



**Neighborhood Housing**  
KNOXVILLE LEADERSHIP FOUNDATION

# Homebuyer Readiness Program Application

**\*\*Please complete and bring to your credit meeting\*\***

## Applicant Information

FULL Name:

Date of birth:

SSN:

Email Address:

Marital Status:       Single       Married       Separated

Cell Phone:

Home Phone:

Current address:

ZIP Code:

Own     Rent     Live with family/friends

Monthly rent:

Move-in date:

Have you ever been late on a payment?  Yes     No

## Applicant Current Employment Information

Current employer:

Position:

Dates: \_\_\_\_\_ to \_\_\_\_\_

Hourly Rate of Pay:

Hours worked per week:

Payment Schedule:  Weekly  Every 2 Weeks  Twice Monthly

Do you get commission or bonuses?:     Yes     No

## Applicant Current Employment Information (Only if applicant has 2<sup>nd</sup> job)

Current employer:

Position:

Dates: \_\_\_\_\_ to \_\_\_\_\_

Hourly Rate of Pay:

Hours worked per week:

Payment Schedule:  Weekly  Every 2 Weeks  Twice Monthly

Do you get commission or bonuses?:     Yes     No

## Past Employment Information (PAST 2 YEARS)

Employer	Employment Dates	Monthly Pay	Reason for Leaving
	Dates: _____ to _____		
	Dates: _____ to _____		

## Co-Applicant Information

FULL Name:

Date of birth:

SSN:

Email Address:

Marital Status:       Single       Married       Separated

Cell Phone:

## Co-Applicant Current Employment Information

Current employer:

Position:

Dates: \_\_\_\_\_ to \_\_\_\_\_

Hourly Rate of Pay:

Hours worked per week:

Payment Schedule:  Weekly  Every 2 Weeks  Twice Monthly

Do you get commission or bonuses?:     Yes     No

## Co-Applicant Past Employment Information (PAST 2 YEARS)

Employer	Employment Dates	Monthly Pay	Reason for Leaving
	Dates: _____ to _____		
	Dates: _____ to _____		



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## Future Living Situation in Your New Home

Please list EVERYONE who will live in the **NEW HOME** and their relationship to you below.

**NOTE: Please EXCLUDE yourself and the co-applicant from this list.**

Name	Date of Birth	Currently Employed? If yes, State Monthly Income	Relationship to Applicant

If someone residing with you has a disability, what are the housing accommodations needed, if any?

Have you **owned** a home in the last 3 years?     Yes     No

## Extra/Supplemental Income (include ALL extra income of EVERYONE living in home)

Type of Extra Income	Monthly Amount	Person Receiving Benefit	End Date, if any
Child Support			
Social Security			
Supplemental Security Income (SSI)			
Disability			
Section 8 Voucher			
Other: _____			

## Asset Information (Both Applicant and Co-Applicant)

Do you have a checking account? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please give bank name: _____	
Do you have a savings account? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, bank name: _____	Estimated Balance: _____

FOR OFFICE USE ONLY			
Date of Initial Contact:	Application Date:	Accepted/Denied:	Y    N
Fees paid:    Y    N	Check #: _____	Initials: _____	Copy of DL/ID:    Y    N    Initials: _____



Knoxville Leadership Foundation, Neighborhood Housing Inc., and the City of Knoxville do not discriminate against any person on the ground of race, color, national origin, sex, age, veteran status or disability in the provision of employment opportunities and services. Complaints may be filed with the Title VI Coordinator, Room 586, 400 Main St, Knoxville, TN 37902

## Certifications

I certify that to my knowledge all of the information provided in this application is true and complete. I authorize verification of any information.

I authorize Neighborhood Housing, Inc and its staff members to pull my credit report to help me with homeownership. I consent to the use of its contents to help obtain assistance for, but not limited to, credit help, loan acceptance and down payment grant allowance.

I consent to pay the \$40 fee that may be used for up to 2 credit checks, HRP binder and NHI training sessions. I understand there is no reimbursement. I understand that if I do not comply with the Housing Counseling Coordinator, any NHI staff member or its affiliates' directions I can be involuntarily dismissed from the program. I also understand that HRP completion in no way obligates me to purchase a home directly from Neighborhood Housing.

**I promise, to the best of my ability, I will attend all scheduled appointments and meetings. I will call ahead of time if I will be late or unable to attend.**

I certify that I have listed all individuals who will be living in the house I (we) buy and that their total income is provided. I further state that I fully understand that providing false information to obtain assistance could include owing the grant assistance in full.

