbox"/>	Business Name: _____
Have you filed tax returns for your business? <input type="checkbox"/> Yes <input type="checkbox"/> No		How many years do you have tax returns for? _____

Financial / Credit Information

Have you declared bankruptcy within the past 7 years? Yes No If yes, when was the discharge date?
 What was the reason for the bankruptcy?

Have you gone through a foreclosure within the past 4 years? Yes No If yes, when?

Do you have any outstanding collections, judgments, or liens? Yes No If yes, please explain

Did you pay any bills late during the past year? Yes No If yes, please explain:

Student Loans:
 Does the Applicant have student loans? Yes No If yes, are they in deferment? Yes No Until when? _____
 What is the total balance of your student loans: \$_____ What is your minimum monthly student loan payment: \$_____

Does Co-Applicant have student loans? Yes No If yes, are they in deferment? Yes No Until when? _____
 What is the total balance of your student loans: \$_____ What is your minimum monthly student loan payment: \$_____

Total Debt:
 Credit Card / Loan: _____ Balance: \$_____ Minimum Monthly Payment: \$_____
 Credit Card / Loan: _____ Balance: \$_____ Minimum Monthly Payment: \$_____
 Credit Card / Loan: _____ Balance: \$_____ Minimum Monthly Payment: \$_____
 Credit Card / Loan: _____ Balance: \$_____ Minimum Monthly Payment: \$_____
 Credit Card / Loan: _____ Balance: \$_____ Minimum Monthly Payment: \$_____

Other Information

Are you interested in buying a house through Newtown's Community Land Trust (CLT) program: Yes No
 Is there a specific CLT property that you are interested in (if yes, list address): _____

Are you a first-time homebuyer (have not owned a home during the past three years): Yes No

Are you a first-generation homebuyer (your parents did not own a home): Yes No

Are you a FSS Participant? Yes No If yes, case worker's name and city: _____

Are you a Section 8 or Public Housing Participant? Yes No If yes, which city and case worker: _____

Are you currently working with a REALTOR? Yes No Are you currently working with a lender? Yes No

In which city would you like to purchase a house (please check one or more of the following):
 Chandler Mesa Phoenix Scottsdale Tempe Other: _____

What is the minimum number of bedrooms needed: _____ Do you have special ADA housing needs: Yes No

Are you working with another program or agency? If yes, who is the agency and case worker: _____

I would like to receive E-Newsletters from Newtown: Yes No

[] I have agreed to submit this authorization form electronically. I understand that an electronic signature has the same legal effect and can be enforced in the same way as a written signature. By checking this box and typing my name below, I am electronically signing this authorization form.

 Applicant Signature Date Co-applicant Signature Date

Next Steps: Submitting and Processing Your Application.

1. You can submit your completed application by email: newtown@newtowncdc.org, fax: 480-517-1490, or drop it off at Newtown's office.
2. We will review your application to see if you meet program and income requirements then contact you to discuss your application and schedule a meeting with a Homeownership / Financial Coach. You will get a tri-merge credit report with scores, an analysis of your credit, current financial situation, and buying power; learn about your options for first time homebuyer programs and other resources; and create an individualized action plan with the specific steps needed to help achieve your goal of homeownership.
3. There is a \$40.00 application fee (nonrefundable) due at the first meeting.
4. I understand that I am under no obligation to utilize any products or services provided by Newtown or by any businesses or professionals affiliated with Newtown in order to participate in the Homeownership Program. I also understand that Newtown may own property and make affordable housing opportunities available to me; however, I am under no obligation to purchase or rent any property from Newtown.

Newtown provides accessibility, participation, services and employment for all eligible persons regardless of race, color, religion / creed, national origin or ancestry, sex, age, physical / mental disability, veteran status, genetic information or citizenship.

