



## Buyer Application

### Applicant Information

Name:			
Date of birth:		SSN:	Phone:
Current address:			
City:		State: & Zip	Email Address:
Own	Rent	(Please circle)	Monthly payment or rent:
			How long?
Previous address:			
City:		State:	ZIP Code:
Owned	Rented	(Please circle)	Monthly payment or rent:
			How long?

### Employment Information

Current employer:			
Employer address:			How long?
Phone:		E-mail:	Fax:
City:	State:		ZIP Code:
Position:	Hourly	Salary	(Please circle)
			Annual income:

### Other Income Source

Primary applicant -			
Co-Applicant			
# of Adults:	# of Children	Bankruptcy? ____ Yes ____ NO	If Yes, Discharge Date:
Have You Ever Been Evicted? ____ Yes ____ No If Yes, Please Explain -			

### Co-applicant Information, if Married

Name:			
Date of birth:		SSN:	Phone:
Current address:			
City:		State & Zip	Email Address:
Own	Rent	(Please circle)	Monthly payment or rent:
			How long?
Previous address:			
City:		State:	ZIP Code:
Owned	Rented	(Please circle)	Monthly payment or rent:
			How long?

### Co-applicant Employment Information

Current employer:			
Employer address:			How long?
Phone:		E-mail:	Fax:
City:	State:		ZIP Code:
Position:	Hourly	Salary	(Please circle)
			Annual income:

### Additional Information

First Time Homebuyer: ____ Yes ____ No	Attended Any Classes? ____ Yes ____ No	Certificate ____ Yes ____ No
Name of Financial Institution	Type of Account: Checking ____ Savings ____	
Best Time to Contact You?	____ Day ____ Evening	

I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.

Signature of applicant:		Date:
Signature of co-applicant:		Date: