

Home Start, Inc. & Delta Real Estate
divisions of THE AFFORDABLE HOMES GROUP, INC.
P.O. Box 249 (94-96 Rancocas Road) Mt. Holly, NJ 08060
(609) 261-7244 / Fax 261-2147

HOMEBUYER INFORMATION

I. Personal Information

Date: _____

Buyer: _____ DOB: ____ / ____ / ____

Co-Buyer: _____ DOB: ____ / ____ / ____

Address: _____
(Street) (Apt#)

(City) (State) (Zip)

Family size: _____ adults _____ children Home Phone: (____) ____ - ____

Buyer cell or alt#: (____) ____ - ____ e-mail: _____

Co-buyer cell or alt#: (____) ____ - ____ e-mail: _____

Length of time at this address: ____ yrs., ____ mos. Present rent/mortgage pmt: \$ ____/mo.

Name of Landlord: _____ Phone: (____) ____ - ____

Optional Information: *(For statistical purposes only. Home Start uses this statistical information when reporting to grant and funding sources about the population of clients we serve. The following items will not be connected in any way with your name or other identifying information.)*

Race/Ethnicity: _____ (self-designation) Female Head of Household? **Y** or **N** (circle one)

Buyer Disabled? **Y** or **N** (circle one) Other Household Member Disabled? **Y** or **N** (circle one)

II. Employment Information

A. Buyer's Employer: _____

Address: _____ City/State/Zip: _____

Name of Supervisor: _____ Phone: (____) ____ - ____

Length of Employment: ____ yrs., ____ mos. Wage/Salary: \$ ____ per ____

B. Co-Buyer's Employer: _____

Address: _____ City/State/Zip: _____

Name of Supervisor: _____ Phone: (____) ____ - ____

Length of Employment: ____ yrs., ____ mos. Wage/Salary: \$ ____ per ____

III. Financial Information

A. Total 2005 family/household income: \$ _____ (From W2(s) or IRS 1040 Form)

B. Projected income for 2006: _____ *Proof of income is required to enroll you in our program. Include a copy of two years' tax returns (including IRS 1040 form and W2s), most recent month's pay stubs, and letter or proof of any other income, such as alimony, child support or SSI/SSD.

C. Additional income: (food stamps, unemployment compensation, SSI/SSD, child support, public assistance [state type], alimony, pension, disability, etc.)

\$ _____ / mo. Source: _____ \$ _____ / mo. Source: _____

\$ _____ / mo. Source: _____ \$ _____ / mo. Source: _____

D. Alternative Credit References: (Name/Address/Telephone Number)

- 1. _____
2. _____
3. _____

Table with 4 columns: Debt Owed To, Purpose of Loan, Amount Owed, Mo. Pmt. and 3 rows of data.

IV. Credit Report There are multiple means of obtaining your credit report. You are entitled to one free copy of your report from each credit bureau once per year. If you wish to obtain an additional copy of your report - beyond your free copy - for the purposes of one-on-one counseling, Home Start and AHG may obtain one for you for a fee (see below). If you wish to have AHG obtain your report please include the appropriate fee and sign below. If you plan to obtain copies of your own report, please continue to the next section.

I authorize The Affordable Homes Group, Inc. to obtain a credit report and to use the information in the report for counseling purposes and to evaluate my financial situation and likelihood for home purchase. I certify that all the information I have provided is correct to the best of my knowledge.

Please note: If you wish to have AHG obtain a copy of your credit report, you must include \$20.00 for an individual report or \$30.00 for a joint report.

Signature: _____ Date: _____

Signature: _____ Date: _____

V. Home and Location Preferences

- _____ Single Family Detached Number of Bedrooms _____
_____ Single Family Attached Number of Bathrooms _____
_____ Condo or Townhouse

Towns or Areas where you are interested in purchasing a home: _____
