

# DOWNPAYMENT ASSISTANCE PROGRAM APPLICATION



Pathfinder Community Connections  
 3326 S. Calhoun Street, Suite 102  
 Fort Wayne, IN 46807 [260] 456-2385  
 Fax: [260] 745-5287



Toll Free: 1-866-892-0513

## Applicant Information & Income

### APPLICANT 1

**NAME**     
*First Middle Last*

**PHONE**

**CURRENT ADDRESS**   
 Fort Wayne IN (zip)  
 How long at this address?  years

**PREVIOUS ADDRESS**   
 Fort Wayne IN (zip)  
 How long at this address?  years

SS#  Date of Birth   
 Marital Status

**EMPLOYER**

Name   
 Phone   
 Address   
 Position   
 Length of Employment?  years

**PREVIOUS EMPLOYER**

Name   
 Phone   
 Address   
 Length of Employment?  years

**INCOME**

SOURCES	Hourly	Weekly	Monthly
Job 1	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Job 2	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Child Support	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
SS/Retirement	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Disability/SSI	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Other Income	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
<b>TOTAL</b>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
<b>Annual Income</b>	<input style="width: 100%;" type="text"/>		

Any other income?  annually

### CO-APPLICANT

**NAME**     
*First Middle Last*

**PHONE**

**CURRENT ADDRESS**   
 Fort Wayne IN (zip)  
 How long at this address?  years

**PREVIOUS ADDRESS**   
 Fort Wayne IN (zip)  
 How long at this address?  years

SS#  Date of Birth   
 Marital Status

**EMPLOYER**

Name   
 Phone   
 Address   
 Position   
 Length of Employment?  years

**PREVIOUS EMPLOYER**

Name   
 Phone   
 Address   
 Length of Employment?  years

**INCOME**

SOURCES	Hourly	Weekly	Monthly
Job 1	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Job 2	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Child Support	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
SS/Retirement	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Disability/SSI	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
Other Income	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
<b>TOTAL</b>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>
<b>Annual Income</b>	<input style="width: 100%;" type="text"/>		

Any other income?  annually

**TOTAL ANNUAL HOUSEHOLD INCOME:**

**Debt Information** (for Applicant & Co-Applicant)

Consumer	Balance	Payments Remaining	Monthly Payment
Car Payments	\$ -		
Car Payments	\$ -		
School Loans	\$ -		
Charge Card	\$ -		
Charge Card	\$ -		
Charge Card	\$ -		
Charge Card	\$ -		
Charge Card	\$ -		
Child Support	\$ -		
Other	\$ -		
Other	\$ -		
<b>TOTAL MONTHLY CONSUMER DEBT:</b>			

**Applicant:**

Have you ever filed bankruptcy?

Yes  No   
 If yes, date:

Are you a co-signer on any notes?

Yes  No   
 If yes, date:

**Co-Applicant:**

Have you ever filed bankruptcy?

Yes  No   
 If yes, date:

Are you a co-signer on any notes?

Yes  No   
 If yes, date:

**Household Information**

**HOUSEHOLD SIZE** # Adults  + # Children  = Total

**DEPENDENTS**

Name	Relation	Date of Birth

**Current Rental Information**

Length of time at current address:  Monthly Payment:   
 Landlord's Name:   
 Landlord's Address:

**Assets & Real Estate**

**CHECKING & SAVINGS**

	Institution	Account #	Type of Account	Balance
Account 1				
Account 2				
Account 3				
<b>TOTAL</b>				

	Address	Market Value	Monthly Mortgage	Monthly Expenses	Monthly Rental Income	Net Monthly Income
Property 1						
Property 2						
<b>TOTAL</b>						

Email address: \_\_\_\_\_

## Other Information

**Current Household Type:**

(Single Adult - 2 Adults w/no children - 2 Parents & children; Single Mother - Single Father w/custody - Multigenerational - Other)

**Current Housing Situation:**

(Adequate rental - Inadequate rental- overcrowded w/more than 2 per bedroom - Poor condition rental not up to code - Overcrowded rental also in poor condition not up to code - Do not rent, live with others)

Have you ever owned a home before? Yes  No

If yes, how long ago?

Have you ever experienced homelessness? Yes  No

In what area of the city would you prefer to live?

What price range of home are you interested in?

What features do you want in a home?

