

National Faith HomeBuyers



For Office Use Only
 DO NOT PULL MY CREDIT

For Office Use Only
 Membership Fee \$ _____
 Date(s) of Receipt _____
 App. Taken By _____

Membership #

PERSONAL INFORMATION

1st Person Name (include Jr., Sr., I, II, etc. if applicable)

2nd Person Name (include Jr., Sr., I, II, etc. if applicable)

Social Security Number D/O/B Yrs. School

Social Security Number D/O/B Yrs. School

Married Separated (Legal)

Married Separated (Legal)

Unmarried (includes single, divorced, widowed)

Unmarried (includes single, divorced, widowed)

Present Address (street, city, state, zip)

Present Address (street, city, state, zip)

Own Rent ___ No. Yrs. Co-op

Own Rent ___ No. Yrs. Co-op

Home # Cell #
 Dependents: # Ages:

Home # Cell #
 Dependents: # Ages:

If residing at present address for less than two (2) years, or you have a secondary residence, please complete the following:

Previous/Second Address (street, city, state, zip)

Previous/Second Address (street, city, state, zip)

Own Rent ___ No. Yrs. Co-op

Own Rent ___ No. Yrs. Co-op

EMPLOYMENT INFORMATION

1st Person Name & Address of Employer

Self -Employed

2nd Person Name & Address of Employer

Self -Employed

Employment Dates or Business Open Since

Employment Dates or Business Open Since

Position, Title, Type of Business

Position, Title, Type of Business

Contact Person/Phone

Contact Person/Phone

If employed in current position for less than two (2) years, or If currently employed in more than one position, complete the following:

Name & Address of Employer

Self -Employed

Name & Address of Employer

Self -Employed

Employment Dates

Employment Dates

Position, Title, Type of Business

Position, Title, Type of Business

Supervisor or Contact Person/Phone

Supervisor or Contact Person/Phone

MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION

ASSETS

Gross Monthly Income	Member	Co-Member	Total	Combined Monthly Housing Expenses	
				Present	Proposed
Base Empl Income				Rent	
Bonuses				First Mortgage (P&I)	
Overtime				Other Financing (P&I)	
Commissions				Hazard Insurance	
Dividends/Interest				Real Estate Taxes	
Net Rental Income				Mortgage Insurance	
Other (before completing, see notice in describe other income, below)				Homeowner Assn. Dues	
				Other	
Total				Total	

Cash On Hand	
Checking Account	
Savings Account	
Name/Address—Financial Institution	
Name/Address—Financial Institution	
Mutual Funds	
Life Insurance (\$Value)	
Real Estate Owned (Market Value)	
Vested Retirement Interest	
Business Net Worth	
Automobiles Owned	
Other Assets (itemized)	
Total Assets	

*Self-Employed Member(s) may be required to provide additional documentation such as tax returns and financial statements.

Description Of Other Income	Notice: Alimony, Child Support, or separate maintenance income need not be revealed if the member or co-member does not choose to have it considered for repaying the loan.	Monthly Amount
		\$
		\$
		\$

If you answer "Yes" to questions 1-9 below, please provide an explanation in the space provided below.

Question	Yes	No	Yes	No	Explanation
1. Are there any outstanding judgments against you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
2. Have you been declared bankrupt within the past 7 years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
4. Are you a party to a lawsuit?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
5. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? (This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured or mobile home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
6. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
7. Are you obligated to pay alimony, child support, or separate maintenance?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
8. Is any part of the down payment borrowed?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9. Are you a co-signer or endorser on a note?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
10. Are you a U.S. citizen?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
11. Are you a permanent resident alien?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
12. Do you intend to occupy the property as your primary residence?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
13. Have you had an ownership interest in a property in the last three years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

(1) What type of property did you own—principal residence (PR), second home (SH), or investment property (IP)?

(2) How did you hold title to the home—solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?

Members

I do not wish to furnish this information Race/National Origin.

Hispanic YES NO

White Black/African American Black/African American & White
 Asian Asian & White Asian/Pacific Islander
 American Indian/Alaskan Native American Indian/Alaskan Native & White
 Native Hawaiian/Other Pacific Islander Other Multi-Racial
 American Indian/Alaskan Native & Black/African American

Sex Female Male

Head of Household: (circle one)

Single, non-elderly Elderly Related/single parent
 Related/two parents Other

Co-Members

I do not wish to furnish this information Race/National Origin.

Hispanic YES NO

White Black/African American Black/African American & White
 Asian Asian & White Asian/Pacific Islander
 American Indian/Alaskan Native American Indian/Alaskan Native & White
 Native Hawaiian/Other Pacific Islander Other Multi-Racial
 American Indian/Alaskan Native & Black/African American

Sex Female Male

Head of Household: (circle one)

Single, non-elderly Elderly Related/single parent
 Related/two parents Other

Statement of Understanding and Release

I understand and accept that National Faith HomeBuyers makes no promise or guarantee that I will become a homeowner or obtain a mortgage loan or any other financing for the purchase of a house, as a result of my being a member of National Faith HomeBuyers. In consideration of my becoming a member of National Faith HomeBuyers, I agree to release National Faith HomeBuyers, its staff, volunteers, and /or directors, from liability for any claims I may have related to National Faith HomeBuyers operations and/or activities.

Photo/Audio/Video Release

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Member Signature	Date	Co-Member or Spouse Signature	Date