

APPLICANT General Information	CO-APPLICANT General Information
<b>Name, Address, and Phone Number:</b>   <b>Social Security #:</b> _____  <b>Race/Ethnicity:</b> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> <i>(Optional)</i> African Amer. <input type="checkbox"/> Amer. Indian <input type="checkbox"/>	<b>Name, Address, and Phone Number:</b>   <b>Social Security #:</b> _____  <b>Race/Ethnicity:</b> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> <i>(Optional)</i> African Amer. <input type="checkbox"/> Amer. Indian <input type="checkbox"/>

APPLICANT General information
Marital Status: Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/>  Total number of people in household: _____ Adults 18 or older: _____ Children 17 or younger: _____ Number of dependents: _____ Age(s): _____

APPLICANT Employment History	CO-APPLICANT Employment History
<b>Employer Name, Address, and Phone Number:</b>   <b>Position/Title:</b> _____ <b>Business Type:</b> _____  <b>Years worked for this employer:</b> _____ <b>If Self-Employed:</b> <i>Please provide a business credit report, signed Federal Income Tax Return for the last two years, and, if available, audited Profit and Loss Statements and Balance Sheets for the same period.</i>  <b>Complete the following if you have been employed in your current position for less than two years.</b>   <b>Previous Employer/School Name, Address, and Phone Number:</b>   <b>Position/Title:</b> _____ <b>Full time</b> <input type="checkbox"/> <b>Part time</b> <input type="checkbox"/>	<b>Employer Name, Address, and Phone Number:</b>   <b>Position/Title:</b> _____ <b>Business Type:</b> _____  <b>Years worked for this employer:</b> _____ <b>If Self-Employed:</b> <i>Please provide Federal Income Tax Returns for the last two years. If available, also provide signed audited Profit and Loss Statements and Balance Sheets for the last two years and your most recent Business Credit Report.</i>  <b>Complete the following if you have been employed in your current position for less than two years.</b>   <b>Previous Employer/School Name, Address, and Phone Number:</b>   <b>Position/Title:</b> _____ <b>Full time</b> <input type="checkbox"/> <b>Part time</b> <input type="checkbox"/>

## HOUSEHOLD COMPOSITION

List the head of your household and all members who live in your home.  
Give the relations of each family member to the head of household.

Member #	Full Name	Relationship	Age	Social Security #
1				
2				
3				
4				
5				
6				
7				
8				

1. Does anyone live with you now who is not listed above?      Yes       No
2. Does anyone plan to live with you in the future who is not listed above?      Yes       No

*Please explain on an additional sheet of paper if you answer "Yes" to either of the questions above.*

## GROSS MONTHLY HOUSEHOLD INCOME

*(before taxes)*

Sources of Income	Applicant	Co-Applicant	Other Household Members 18 or Older*	Monthly Total
Wages/Salary				
Overtime pay				
Commissions				
Fees				
Tips				
Bonuses				
Interest and/or Dividends				
Net income from business				
Social Security (children included), pensions, retirement funds, etc., received periodically				
Unemployment benefits				
Worker's Compensation, etc.				
Welfare payments				
Other (including alimony and child support)				
<b>Gross Monthly Income</b>				

## GROSS ANNUAL HOUSEHOLD INCOME

The gross annual income from all sources of all adults (18 years old and older\*) living in the household is:  
\$ \_\_\_\_\_.

**\*Exception: Include Social Security payments for all household members, including children.**

## RENT

My/our current monthly housing-related payment (rent) of \$ \_\_\_\_\_  
is paid to \_\_\_\_\_.

## LIABILITIES

List outstanding obligations (your debts), including auto loans, credit cards, charge accounts, credit union loans, personal loans, and all other loans.

Type	Creditor's Name	Monthly Payment	Unpaid Balance	Due Date

I certify that I have not owned a home within the last three years. I authorize Eastern Connecticut Housing Opportunities, Inc. (ECHO), to access a Credit Report on myself/ourselves and to obtain from my mortgage lender any personal financial information provided to the lender in connection with my application for a mortgage. I understand that any willful misstatement of material fact will be grounds for disqualification. I hereby certify that the above information provided is true and complete to the best of my/our knowledge and belief.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Signature of Co-Applicant*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

**When you have the three documents below, contact:**

Sally Williams  
Eastern Connecticut Housing Opportunities, Inc.  
228 State Street, Suite 5, New London, CT 06320  
Phone: (860) 447-8055 / Fax: (860) 444-0574  
E-mail: swecho@sbcglobal.net



1. Completed application.
2. Certificate of Completion from a CHFA-approved eight-hour homebuyer training course.
3. Pre-approval letter from a mortgage lender.