

Mesa County Housing Rehabilitation Loan Program

PREQUALIFYING APPLICATION

(This is not a loan application)

Housing Resources of Western Colorado
524 30 Road, Suite #3
Grand Junction, CO 81504
970-241-2871 ext 109

Applicant Information

Applicant Name: _____ Social Security # _____

Applicant Name: _____ Social Security # _____

Number of Dependents: _____ Phone Number _____

Name	Age	Sex
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Property Information

Name/s Property is Listed Under: _____

Property Address: _____

Approximate Age of Structure: _____ Market Value if Known _____

Is the home mortgaged? YES () NO () Amount owed on mortgage \$ _____

Mortgage Company _____

Mortgage Company Address: _____

Banking Information

Name of Bank/Address: _____

Checking YES () NO ()

Savings YES () NO ()

Application Employment Information

Applicants Employer: _____ How Long: _____

Mailing Address: _____

Occupation: _____

How are you paid: Monthly () Bi-weekly () Weekly ()

Hourly () Salary ()

Hourly Rate: _____ Salary Amount: _____

How many hours per month do you work? _____

Co Applicants Employer: _____ How Long _____

Mailing Address: _____

Occupation: _____

How are you paid: Monthly () Bi-weekly () Weekly ()

Hourly () Salary ()

Hourly Rate: _____ Salary Amount: _____

How many hours per month do you work? _____

Other Income Sources

Description: _____ Amount: _____

Description: _____ Amount: _____

Monthly Expense Summary Sheet

Monthly Shelter Expenses

Monthly Mortgage Payment Amount: _____

(Are taxes and insurance included?) YES () NO ()

If taxes and insurance are not included what are your yearly expenses

Taxes \$ _____ Insurance \$ _____

Do you pay the following expenses:

Electric:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Natural Gas:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Propane:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Wood or Pellets:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Water/Sewer/Trash:	YES ()	NO ()	Average Monthly Bill Amount \$ _____

Living Expenses

Do you pay the following expenses monthly?

Medical/RX:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Dental/Eye:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Health Insurance:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Car Insurance:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Life Insurance:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Travel/Gas:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Groceries:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Entertainment:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Phone:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Cell Phone:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Education:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Day Care:	YES ()	NO ()	Average Monthly Bill Amount \$ _____
Other:	YES ()	NO ()	Average Monthly Bill Amount \$ _____

Other Monthly Debt:

Do you own a vehicle: YES () NO ()

Is it Financed: YES () NO () What is the monthly payment Amount? _____

Do you own a 2nd vehicle: YES () NO ()

Is it Financed: YES () NO () What is the monthly payment Amount? _____

Do you have credit card debt: YES () NO ()

Name of Credit Card: _____ Average Monthly Bill Amount \$ _____

Name of Credit Card: _____ Average Monthly Bill Amount \$ _____

Name of Credit Card: _____ Average Monthly Bill Amount \$ _____

Name of Credit Card: _____ Average Monthly Bill Amount \$ _____

APPLICANT'S CERTIFICATION

(Please read and initial the following statements and sign and date below)

I/we hereby certify that the statements made by me/us are true and correct to the best of my/our belief and knowledge. Intentional misrepresentation made by me/us may result in immediate disqualification of my/our application and shall require immediate restitution of any funds disbursed to the local agency.

I/we authorize Housing Resources of Western Colorado to run a credit check on me/us and to verify the financial data that I/we have provided, now and at any time during the life of any loan that I/we may receive from HRWC. Any charges or fees for loan or account verification are the responsibility of the applicant.

I/we will be responsible for any costs incurred as a result of environmental testing or permits necessary to determine whether a loan is eligible or feasible (including, but not limited to lead-based paint testing and flood plain clearances) regardless or whether or not I/we are approved for a loan.

I/we understand that if I/we are given a loan from HRWC that the status of that loan and my/our payment history may be provided to a credit-reporting agency.

All information provided to Housing Resources or Western Colorado is confidential (except for matters of public record.) This information will not be released to any third parties without authorization by the applicant, unless required by law.

All applications submitted to HRWC become the property of HRWC. Neither the application nor any associated documentation obtained during the processing of the application will be returned to the applicant. Applicants may review any data collected by HRWC during the processing to the application by making an appointment. An applicant may request copies of any material (except credit reports, which must be obtained from the reporting agency). The applicant will be responsible for paying for the copy cost.

I understand that a Grievance Procedure exists through which I may appeal any aspect of service I receive, or am denied through this agency, upon a written request.

Signature: _____ Date: _____

Signature: _____ Date: _____