

**APPLICATION FOR PURCHASE OF PROVEMONT PINES TOWNHOUSE**



**A Non-Profit Housing Development Corporation**

BUSINESS CONDUCTED IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING ACT OF 1988

**FOR OFFICE USE ONLY**

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

Application Number 2009-\_\_\_\_\_

Name of Applicant(s) \_\_\_\_\_

Present Street Address \_\_\_\_\_ P.O. Box \_\_\_\_\_

City/state \_\_\_\_\_ Zip code \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ Other phone \_\_\_\_\_

Current housing status: Renting \_\_\_\_\_ How long \_\_\_\_\_ Monthly rent \$ \_\_\_\_\_

Purchasing a home \_\_\_\_\_ Date purchased \_\_\_\_\_ Monthly payment \$ \_\_\_\_\_

*This information is optional and for **Statistical Purposes only**,*

check one \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed  
\_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Other

*Is any member of the household disabled  Yes  No. Nature of disability*  
\_\_\_\_\_

**APPLICANT EMPLOYMENT INFORMATION**

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

Years Employed \_\_\_\_\_ Work Phone \_\_\_\_\_ Annual income \$ \_\_\_\_\_

Previous employer \_\_\_\_\_ Years worked \_\_\_\_\_

Previous Employer's Address \_\_\_\_\_

**SECOND WAGE EARNER IN HOUSEHOLD, IF ANY**

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Years Employed \_\_\_\_\_ Work phone \_\_\_\_\_ Annual income \$ \_\_\_\_\_

Previous Employer \_\_\_\_\_ Years Worked \_\_\_\_\_

Previous Employer's Address \_\_\_\_\_

**LIST NAMES AND AGES ETC OF ALL PERSONS LIVING IN THE HOUSEHOLD**

Name	Relationship to head of household	Student Yes / No	Birth Date	Age
	Head of household			

**APPLICANT'S FINANCIAL INFORMATION      BANK(S) OF DEPOSIT**

NAME OF BANK \_\_\_\_\_ Checking  Savings

Address \_\_\_\_\_ City/state/zip \_\_\_\_\_

NAME OF OTHER BANK \_\_\_\_\_ Checking  Savings

Address \_\_\_\_\_ City/state/zip \_\_\_\_\_

NAME OF CREDITOR	CREDITOR LOCATION CITY-STATE	YEAR ACCT. OPEN	PRESENT BALANCE	MONTHLY PAYMENT	IS DEBT BUSINESS RELATED
<b><u>TOTALS</u></b>					

<b>CURRENT LIQUID ASSETS</b>	
Savings accounts total	
Other Savings	
Checking accounts total	
U.S. Savings Bonds	
Money Market	
Stocks, bonds, Securities,	
Other:	
Other:	
<b><i>Total Liquid Assets</i></b>	

<b>CURRENT FIXED ASSETS</b>	
Retirement Account (IRA, Keogh, 401K, etc.)	
Real Estate Equity of Primary Residence (Market Value Minus Balance Due)	
Other Real Estate Equity	
Life Insurance with cash assets	
<b><i>Total Fixed Assets</i></b>	

**CREDIT HISTORY**

Are there any outstanding financial judgments or liens against you? Yes  No

Have you ever declared bankruptcy? If yes when \_\_\_\_\_ Yes  No

Have you lost any property through foreclosure or given title or deed to anyone to avoid foreclosure? Yes  No

Are you a co-signer on any note or loan? Yes  No

**AUTHORIZATION**

For purposes of processing my application, I (we) do hereby authorize the Leelanau REACH and/or Leelanau County to obtain whatever information may be necessary to determine our eligibility for the purchase of a home. It is our understanding that all information regarding our situation will be kept confidential and provided only to those persons necessary, who are authorized and in accordance with the Fair Housing Laws.

The undersigned certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of purchasing a home and is true and complete to the best of the applicant's knowledge and belief at the time of this application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**IN ORDER TO ASSIST US IN PROCESSING YOUR APPLICATION IN A TIMELY MANNER, PLEASE PROVIDE THE FOLLOWING INFORMATION:**

1. Copy of your most recent Federal and State income tax returns.
2. Copies of the last 2-4 pay stubs for working household members over age 18.
3. Include a copy of any business income tax returns, if applicable.
4. Mail or deliver ALL completed forms to the Leelanau REACH at the following address:

**Leelanau REACH  
Attn: Ronald W. Crummel  
8527 E. Government Center Drive, Suite 108,  
Suttons Bay MI 48682**

***If you have any questions please call Ron at the office 256-8183. Fax 256-0174***

**APPLICANT AUTHORIZATION FORM**



**LEELANAU REACH HOME PURCHASE PROGRAM**



EQUAL HOUSING OPPORTUNITY: BUSINESS CONDUCTED IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING ACT OF 1988

I hereby authorize release of the requested information to the Leelanau REACH Home Purchase Program in conjunction with my application for the purchase of a home.

Verification of any source named in my application may be obtained and a credit report obtained to verify data. This includes a credit report from one of the three credit reporting agencies through the Annual Credit Report.com. A copy will be given to the buyer upon request.

A copy of this form is sufficient to obtain the requested information. An authorization signature required for all persons age 18 and over that will be living in the home.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security # \_\_\_\_\_

Return to  
**Leelanau REACH**  
Attn:  
**Ronald W. Crummel**  
8527 E. Government Center Drive, Suite 108, Suttons Bay MI 48682  
Phone: 231-256-9812 Fax 256-0174