



P.O. Box 2179 | Durango CO 81302-2179 | 124 E. 9<sup>th</sup> Street | Durango CO 81301 | P: 970.259.1418 | F: 970.259.1298

Dear Homeownership Advising Client,

Thank you for your interest in our Homeownership Advising Program.

Attached is our program application.

Please answer every question as best you can. All information must be included for prompt processing. You may submit the information via mail, fax, email, or in-person delivery. We typically need 2-3 business days to review, then our staff will contact you for an appointment.

SUBMIT COPIES THAT WE MAY KEEP; WE CANNOT MAKE COPIES FOR YOU.

Documentation:

- \_\_\_\_\_HomesFund Pre-Purchase Advising Application - (attached) Completed and signed.
- \_\_\_\_\_Monthly Expenses /Budget Worksheet (attached) Provide your best estimates.
- \_\_\_\_\_Copy of Driver's License(s) and Social Security Card(s)
- \_\_\_\_\_Most recent paystubs covering 30 days
- \_\_\_\_\_Retirement, disability, child support or social security award letter (if applicable)
- \_\_\_\_\_2 Years Most Recent FEDERAL Tax Returns (State Returns not needed)
- \_\_\_\_\_2 Months Most Recent Bank Statements - ALL pages
- \_\_\_\_\_A check made payable to HomesFund for a credit report -  
\$22.30 for a single person; \$44.60 for couples.

When setting your appointment, please let us know in advance if you need assistance for mobility, visual, or hearing impairments, or for other disabilities. Also please let us know prior to your appointment if you need a language translator and we will try to accommodate your request.

Please review our Privacy Policy, attached.

Please contact our office if you have any questions.

We look forward to working with you!

Sincerely,

Matt Morishige  
Homebuyer Program Coordinator  
[matt@homesfund.org](mailto:matt@homesfund.org)

Pam Moore  
Deputy Director  
[pam@homesfund.org](mailto:pam@homesfund.org)



## Pre-Purchase Advising Application

124 E. 9<sup>th</sup> Street, Durango, CO 81301 970-259-1418

Applicant 1	Applicant 2
Full Legal Name _____	Full Legal Name _____
Street Address _____	Street Address _____
Is this addresses with City Limits?    Yes    No	Is this addresses with City Limits?    Yes    No
Mailing Address _____	Mailing Address _____
Home Phone _____                      Cell Phone _____	Home Phone _____                      Cell Phone _____
Date of Birth _____	Date of Birth _____
Social Security _____	Social Security _____
E-Mail _____	E-Mail _____
Marital Status    Married    Single	Marital Status    Married    Single
Current Employer _____                      Date of Hire _____	Current Employer _____                      Date of Hire _____
Self Employed    Yes    No	Self Employed    Yes    No
Full Time _____    Part Time _____                      Average Hours Per Week _____	Full Time _____    Part Time _____                      Average Hours Per Week _____
Monthly Income from Employment _____	Monthly Income from Employment _____
\$ Gross (pre tax) _____                      \$ Net (after taxes) _____	\$ Gross (pre tax) _____                      \$ Net (after taxes) _____
Are you paid on commission?    No    Yes Monthly Average \$ _____	Are you paid on commission?    No    Yes Monthly Average \$ _____
Do you receive bonus income?    No    Yes Monthly Average \$ _____	Do you receive bonus income?    No    Yes Monthly Average \$ _____
Do you receive overtime            No    Yes Monthly Average \$ _____	Do you receive overtime            No    Yes Monthly Average \$ _____
Monthly Income from Other Sources (Ex: Child Support, Alimony, Social Security, Retirement, etc)	Monthly Income from Other Sources (Ex: Child Support, Alimony, Social Security, Retirement, etc)
<u>Average Per Month</u> <u>Source</u> <u>How Long Received?</u>	<u>Average Per Month</u> <u>Source</u> <u>How Long Received?</u>
1) \$ _____	1) \$ _____
2) \$ _____	2) \$ _____
3) \$ _____	3) \$ _____

Number of Adults (over 18) in the Household \_\_\_\_\_

Number of Dependents \_\_\_\_\_ Ages \_\_\_\_\_

Assets:	Balance in Checking	\$ _____
	Balance in Savings	\$ _____
	Retirement	\$ _____