Signature of applicant:	Date:
Signature of co-applicant:	Date:

(To be cut off and kept in a separate, anonymous file for future marketing purposes only)

## Applicant Demographic Information Filling in this information is voluntary and is not required for the program.

Gender: <input type="checkbox"/> male <input type="checkbox"/> female			Age: <input type="checkbox"/> 18-25 <input type="checkbox"/> 26-40 <input type="checkbox"/> 41-60 <input type="checkbox"/> 60+		
Number of children:	Ages of children:	Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Race: <input type="checkbox"/> White, not Hispanic <input type="checkbox"/> Black, not Hispanic <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander					
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed					
Education: <input type="checkbox"/> Below High School <input type="checkbox"/> High School Diploma or GED <input type="checkbox"/> Some College <input type="checkbox"/> College Degree <input type="checkbox"/> Graduate Degree					
Referred to Program by: <input type="checkbox"/> Yard sign <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Realtor <input type="checkbox"/> City of Knoxville <input type="checkbox"/> Other, please list: _____					
Total Yearly Income: <input type="checkbox"/> 15,000-20,000 <input type="checkbox"/> 20,001-30,000 <input type="checkbox"/> 30,001-40,000 <input type="checkbox"/> 40,001- 50,000					
Preferred Area: <input type="checkbox"/> East <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> West			Have you ever owned a home? <input type="checkbox"/> Yes <input type="checkbox"/> No		



## Homebuyer Eligibility Guidelines Summary

February, 2011

### Goal:

To provide a written guideline by which NHI sells properties to ensure that each client is considered fairly in order that houses may be sold objectively by NHI and that no subjective preferential order may be construed.

We are unable to hold or claim a particular house for a particular client. While we recognize client's wishes and will do our best to accommodate, we cannot be responsible if another buyer is ready and purchases a particular home before that client is ready to purchase. However, the following is a guideline for home sales.

The policy is as follows:

**To be eligible to purchase, at minimum a client must be enrolled in the Homebuyer Readiness Program for at least 2 weeks, satisfactorily meeting for financial counseling. The Housing Counselor must sign off on satisfactory completion.**

The first client (that meets eligibility above) to meet with the Housing Counseling Coordinator that wishes to purchase a particular NHI home that has been pre-approved or pre-qualified with enough loan money from a lending institution will be the first able to sign a sales contract for that house.

If the Housing Counseling Coordinator is aware of a client trying to obtain financing but who has not signed a contract that client will be given the opportunity to sign a contract first should another client come within that timeframe and desire to sign a contract for the home. The original client will be given 5 days to obtain a pre-approval letter from the date the second clients makes NHI aware of their purchase desire. In this case, a back-up contract will be signed so that this buyer has full rights to buy next should the first buyer be unable to purchase.

If you have any questions, please ask the Housing Counseling Coordinator for clarification. For more details please see the complete Housing Policy.

My signature indicates I have read and understand the Housing Policy.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

# Homebuyer Survey

Thank you for your interest in our Affordable Housing Program. Our desire is to build quality, affordable housing in Knoxville area. Please help us design our program to best meet your needs by completing the questions below.

How many live in your household? \_\_\_\_

Your total monthly Household income: \_\_\_\_ less than \$2,000 \_\_\_\_ over \$2,000

How much per month do you think you could afford for a new home? \$ \_\_\_\_\_

***If you were interested in a new home:***

How many bedrooms would you need? \_\_\_\_ How many bathrooms? \_\_\_\_

Are you more interested in \_\_\_\_ buying or \_\_\_\_ renting?

In which area or neighborhood are you most interested in living? \_\_\_\_\_

In which area or neighborhood are you not willing to live? \_\_\_\_\_

How important are the following to you?

On a scale of 1-5 with 1=Not Important and 5= Very Important

\_\_\_\_ Energy Efficiency

\_\_\_\_ Low maintenance materials such as vinyl siding

\_\_\_\_ Wood or synthetic wood siding (which requires painting)

\_\_\_\_ A separate dining room/area

In your living room, would you rather have carpet or durable vinyl plank (LVP)? \_\_\_\_\_

Do you know of any lots or sites we should consider? Please list, including owner if possible: \_\_\_\_\_  
\_\_\_\_\_

Other suggestions: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (optional) or your zip code