



HOME BUYER APPLICATION

**** DOH OFFICE USE ONLY****

Development Name (if applicable): _____ #of Units Purchased _____

Property Address/Unit #: _____ #of Bedrooms _____

Part of Chicago Community Land Trust? Yes ___ No ___ Community Area _____ Ward ___

Affordable Purchase Price: \$ _____ Down Payment \$ _____

Estimated Market Value: \$ _____ Estimated Closing Date _____

First Mortgage Approval/Commitment Amount: \$ _____

Interest Rate: _____ % First Mortgage Lender: _____

Lender Contact Name/Phone: _____

Check all that apply:

City Program: ARO___ Affordable unit/Resale___

I. APPLICANT INFORMATION

Name _____

Current Address/City/Zip _____

Home Phone _____ Work Phone _____ Cell _____

Social Security # _____ Email Address _____

Single Married Separated Divorced

Race/Ethnicity (for statistical purposes only) Hispanic Yes No

White African American Asian Native American/Alaska Native Pacific Islander Multi-Racial

CO-APPLICANT INFORMATION

Name _____

Current Address/City/Zip _____



Home Phone _____ Work Phone _____ Cell _____

Social Security # _____ Email Address _____

Single Married Separated Divorced

Race/Ethnicity (for statistical purposes only): Hispanic Yes No

White African American Asian Native American/Alaska Native Pacific Islander Multi-Racial

II. HOUSEHOLD INFORMATION

Total number of Household Members that will reside in the property: _____

Provide information in table below for each Household Member. Include yourself (and co-applicant) in the table.

Household Member	Date of Birth	Relationship to Applicant	Annual Income*

* All household members over 18 years of age must provide proof of income (i.e., pay stubs, tax returns, affidavit of income, etc.)

III. CURRENT HOUSING INFORMATION

A. APPLICANT

Do you currently rent? YES ____ NO ____

Do you currently own your home or another property? YES ____ NO ____

Have you ever owned a City of Chicago Affordable Unit? YES ____ NO ____
If yes, indicate

Property Address _____ Date of Purchase _____

Addresses of Properties Owned within Last 3 Years	Estimated Market Value	Total Amount of Outstanding Mortgages or Liens

B. CO-APPLICANT

Do you currently rent? YES ____ NO ____

Do you currently own your home or another property? YES ____ NO ____

Have you ever owned a City of Chicago Affordable Unit? YES ____ NO ____

If yes, indicate:

Property Address _____

Date of Purchase _____

Addresses of Properties Owned within Last 3 Years	Estimated Market Value	Total Amount of Outstanding Mortgages or Liens

IV. EMPLOYMENT INFORMATION

APPLICANT

CO-APPLICANT

Employer _____

Address _____

City/State/Zip _____

Month/Year Employed	From:		To:	
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Annual Gross Salary _____

Position Held _____

Month/Year Employed	From:		To:	
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If employed less than three years with current employer:

Previous Employer _____

Address _____

City/State/Zip _____

Month/Year Employed	From:		To:	
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Month/Year Employed	From:		To:	
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V. OTHER SOURCES OF INCOME

	APPLICANT	CO-APPLICANT
Rental Income	\$ _____ per month	\$ _____ per month
Social Security:	\$ _____ per month	\$ _____ per month
Pensions:	\$ _____ per month	\$ _____ per month
Interest/Dividends:	\$ _____ per month	\$ _____ per month
Business Income:	\$ _____ per month	\$ _____ per month
Unemployment:	\$ _____ per month	\$ _____ per month
Section 8:	\$ _____ per month	\$ _____ per month
Child Support:	\$ _____ per month	\$ _____ per month
Other	\$ _____ per month	\$ _____ per month

VI. ASSETS

	APPLICANT	CO-APPLICANT
Checking Account	\$ _____	\$ _____
Savings Account	\$ _____	\$ _____
Stocks, Bonds, Other Investments:	\$ _____	\$ _____

TOTAL HOUSEHOLD INCOME:	\$ _____ MONTHLY	\$ _____ ANNUAL
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VII. DEBT OWED TO THE CITY OF CHICAGO

The City of Chicago requires past due debts, such as parking tickets or water bills, be paid in full before benefits of the home buyer program are granted.

By completing the table below, I give the Department of Housing permission to conduct an inquiry into debt I may owe to the City of Chicago. I understand that proof of payment will be required before the benefits of the program will be provided.

Household Member(s)	Social Security #	Driver's License #	License Plate #



VIII. CERTIFICATION AND AUTHORIZATION

I (We) certify that the statements contained in this application for participation in and eligibility determination for a Chicago Department of Housing home buyer program are true and accurate concerning my (our) financial condition and household size.

I (We) hereby authorize the Chicago Department of Housing to discuss with my lender, developer and attorney any information relating to my (our) Purchase Agreement and Mortgage Loans, to verify employment and conduct the appropriate inquiries into my indebtedness to the City of Chicago.

I also certify that, I intent to occupy the property as my primary residence and adhere to the terms of the occupancy agreements.

Applicant Signature

Date

Co-Applicant Signature

Date