## Housing Choice Voucher Homeownership Option Eligibility Assessment

Name	Phone	
Address		
Type of Assistance you receive? (Please	ahaalr ana)	
. Type of Assistance you receive? (Please Housing Choice Voucher P		
Housing Choice Voucher 1	done Housing Resident	
2. Please list the names and ages of all the r	members of your household.	
. Total household income? Amount \$	Source	
. Total <u>nouschold</u> meome: 7 mount \$\pi	Source	
. What is your present gross income?	Monthly	Yearly
What is the source of <u>your</u> income?		
D	2 11	
<ol><li>Does at least one adult member of your f Work full time, at least 30 hours per wee</li></ol>		No
Have at least 12 months of continuous er		No
If no, please explain gaps in employment	1 5	
ii no, piease explain gaps in employment	li	
. Is anyone in your family qualified as elde		
If so, please list who and what the disabi	lity is:	
DI 11	1 (4 1 1 11 4	1
Please list employment history of the hea	ad of the household for the p	east three years.
. Does anyone listed in your household abo	ove currently have an owner	ship interest in
property? (circle one) Yes	No	•
Has anyone in your household owned a h	nome in the last three years?	Yes No
	. 1 11 10 37	N. (IC
O. Are you in good standing with your pre		No (If no
explain)		
1. Has anyone in your household defaulted	I on a mortgage? Yes	No
1. Hus uny one in your nousenoid defaulted		1,0
2. Have you ever attended HUD approved	home counseling? Yes _	No
If yes, please enter name and address of	where you attended counsel	ling:
2. 5. 1. 1. 1.		<b>3.</b> T
3. Do you have money saved for a down p	payment for a home? Yes _	No
4. Is the head of the household a surrent n	orticinent in the Femily Calf	Sufficiency
4. Is the head of the household a current p program? (circle one)  Yes	No	-Sufficiency
program: (circle one)	NO	
understand that the information provided here		
ogram, and that by signing this Eligibility Ass		
rough with, or guaranteed assistance with, the	Housing Choice Voucher Hor	neownership
ogram.		
pplicant Signature	Date	
o-Applicant Signature	Date	
Complete and Return to:	EUD	OFFICE USE ONLY
Tania Eller		
Brainerd HRA	Eligi Payment Stand	
324 East River Road	County	ard: Bdrm s
Brainerd, MN 56401	Inelig	ible
	nicing	

 $S: \\ LeAnn\ HCV\ Website \\ \\ Homeownership\ Program \\ \\ |eligibility\ assessment\ .doc$ 

### INTAKE ASSESSMENT

		Date
Part One: Personal Data		
Buyer Name:		
Social Security Number:		
Home Address:		
Home Phone:		
How Long at Current Address:		
Previous Address (if at current address less than two years):		
Co-Buyer Name:		
Social Security Number:	Date of Birth:	_ Race:
Home Address:		
Home Phone:	Work Phone:	
How Long at Current Address:		
Previous Address (if at current address less than two years):		
Part Two: Demographic Information		
<b>.</b>		
Buyer:		
Are you a United States citizen or Resident Al	ien: Yes No	
Are you a: Single Head of Househo	old First Time Home Buyer	
First Generation Home	Buyer	
Are you now, or have you ever been in the U.S.	S. Military? Yes No	
If yes, give branch of service and dates of serv	rice:	
Co-Buyer:		
Are you a United States citizen or Resident A	Alien: Yes No	
Are you a: Single Head of Househo	old First Time Home Buyer	

\_\_\_\_\_ First Generation Home Buyer

Are you now, or have you ever been in the U.S. Military? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, give branch of service and dates of service:

