Cleveland Housing Network
HOMEWARD PROGRAM

Thank you for requesting information about Cleveland Housing Network’s Homeward Program. Homebuying is not only one of the best investments you will make in your lifetime, it is one of the most rewarding.

Attached you will find an application, a brochure describing the Homeward Program, and a current list of homes available for sale. Completing and returning the application will enable us to pre-qualify you to determine your ability to buy a Homeward home. It will also enable us to include you in our mailing list so you will receive notices of houses for sale, open houses, and classes designed to assist you in your dream of homeownership.

If you do not qualify to buy a home at this time, CHN will identify for you the issues that need to be addressed, and we are ready to assist you in working through those issues.

Before returning the application, please be sure to include COPIES of the following documents:

✓ Federal Income tax returns (Form 1040) for the last two years
✓ W-2’s for the last 2 years
✓ 3 Recent bank statements
✓ Complete bankruptcy papers including a list of creditors included in the bankruptcy and discharge papers
✓ Child support papers, including court order and 4 recent statements
✓ Income verification- all that applies, including pay stubs, 1099’s, Social Security, etc.
✓ Divorce Papers
✓ Signed gift letter (if applicable)

Please be sure to include COPIES ONLY – we cannot be responsible for returning originals to you.

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT THESE DOCUMENTS!

The application process takes approximately 7-10 business days from the date we receive it. You may inquire about the status of your application if you have not heard from someone within that timeframe. Please direct your calls to Andrea Fuller, Lending Assistant, at 216-574-7100.
Cleveland Housing Network
HOMEWARD APPLICATION

PERSONAL
Applicant: ___________________________________________ Social Security #: _____ / _____ / _____
   Last    First    Middle
Co-Applicant: ___________________________________________ Social Security #: _____ / _____ / _____
   Last    First    Middle
Present Address: _______________________________________
   Street    City    State    Zip Code
Telephone #: (____)_________________ Other #: (____)_________________

Current Rent/Mortgage Payment $__________ # of Person in household: Adults _____ Children _____

Please Check One: □ Renter □ Public Housing □ Section 8 □ Living with Family □ Other

EMPLOYMENT
Applicant:
Current Employment: ___________________________________________ # of Years: _____
Address: ___________________________________________
   Street    City    State    Zip Code
Telephone #: (____)_________________ ext.______
   May we contact you there? □ Yes □ No

Co-Applicant:
Current Employment: ___________________________________________ # of Years: _____
Address: ___________________________________________
   Street    City    State    Zip Code
Telephone #: (____)_________________ ext.______
   May we contact you there? □ Yes □ No

INCOME
Applicant:
Yearly Gross Income: $______________
Add’l Gross Yearly Income: $______________
Total Yearly Gross Income: $______________
Pay Period: □ Weekly □ Bi-Weekly □ Semi-Monthly □ Monthly

Co-Applicant:
Yearly Gross Income: $______________
Add’l Gross Yearly Income: $______________
Total Yearly Gross Income: $______________
Pay Period: □ Weekly □ Bi-Weekly □ Semi-Monthly □ Monthly

Income Source: check all that apply and be sure to include documentation from each income source: □ Social Security □ ADC □ Workers Comp □ Employment □ Self Employment □ Pension □ Day Care □ Disability □ Housing Allowance □ Child Support □ Other (please explain: ____________________________

Child support: Do you pay child support? □ YES □ NO
   If yes, how much do you pay per month? ________________________
Is your child support deducted from your paycheck? □ YES □ NO
   If yes, how much is deducted per pay? ________________________
HOUSING NEEDS

# of Bedrooms: ________________  Neighborhood Preferred: _____________________________
Specific Property: ________________________________________________________________

SAVINGS
Source and amount used for downpayment

Banking Institution: ______________________  Checking: $ ___  Savings: $ ___
Banking Institution: ______________________  Checking: $ ___  Savings: $ ___
Banking Institution: ______________________  IRA: $ ___  Other: $ ___
Credit Union: ____________________________  Checking: $ ___  Savings: $ ___
401K: $ ____________________________

LOANS
(Current personal loans, credit cards(s), auto loans, student loans)

<table>
<thead>
<tr>
<th>Type of Loan</th>
<th>Lender</th>
<th>Monthly Payments</th>
<th>Balance Due</th>
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<tbody>
<tr>
<td>Loan #1</td>
<td>$ _____</td>
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<tr>
<td>Loan #2</td>
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<td>Loan #3</td>
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</tbody>
</table>

VERIFICATION

I authorize Cleveland Housing Network Homeward Program to check and verify my credit report information and to obtain and or release any information (including documentation and other materials) pertinent to eligibility for or participation in the Homeward Program.

Signature of Applicant ____________________________  Date ______________
Signature of Co-Applicant ____________________________  Date ______________

Please attach a copy of your tax returns from the last two years, including W2's and 4 recent paystubs. PLEASE REMEMBER TO FILL OUT ALL NECESSARY INFORMATION. WITHOUT THIS INFORMATION, YOUR APPLICATION CANNOT BE PROCESSED. Send completed application, along with COPIES of required documentation to:

Cleveland Housing Network
2999 Payne Ave – Suite #306, Cleveland, Ohio 44114
(216) 574-7100 / Fax (216) 574-7130

How did you hear about our agency?

☐ Advertisement - Source: ____________________________  ☐ Referral - Source: ____________________________

Optional Demographic Information: Please check all that apply:

☐ First-time homebuyer?  ☐ Yes  ☐ No  ☐ First generation homebuyer?  ☐ Yes  ☐ No
☐ Person(s) in household age 62 or over  ☐ Disabled person(s) in household  ☐ Single female Head of household with children

Please Check one:

☐ White non-Hispanic  ☐ Black non-Hispanic  ☐ Hispanic  ☐ Asian/Pacific Islander  ☐ American Indian/Alaskan Native

*Demographic information is optional. CHN collects demographic information for the purpose of reporting to funders. All personal information is kept strictly confidential.