Liabilities	Balance	Monthly Payment
Credit Cards (list all - add together)	\$	\$
Auto Loans	\$	\$
Student Loans	\$	\$
Other	\$	\$
Other	\$	\$
Current Monthly Rental/ Housing Expense	n/a	\$

	<u>Applicant 1</u>		<u>Applicant 2</u>		
Have you declared bankruptcy in the last 7 years?	Yes	No	Yes	No	
Have you owned a home in the last 3 years?	Yes	No	Yes	No	
Are you a Veteran?	Yes	No	Yes	No	
Are you a registered Sexual Offender?	Yes	No	Yes	No	
Have you ever been convicted of a felony?	Yes	No	Yes	No	
Have you taken Homebuyer Education Class?	Yes	No	Yes	No	If Yes, When _____
Do you own any other real estate?	Yes	No	Yes	No	
If Yes, please explain _____					
Are you currently under contract?	Yes	No			
Are you currently working with a realtor?	Yes	No	If yes, who?	_____	
Are you currently working with a lender?	Yes	No	If yes, who?	_____	
How did you hear about us? _____					

**By signing below, I certify that the information contained in this application is true, correct and complete. I have made no misrepresentations, nor did I omit any pertinent information.**

**Applicant 1** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Check Box: I authorize Homes Fund to obtain a consumer credit report to evaluate my readiness to purchase a home.**

**I authorize the sharing of information contained within my client file with the US Department of Housing and Urban Development (HUD) in the event HomesFund files are audited. (Must be marked to receive Pre-Purchase Advisement Services.)**

The following information is requested by the Federal Government in order to monitor compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, bur are encouraged to do so. This agency may not discriminate on the basis of ethnicity, race or sex.

**Ethnicity:** Hispanic or Latino \_\_\_\_\_ Not Hispanic or Latino \_\_\_\_\_ **Sex:** Female \_\_\_\_\_ Male \_\_\_\_\_

**Race:** American Indian or Alaska Native \_\_\_\_\_ Native Hawaiian or Pacific Islander \_\_\_\_\_ Asian \_\_\_\_\_ White \_\_\_\_\_  
Black or African American \_\_\_\_\_ I do not wish to furnish \_\_\_\_\_

**Applicant 2** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Check Box: I authorize Homes Fund to obtain a consumer credit report to evaluate my readiness to purchase a home.**

**I authorize the sharing of information contained within my client file with the US Department of Housing and Urban Development (HUD) in the event HomesFund files are audited. (Must be marked to receive Pre-Purchase Advisement Services.)**

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Black or African American \_\_\_\_\_ I do not wish to furnish \_\_\_\_\_

Monthly Budget			
Income			
Name	Source		Net Amount
Expenses			
	Amount		Amount
<b>Auto</b>		<b>Medical</b>	
Auto Insurance		Doctor Visit/Co-Pay	
Auto Loan		Vision/Glasses/Contacts	
Auto Tags/Registration		Medical Bills	
Auto Repairs		Medications	
Gas		<b>Total</b>	
<b>Total</b>		<b>Miscellaneous</b>	
<b>Child Support/Alimony</b>		<b>Savings</b>	
<b>Credit Card Payments</b>		<b>Utilities</b>	
Credit Card 1		Internet	
Credit Card 2		Cable TV	
Credit Card 3		Cell Phone	
Credit Card 4		Electricity	
Credit Card 5		Trash	
<b>Total</b>		Heating	
<b>Collections</b>		Water/Sewer	
<b>Education</b>		Telephone	
Tuition		<b>Total</b>	
Book/Supplies		<b>Charity</b>	
<b>Total</b>		<b>Dinning</b>	
<b>Housing</b>		<b>Entertainment</b>	
1st Mortgage Payment		<b>Groceries</b>	
Homeowner/Renters Insurance		<b>Gifts</b>	
Rent		<b>Household</b>	
<b>Total</b>		Barber/Beauty Shop	
<b>Installment Loans</b>		Child Care	
Installment Loans		Clothing	
Student Loans		Memberships	
<b>Total</b>		Laundry	
<b>Insurance</b>		Mad Money	
Health Insurance		Repairs/Maintenance	
Life Insurance		Vacations	
<b>Total</b>		<b>Total</b>	
		<b>Pet Expense</b>	
		<b>Public Transportation</b>	
<b>Total Expenses</b>		<b>Total Expenses</b>	
<b>Net Income</b>			
<b>Surplus/Defecit</b>			