



C. Annual Income				
Source	Applicant	Coapplicant	Other Household Member 18 or Over	Total
Salary	\$	\$	\$	\$
Bonuses	\$	\$	\$	\$
Interest and/or Dividends	\$	\$	\$	\$
Net Income from Business	\$	\$	\$	\$
Net Rental income	\$	\$	\$	\$
Social Security, Pensions, Retirement, Disability, etc.	\$	\$	\$	\$
Unemployment Benefits	\$	\$	\$	\$
Workers' Compensation, etc.	\$	\$	\$	\$
Alimony, Child Support	\$	\$	\$	\$
Welfare Payments	\$	\$	\$	\$
Other	\$	\$	\$	\$
<b>TOTAL</b>	\$	\$	\$	\$
D. Assets				
Type	Cash Value	Annual Income from Assets	Bank Name	Account Number
Checking Account(s)	\$	\$		
Savings Account(s)	\$	\$		
Credit Union Account(s)	\$	\$		
Stocks	\$	\$		
Life Insurance	\$	\$		
Other	\$	\$		
	<b>Estimated Value</b>		<b>Mortgage Value</b>	
Home/Property	\$		\$	

**E. Liabilities** List outstanding obligations (your debts), including auto loans, credit cards, charge accounts, union loans, real estate loans (except your home), and all other loans.

Type	Creditor's Name	Monthly Payment	Unpaid Balance	Due Date
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

Do you pay for any of the following? If so, what amount?

Monthly Alimony \$ \_\_\_\_\_ Monthly Child Support \$ \_\_\_\_\_ Monthly Child Care \$ \_\_\_\_\_

- Do you have any outstanding unpaid judgements? \_\_\_\_\_ Yes \_\_\_\_\_ No Amt. \$ \_\_\_\_\_
- Have you ever declared bankruptcy? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Are you a party in a law suit? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If "Yes," please explain on an attached sheet.

**F. Residency Status**

- Current Housing Status: Own \_\_\_\_\_ Rent \_\_\_\_\_
- Do you currently live in HUD-Assisted Housing? Yes \_\_\_\_\_ No \_\_\_\_\_
- Have you previously owned a home? Yes \_\_\_\_\_ No \_\_\_\_\_  
Date of last home ownership: \_\_\_\_\_ Was your home foreclosed? Yes \_\_\_\_\_ No \_\_\_\_\_

**G. Monthly Housing Expense**

Item	Monthly Payment	Unpaid Principal Balance	Utilities	Monthly Payment (Avg.)
1. First Mortgage (P&I)	\$	\$	1. Gas	\$
2. Other Financing Secured by Property	\$	\$	2. Water/Sewer	\$
3. Property Insurance	\$	\$	3. Electric	\$
4. Real Property Taxes	\$	\$	4. Phone	\$
5. Fire Fees, etc.	\$	\$	5. Other	\$
<b>6. TOTAL</b>	\$	\$	<b>6. TOTAL</b>	\$

**H. Household Composition** List the head of your household and all members who live in your home. Give the relationship of each family member to the head of the household.

Full Name	Relationship	Age	Social Security No.
1.			

2.			
3.			
4.			
5.			
6.			

<p>Does anyone live with you now who is not listed in the above table?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Does anyone plan to live with you in the future who is not listed above?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
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I (we) certify that the statements made by me (us) in this application are true, complete, and correct to the best of my (our) knowledge and belief and are made in good faith to obtain a loan.

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**Signature of Applicant** **Date**

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**Signature of Coapplicant** **Date**

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**PENALTY FOR FALSE OR FRAUDULENT STATEMENT:** I understand that under U.S.C. Title 18, Section 1001, any untruthful or deliberately misleading statements made by me on this application or my use of any untruthful or misleading statement on a document supporting this application, can result in prosecution under Federal law, and that I can be fined not more than \$10,000.00 and/or imprisoned for not more than five (5) years if found guilty.

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# FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_ Pre-Application Fee Received? Yes \_\_\_ No \_\_\_

Check Number: \_\_\_\_\_ Bank: \_\_\_\_\_

## PRE-APPLICANT ELIGIBILITY

1. Section 8 Income Limit of a Household Size of \_\_\_\_\_ is \$\_\_\_\_\_.
2. Pre-Applicants' Household Annual Gross INCOME (Compute using table/verification on pg. 2):

3. Total Current Balance of Assets: \$\_\_\_\_\_
  4. Total Actual Income from Assets: \$\_\_\_\_\_
  5. If #3 is greater than \$5,000, multiply line by the Passbook Rate of .02, and total here (otherwise leave blank): \$\_\_\_\_\_
  6. Enter the **greater** of #4 and #5 here: \$\_\_\_\_\_ (ASSETS)
  7. Add #6 and #2 and total here: \$\_\_\_\_\_ (THIS IS TOTAL HOUSEHOLD ANNUAL INCOME)
  8. Compare #7 to #1. Is the applicant Low- and Moderate-Income (LMI) Status? Yes \_\_\_ No \_\_\_  
30% of Monthly Income: \$\_\_\_\_\_
- Monthly Principal-Interest-Tax-Insurance (PITI) Housing Cost: \$\_\_\_\_\_
- Does PITI Exceed 30% of Monthly Income? Yes \_\_\_ No \_\_\_

## DWELLING INFORMATION:

Is the dwelling located within the City of Parkersburg? Yes \_\_\_ No \_\_\_

If "yes," what is the Census Tract? \_\_\_\_\_ Block Group? \_\_\_\_\_

Per the Dwelling Inspection, the Siding Type is:

Wood Siding \_\_\_\_\_ Wood Shingle \_\_\_\_\_ Insulbric \_\_\_\_\_  
Vinyl/Aluminum \_\_\_\_\_ Brick \_\_\_\_\_ Other (\_\_\_\_\_)

Dwelling's Trim Type: Wood \_\_\_\_\_ Capped \_\_\_\_\_

Exterior Paint Surfaces: Fail (Defective) \_\_\_\_\_ Pass \_\_\_\_\_

Interior Paint Surfaces: Fail (Defective) \_\_\_\_\_ Pass \_\_\_\_\_

Pre-Application Status: Eligible \_\_\_\_\_ Ineligible \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_