

Rapides Station Community Ministries, Inc. Homebuyers Program Application

1429 3rd Street – Alexandria, LA 71301 (318) 487-9254 (318) 487-9265 (Fax) www.rscm1429.org

Customer Intake Form

5. Homeowner with mortgage paid off

CUSTOMER			Please Print Clearly
Name:			
First		МІ	Last
Street			
City		S	itate Zip Code
Home: ()	Wo	rk: ()	Email:
Fax: ()	Pager: (Mobile/Cell ()
Social Security Number			Date
Race (please circle):			
1. White	2.	Black or African American	3. American Indian/Alaskan Native
4. Asian	5.	Native Hawaiian/Other Paci	fic Islander
 American Indian/Alaska American Indian/Alaska 		7. Asian and White 10. Other	8. Black/African American and White
Ethnicity (please select "yo Hispanic origin:)	es" or "no" for Hispan	ic Origin. You should select	both a "Race" category and a "yes" or "no" for
Hispanic: Yes	No		
Immigrant Status (please 1. You are U.S. born and 1 2.You are U.S. born but 1 of 3. You are foreign born 4.You, your parents and grant	or both of your parent or both grandparents fo	oreign born	
Marital Status (please ci	ircle): 1. Single 2. M	farried 3. Divorced	4. Separated 5. Widowed
Gender (please circle):	Male	Female	
Handicapped? Ye	s No		
Current Housing Arran	gement (please circl	(e):	
1. Rent	15	2. Homeless	
3. Homeowner with mor	tgage	4. Living with	family member and not paying rent

Are you a first time Buyer (you uo	noi currently ow	n a nome ana	nave not own	ea a nom	e in the past i	three years)?
Yes No						
Household Type (please select the	most accurate)?					
1. Female headed single parent househo	•			3. Single a	dult . Other	
Family/Household Size: How What ages are they?,,			e listed by any c	o-borrowe	er)?	
Are there non-dependents who will be			Yes	No	If yes, list belo	ow·
Relationship	Age	Relations	hip			Age
Annual Family or Household Inco	me: \$	····				
Education (please circle one):						
1. Below High School Diploma	2	2. High School I	Diploma or Equ	ivalent		
3. Two-Year College	4	4. Bachelors Deg	gree			
5. Masters Degree	(6. Above Master	s Degree			
Referred to by (please circle all that	t apply):					
Print Advertisement	Bank	Governm	ent	TV	Realton	r
Staff/Board member	Walk-In	Friend		adio	Newspaper A	
If you were referred by a bank, which o	ne?					
Name: First	MI		1	Last		
Street						
City			State	Zip Cod	le	
Home: ()	Work: (Ema	il:	
Social Security Number		Birth Date	/			
Race (please circle):		Birin Duie				
1. White	2 Black or	African America	un 2 Ama	riaan India	ın/Alaskan Nat	:
4. Asian		waiian/Other Pa		i ican muia	iii/Aiaskaii Nat	ive
6. American Indian/Alaskan Native and		Asian and White		African Δn	nerican and Wh	nita
9. American Indian/Alaskan Native and		Other	o. Diacki	inican An	nerican and wi	nie
Ethnicity (please select "yes" or "no" for Hispanic origin:	or Hispanic Origin.	You should sele	ect both a "Race	e" category	y and a "yes" o	r "no" for
Hispanic: Yes	No					
Immigrant Status (please select one): 1. You are U.S. born and 1 or both of you 2. You are U.S. born but 1 or both grand 3. You are U.S. born but 1 or both grand						
3. You are foreign born4. You, your parents and grandparents a		oom				

Handicappe	d?	Yes	No						
Education (p 1. Below F 3. Two-Ye 5. Masters	ligh Scho ar Colleg	ool Diploma	ı	4.B	High School Di achelors Degre Above Masters	ee	r Equivalent		
Relationship	to Custo	omer (plea): Spouse Boyfriend	Daughter Mother	Son Father	Sister Other:	Brother	Girlfriend
CUSTOME	R EMP	LOYMEN	IT — La	st 2 Years				Plea.	se Print Clearly
Primary Emp	ployer: _								
Title							Hire Date	;	
Street Phone: (City			State	Zip Code
Part-Time	or	Full-Ti		(Please Circle)					
Gross Incom Is this amount		e taxes): \$ hou		weekly	every two	weeks	twic	e a month	monthly?
Previous Em	ployer: _								
Title	_				<u> </u>		Length of	Employment	
Street Phone: ()				City			State	Zip Code
Part-Time	or	Full-Ti		(Please Circle) sting previous en	nlovers on a	senara	te sheet of n	aner	
Secondary E	mployer.			SF				<i>apor.</i>	
Title	**************************************						Hire Date		
Street Phone: (_			City			State	Zip Code
Part-Time	or	Full-Ti	me	(Please Circle)					
Gross Income Is this amount		taxes): \$_ hou	rly	weekly	every two	weeks	twic	e a month	monthly?
				- Last 2 Years					
Primary Em				East 2 Tears					
Title							Hire Date		
Street Phone: (City			State	Zip Code
Part-Time	or	Full-Ti	me	(Please Circle)					
Gross Income Is this amount		<i>taxes):</i> \$_ hour	·ly	weekly	every two	weeks	twic	e a month	monthly?

