

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:*

<i>Relationship</i>	<i>Age</i>	<i>Relationship</i>	<i>Age</i>
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Annual Family or Household Income: \$ _____

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? _____

CUSTOMER EMPLOYMENT — LAST 2 YEARS OF EMPLOYMENT ONLY

Primary Employer:

Title

Hire Date

Street _____ City _____ State _____ Zip Code _____

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/Secondary Employer:

Title

Length of Employment

Street _____ City _____ State _____ Zip Code _____

Phone: (_____) _____-_____

Part-Time or Full-Time (Please Circle)

Continue listing previous employers on a separate sheet of paper.

Spouse/Partner

Please Print Clearly

Name:

First MI Last

Street

City State Zip Code

Home: (_____) _____-_____ Work: (_____) _____-_____ Email: _____

Social Security Number Birth Date

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) This is in addition to the "Race" category

Hispanic: Yes No

Foreign Born (please select one) : Yes No

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

Alimony/Child Support
 Rental Income
 Social Security
 Pension Income
 Public Assistance
 Self-employment Income
 Dependent SSI Income
 Disability Income
 Other Employment

APPLICANT	CUSTOMER		CO-	
Regarding other employment, have you worked in this field for two years or more?	Yes	No	Yes	No
Can you document your child support/alimony income?	Yes	No	Yes	No
If yes, how long will it continue?	_____		_____	
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

	CUSTOMER		CO-APPLICANT	
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 list the approximate value of the following: **Please DO NOT List ACCOUNT # Info**

CUSTOMER- Current Balance \$ Spouse/Partner –

Current Balance
 Checking account/List Bank Name:
 Savings account/List Bank Name:

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? \$ _____

ADDITIONAL INFORMATION

Please Print Clearly

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

AUTHORIZATION

I authorize The Primavera Foundation, Inc 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

Spouse/Partner

Date



Type of Service(s)	
Counseling	
Rehab	
Home Ownership	
Financial Fitness	
Refinance	
Section 8	
Other Services	
Sears Post Purchase	

For Internal Use Only

Notes/Comments: _____

Received By: _____ Date: ___/___/___

Reviewed By: _____ Date: ___/___/___