What type of home would you like to purchase? (Existing, New, Condo)

## Information for Government Monitoring

### RACE & ETHNICITY

American Indian/Alaskan Native	<input style="width: 100%; height: 15px;" type="text"/>	American Indian/Alaska Native & White	<input style="width: 100%; height: 15px;" type="text"/>
White	<input style="width: 100%; height: 15px;" type="text"/>	Asian & White	<input style="width: 100%; height: 15px;" type="text"/>
Black/African American	<input style="width: 100%; height: 15px;" type="text"/>	Black/African American & White	<input style="width: 100%; height: 15px;" type="text"/>
Asian	<input style="width: 100%; height: 15px;" type="text"/>	American Indianan/Alaskan Native & Black	<input style="width: 100%; height: 15px;" type="text"/>
Hispanic	<input style="width: 100%; height: 15px;" type="text"/>	Other	<input style="width: 100%; height: 15px;" type="text"/>
Native Hawaiian/Pacific Islander	<input style="width: 100%; height: 15px;" type="text"/>		

**APPLICANT: I do not wish to furnish this information:** \_\_\_\_\_ (Initials)

**DISABLED?**  Yes  No

The above information is requested by the Federal Government. If this loan is related to a dwelling, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. However, if you chose not to furnish it, under Federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please initial on the provided line above.

### How did you hear about this program?

Friend/Relative/Neighbor	<input style="width: 100%; height: 15px;" type="text"/>	City of Fort Wayne	<input style="width: 100%; height: 15px;" type="text"/>
Realtor	<input style="width: 100%; height: 15px;" type="text"/>	Social Service Organization	<input style="width: 100%; height: 15px;" type="text"/>
Lender	<input style="width: 100%; height: 15px;" type="text"/>	Walk-in	<input style="width: 100%; height: 15px;" type="text"/>
Brochure/Flyer	<input style="width: 100%; height: 15px;" type="text"/>	Ft. Wayne Urban League	<input style="width: 100%; height: 15px;" type="text"/>
Homebuyer Class	<input style="width: 100%; height: 15px;" type="text"/>	Nonprofit Housing Org.	<input style="width: 100%; height: 15px;" type="text"/>
Neighborhood Association	<input style="width: 100%; height: 15px;" type="text"/>	Other:	<input style="width: 100%; height: 15px;" type="text"/>

## CERTIFICATION

I (We), the undersigned, certify that the information concerning my (our) assets, debts and credit references which has been disclosed is factual and there isn't any information pertaining to income, household size, assets, debts, and credit references which hasn't been disclosed.

I (We), the undersigned, also certify that we will have to sign a separate "General Authorization" form that will allow Pathfinder Community Connections to verify employment and obtain consumer credit information to determine eligibility for assistance.

Application was taken by: face to face interview  Date:   
 by mail   
 by telephone

Name & Title of Interviewer:

Applicant's Signature

Date

Co-Applicant's Signature

Date



## GENERAL AUTHORIZATION FORM

I hereby authorize Pathfinder Community Connections to verify my past and present employment earnings and I further authorize Pathfinder Community Connections to order a consumer credit report, if necessary, to verify I understand that this credit report will be retained on file at the Pathfinder Community Connections office for

My signature below authorizes the release to the credit reporting agency of financial information which I have

### **SIGNING BELOW GRANTS PERMISSION FOR THE RELEASE OF FINANCIAL INFORMATION TO THE**

**Applicant Name:** \_\_\_\_\_

**Applicant Address:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Applicant Social Security #:** \_\_\_\_\_

**Co-Applicant Name:** \_\_\_\_\_

**Co-Applicant Address:** \_\_\_\_\_

**Co-Applicant Signature:** \_\_\_\_\_

**Co-Applicant Social Sec. #:** \_\_\_\_\_



**HUD Area Median Income (AMI) by Household Size**  
**Total household income must be at or below 80% AMI**

Household Size	100% AMI	50% AMI	80% AMI
1	\$44,300	\$22,150	\$35,450
2	\$50,600	\$25,300	\$40,500
3	\$57,000	\$28,500	\$45,600
4	\$63,300	\$31,650	\$50,650
5	\$68,400	\$34,200	\$54,700
6	\$73,400	\$36,700	\$58,750
7	\$78,500	\$39,250	\$62,800
8	\$83,600	\$41,800	\$66,850

*Last Updated: 3/10/2009*

*Source: U.S. Department of HUD*