Gender (please circle):

Male

Female

Previous Employer:					
Title			Length of Employment		
Street Phone: () -	C	lity	State	e Zip	Code
Part-Time or Full-Time (Please Cir	rcle)				
Continue listing previous	•	n a senarate	sheet of naner		
Secondary Employer:			and of paper.		
Title			Hire Date		
Street Phone: (C	lity	State	Zip	Code
Part-Time or Full-Time (Please Cir.	·cle)				
Gross Income (before taxes): \$					
Is this amount paidhourlyweekly	every	two weeks	twice a month	month	ly?
INCOME			Plea	ise Print Clea	rly
Type of Income	CUST (Monthly			PLICANT ly Amount	
Salary			11201111	y mount	
Alimony/Child Support					
Rental Income					
Social Security					
Pension Income					
Public Assistance					
Self-employment Income					
Dependent SSI Income					
Disability Income					
Other Employment			·		
	CUST	OMER		CO-APP	LICANI
Can you document your child support/alimony income? If yes, how long will it continue?	Yes	No	Yes	No	
If your child or a family member receives SSI, how many more years will the payments continue?					
If you receive disability income, is it for a permanent disability?	Yes	No	Yes	No	
Regarding other employment, have you worked in this field for two years or more?	Yes	No	Yes	No	

Paid To	Current Balance	Monthly Payment	Who's Debt? C=Customer, A=Co-Applican B=Both
1.			
2.			
3.			
1.			
5.			
5.			
7.			
3.			
9.			
10.			
Please use additional sheets if necessary.			
	CUSTOMER	CO-A	PPLICANT
Have your payments been made on time?	Yes No	Yes	No
Are you currently in Chapter 13 bankruptcy? If yes, when did it begin? If yes, when will it be paid out? If yes, how much is the payment?	Yes No	Yes	No
Have you had a Chapter 7 bankruptcy? If yes, when was it discharged?	Yes No	Yes	No
LIQUID FUNDS/SAVINGS/INVESTMENTS		Please Pr	int Clearly
Please list the approximate value of the following:			
	CUSTOMER	CO-AP	PLICANT
Checking account			
avings account			
Cash			
CDs			
Securities (stocks, bonds, etc.)			
Letirement account			
Continent account			

If yes, how much? \$_____

	CUSTOMER		CO-APP	LICANT		
Current monthly rent or mortgage						
Electric/Gas/Solid Waste						
Telephone						
Cellular/Pager						
Cable/Satellite TV	· · · · · · · · · · · · · · · · · · ·					
Other Living Expenses				-		
ADDITIONAL INFORMATION						
	CUST	CUSTOMER		CO-APPLICANT		
Have you owned a home in the last three (3) years?	Yes	No	Yes	No		
Are you a Veteran?	Yes	No	Yes	No		
Do you have a contract on a house at this time?	Yes	No				
Are you currently working with a real-estate agent?	Yes	No				
Most convenient time for an individual appointment?	AM		PM			
AUTHORIZATION						
authorize the Housing Counseling Agency to:						
		acalina in co	nnection with n	ar maranit a		
a) pull my/our credit report to review my/our credit to purchase real property;	file for housing cour	isemig iii co	micotion with h	iy pursuit (
to purchase real property;				iy pursuit (
to purchase real property; (b) pull my/our credit report and review my/our cred	it file for information	nal inquiry p	urposes; and			
(b) pull my/our credit report and review my/our cred(c) obtain a copy of the HUD-1 Settlement Statemen	it file for information t, Appraisal, and Recompany that close	nal inquiry p al Estate Not d the loan.	ourposes; and se(s) when I pure	chase a hon		
to purchase real property; (b) pull my/our credit report and review my/our credit contains a copy of the HUD-1 Settlement Statement the lender who made me/us a loan and/or the title and the lender who made or negligent representation(s) of the lender who made or negligent representation is of the lender who made or	it file for information t, Appraisal, and Recompany that close	nal inquiry p al Estate Not d the loan.	ourposes; and se(s) when I pure	chase a hor		
to purchase real property; (b) pull my/our credit report and review my/our credit contains a copy of the HUD-1 Settlement Statement the lender who made me/us a loan and/or the title and the lender who made or negligent representation(s) of the lender who made or negligent representation is of the lender who made or	it file for information t, Appraisal, and Recompany that close	nal inquiry pal Estate Not dithe loan.	ourposes; and se(s) when I pure	chase a hon		

Please provide copies of the following documents:
Income Verification Letter
Last two years tax returns—plus W-2's or 1099; s
Pay/check stubs for last three months' pay periods & 3 months bank statements
Driver's License---Social Security Card