## Part Three: Employment and Income Information

BUYER				
Present Employer				
How Long				
Job Title				
Employer Address _				
Full time	Part-time	hrs/w	eek	
Self-employed	Seaso	nal work		
Are you paid:	weekly		mont	hly
	bi-weekly		bi-mo	nthly
Rate of Pay: \$	per:	hour	week	month
Have you ever been	laid off from this jo	b?		
If yes, how much an	d how often?			
List previous employ	yer if employed less	than two	years:	
1				
Dates Employed	to			
Job title				
Rate of Pay: \$	per:	hour	week	month
2				
Dates Employed		_ to		
Job title				
Rate of Pay: \$	per:	hour	week	month
If currently employe	ed in more than one	position:		
2 <sup>nd</sup> employer:				
Address:				
Full time	Part-time	hrs/w	eek	
Rate of Pay: \$	per:	hour	week	month
Do you receive inco	me from any of the	following	g:	
Bonuse	s \$			/month
Commis	ssions \$			/month
Tips \$_				/month
Unempl	loyment \$	/mon	th until _	
Alimon	y \$	/month	until	
Child S	upport \$	_/month ı	until	
MFIP \$				/month
Social S	Security \$			/month
SSI \$				/month
Other _		\$		/month
<b>Total Income</b>				
	/ ·1 10 fb			,
\$	/month x 12 \$			/year

CO-BUYER	
Present Employer	
How Long bates from to	
Job Title	
Employer Address	
Full time Part-time hrs/week	
Self-employedSeasonal work	
Are you paid: weekly monthly	
bi-weeklybi-monthly	
Rate of Pay: \$per: hour week m	nonth
Have you ever been laid off from this job?	
If yes, how much and how often?	
List previous employer if employed less than two years:	
1	
Dates Employed to	
Job title	
Rate of Pay: \$per: hour week m	nonth
2	
Dates Employed to	
Job title	
Rate of Pay: \$per: hour week m	nonth
If currently employed in more than one position:	
2 <sup>nd</sup> employer:	
Address:	
Full time Part-time hrs/week	
Rate of Pay: \$per: hour week m	nonth
Do you receive income from any of the following:	
Bonuses \$/	/month
Commissions \$	/month
Tips \$/	month/
Unemployment \$/month until	
Alimony \$/month until	
Child Support \$/month until	
MFIP \$	_/month
Social Security \$	_/month
SSI \$	/month
	month/
Total Income	/
\$/month x 12 \$	/year

# **Part Four: Liabilities and Expenses**

Ionthly Payment \$	BUYEI	R LIABILITIES
tudent Loan  Ionthly Payment \$	Auto Loan	
Inther Loan Inthly Payment \$	Monthly Payment \$	Balance Due \$
Inthly Payment \$	Student Loan	
Inthly Payment \$	Monthly Payment \$	Balance Due \$
ther Loan  Ionthly Payment \$	Other Loan	
Ionthly Payment \$	Monthly Payment \$	Balance Due \$
redit Card Ionthly Payment \$	Other Loan	
Ionthly Payment \$	Monthly Payment \$	Balance Due \$
Inorthly Payment \$	Credit Card	
Ionthly Payment \$	Monthly Payment \$	Balance Due \$
Inorthly Payment \$	Credit Card	
Ionthly Payment \$	Monthly Payment \$	Balance Due \$
Interpret Interp	Credit Card	
Ilimony/Spousal Support Ionthly Amount \$ ent andlord Name ddress Ionthly Rent \$ //hat Utilities are you responsible for paying?  aycare Expenses rovider Name ddress hone Monthly Amount \$ Iiscellaneous Expenses Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$	Monthly Payment \$	Balance Due \$
Ilimony/Spousal Support  Ionthly Amount \$ ent  andlord Name ddress Ionthly Rent \$ //hat Utilities are you responsible for paying?  aycare Expenses rovider Name ddress hone Monthly Amount \$ Iiscellaneous Expenses  Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$	Child Support	
Ionthly Amount \$ent andlord Nameddress	Monthly Amount \$	
andlord Name	Alimony/Spousal Support	
andlord Name	Monthly Amount \$	
Ionthly Rent \$  In this distribution of the property of	Rent	
Ionthly Rent \$  /hat Utilities are you responsible for paying?  aycare Expenses  rovider Name  ddress hone Monthly Amount \$  liscellaneous Expenses  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$	Landlord Name	
Anat Utilities are you responsible for paying?  aycare Expenses  rovider Name Monthly Amount \$  thone Monthly Amount \$  liscellaneous Expenses  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$	Address	
aycare Expenses  rovider Name	Monthly Rent \$	
ddress Monthly Amount \$ Iiscellaneous Expenses Balance Due \$ Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$ Balance Due \$ Ionthly Payment \$ Balance Due \$	What Utilities are you respons	sible for paying?
ddress Monthly Amount \$ Iiscellaneous Expenses Balance Due \$ Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$ Balance Due \$ Ionthly Payment \$ Balance Due \$		
In the discrete discr	Daycare Expenses	
Monthly Amount \$	Provider Name	
Inthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$	Address	
Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$	Phone	Monthly Amount \$
Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$	Miscellaneous Expenses	
Ionthly Payment \$ Balance Due \$ Ionthly Payment \$ Balance Due \$	1	
Ionthly Payment \$ Balance Due \$  Ionthly Payment \$ Balance Due \$	Monthly Payment \$	Balance Due \$
Ionthly Payment \$ Balance Due \$	2	
Ionthly Payment \$ Balance Due \$	Monthly Payment \$	Balance Due \$
	3	
uyer Total Monthly Liabilities \$	Monthly Payment \$	Balance Due \$
uyer Total Monthly Liabilities \$		
· ·	Buyer Total Monthly Liabilitie	es \$

