



For a Better Way of Life.®



2016 HOME IMPROVEMENT PARTNERSHIP PROGRAM INCOME AND CREDIT INFORMATION

Complete and Attach to Pre-App

CITY USE ONLY: _____ DATE APPLICATION RECEIVED ___ FACE TO FACE ___ BY MAIL ___ BY TELEPHONE

I AM APPLYING: ___ INDIVIDUALLY ___ WITH CO-APPLICANT ___ AS CO-SIGNER FOR:

Applicant # 1

Applicant # 2

FULL NAME		FULL NAME	
SSN	DATE OF BIRTH	SSN	DATE OF BIRTH
STREET ADDRESS		STREET ADDRESS	
CITY/STATE/ZIP		CITY/STATE/ZIP	
HOW LONG? ___ YRS ___ MTHS ___ OWN ___ RENTED		HOW LONG? ___ YRS ___ MTHS ___ OWN ___ RENTED	
PREVIOUS ADDRESS (IF LESS THAN 3 YEARS)		PREVIOUS ADDRESS (IF LESS THAN 3 YEARS)	
HOW LONG? ___ YRS ___ MTHS ___ OWN ___ RENTED		HOW LONG? ___ YRS ___ MTHS ___ OWN ___ RENTED	
HOME PHONE	WORK PHONE	HOME PHONE	WORK PHONE
EMPLOYER (INCLUDE ADDRESS)		EMPLOYER (INCLUDE ADDRESS)	
HOW LONG? ___ YRS ___ MTHS		HOW LONG? ___ YRS ___ MTHS	
POSITION TITLE	MO. SALARY (GROSS)	POSITION TITLE	MO. SALARY (GROSS)
	MO. SALARY (NET)		MO. SALARY (NET)
PREVIOUS EMPLOYER (IF LESS THAN 3 YEARS)		PREVIOUS EMPLOYER (IF LESS THAN 3 YEARS)	
HOW LONG? ___ YRS ___ MTHS		HOW LONG? ___ YRS ___ MTHS	
NUMBER OF DEPENDENTS (INCLUDE SELF)		NUMBER OF DEPENDENTS (INCLUDE SELF)	
MARITAL STATUS ___ UNMARRIED ___ MARRIED ___ SEPARATED		MARITAL STATUS ___ UNMARRIED ___ MARRIED ___ SEPARATED	
NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU		NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	
RELATIONSHIP	PHONE NO. (WITH AREA CODE)	RELATIONSHIP	PHONE NO. (WITH AREA CODE)
OTHER INCOME, ALIMONY, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION		OTHER INCOME, ALIMONY, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION	
ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE RECEIVED UNDER		ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE RECEIVED UNDER	
___ COURT ORDER ___ WRITTEN AGREEMENT ___ ORAL UNDERSTANDING		___ COURT ORDER ___ WRITTEN AGREEMENT ___ ORAL UNDERSTANDING	
NATURE OF ADDT. INCOME / MONTHLY AMOUNT / DURATION OF INCOME		NATURE OF ADDT. INCOME / MONTHLY AMOUNT / DURATION OF INCOME	
IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUEST IS TO BE PAID OFF? ? ___ NO ___ YES(EXPLAIN)		IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUEST IS TO BE PAID OFF? ? ___ NO ___ YES(EXPLAIN)	

PERSONAL FINANCIAL STATEMENT

ASSETS		Total Value	LIABILITIES		Total	Mo. Payment
CHECKING	BANK NAME	\$	MORTGAGE OR RENT		\$	\$
SAVINGS/CDS	BANK NAME		SECOND MORTGAGE OR EQUITY LINE			
TAXABLE MARKET VALUE OF YOUR HOME (Land and Buildings)			STUDENT LOANS			
OTHER REAL ESTATE OWNED			1ST AUTO LOAN			
1ST VEHICLE	YR MODEL		2ND AUTO LOAN			
2ND VEHICLE	YR MODEL		OTHER LOANS (LIST)			
IRAS/RETIREMENT PLANS						
STOCKS			CREDIT CARDS (LIST)			
BONDS						
MUTUAL FUNDS						
CASH VALUE OF LIFE INSURANCE FACE AMOUNT \$						
PERSONAL PROPERTY			DAYCARE EXPENSE			
OTHER ASSETS (DESCRIBE)			ALIMONY/CHILD SUPPORT			
TOTAL ASSETS			TOTAL LIABILITIES			

ARE YOU A CO-MAKER, ENDORSER OR GUARANTOR ON ANY LOAN OR CONTRACT? YES NO YES NO

ARE THERE ANY UNSATISFIED JUDGEMENTS AGAINST YOU? YES NO YES NO

HAVE YOU EVER FILED FOR BANKRUPTCY? YES NO YES NO

ALL INFORMATION SO FURNISHED IS FOR THE CONFIDENTIAL USE OF THE CITY OF WAHPETON, GATE CITY BANK, OR THE UNITED STATES DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD). UNDER NORTH DAKOTA LAW, IT IS A CRIME TO USE FALSE OR MISLEADING INFORMATION IN THIS APPLICATION IN ORDER TO QUALIFY FOR A LOAN.

SIGNATURES: I CERTIFY THAT EVERYTHING I HAVE STATED IN THIS APPLICATION AND ON ANY ATTACHMENTS IS CORRECT. YOU MAY KEEP THIS APPLICATION WHETHER OR NOT IT IS APPROVED. I AUTHORIZE YOU TO CHECK MY CREDIT AND EMPLOYMENT HISTORY AND TO ANSWER QUESTIONS OTHERS MAY ASK ABOUT MY CREDIT WITH YOU. I UNDERSTAND THAT I MUST UPDATE CREDIT INFORMATION AT YOUR REQUEST IF MY FINANCIAL SITUATION CHANGES.

X _____ X _____
 Signature Date Signature Date