CO-BUYER LIABILITIES			
Auto Loan			
	Balance Due \$		
Student Loan	Bulance Bue \$		
S ************************************	Balance Due \$		
Other Loan	Bulance Bue \$		
	Balance Due \$		
Other Loan	Balance Due φ		
	Balance Due \$		
Credit Card	Barance Due \$		
	Balance Due \$		
Credit Card	Barance Due \$		
	Balance Due \$		
•	Balance Due \$		
Credit Card	D.I. D. C		
	Balance Due \$		
Child Support			
Monthly Amount \$	<del></del>		
Alimony/Spousal Support			
Monthly Amount \$	<u></u>		
Rent			
Landlord Name			
Address			
Monthly Rent \$			
What Utilities are you responsible	e for paying?		
Daycare Expenses			
Provider Name			
Address			
Phone	Monthly Amount \$		
Miscellaneous Expenses	·		
1			
	Balance Due \$		
	Balance Due \$		
3			
Monthly Payment \$	Balance Due \$		
Co-Buyer's Total Monthly Liabilities \$			
TOTAL COMBINED LIABILITIES:			

### Part Five: Legal and Financial History

Please answer the following questions by checking the appropriate spheet of paper to clarify any "Yes" answers.	pace before Yes or No. Use a	separate
BUYER		
1. Are there any outstanding judgments against you?	Yes	No
2. Have all satisfactions of judgments been recorded?	Yes	No
3. Have you declared bankruptcy within the past seven years?	Yes	No
4. Have you had property foreclosed upon, or given title or deed in lieu there of in the last seven years?	Yes	No
5. Have you ever defaulted on a State or Federal Loan, including student loans?	Yes	No
6. Are you currently party to a lawsuit?	Yes	No
7. Are you a co-signer on any loans, including student loans? If yes, please include these commitments in the liability section on page 3	Yes	No
8. Do you have any debt obligations as a result of a divorce? If yes, please include these commitments in the liability section on page 3	Yes	No
CO-BUYER		
1. Are there any outstanding judgments against you?	Yes	No
2. Have all satisfactions of judgments been recorded?	Yes	No
3. Have you declared bankruptcy within the past seven years?	Yes	No
4. Have you had property foreclosed upon, or given title or deed in lieu there of in the last seven years?	Yes	No
5. Have you ever defaulted on a State or Federal Loan, including student loans?	Yes	No
6. Are you currently party to a lawsuit?	Yes	No
7. Are you a co-signer on any loans, including student loans? If yes, please include these commitments in the liability section on page 3	Yes	No
8. Do you have any debt obligations as a result of a divorce? If yes, please include these commitments in the liability section on page 3	Yes	No
I declare the above information to be complete and correct to the best assessment, I am no way obligated to follow through with, or guarant Voucher Homeownership Program. I authorize Brainerd HRA to disagencies, mortgage lenders, realtors, and/or other representatives in or	teed assistance with, the Housi scuss my/our file with credit co	ing Choice
Buyer Signature	Date	
Co-Buyer Signature	Date	