

DO NOT WRITE IN THIS BOX Official Use Only	:
:Date Received	:
Pre-Qualified Yes No	:

BELOW MARKET PRICE (BMP) HOME PROGRAM First Time Homebuyer Application

Answer all questions fully and accurately. If a question does not apply to you, type or print "N/A." If the answer is none, type or print "NONE".

SECTION 1: Applicant Information

	Primary Applicant Information	Co-Applicant
	Timery Applicant information	(person buying with applicant)
		(person buying with applicant)
First and Last Name		
Email Address (PRINT CLEARLY)		
Home Phone / Cell Phone		
Home Address/Apt. Number		
City/State/Zip		
Employer Name		
Employer Address		
City/State/Zip/Work Phone		
Occupation		
Length of Current Employment		
Length of Previous Employment		
(if current employment is less than 2 years)		

SECTION 2: Household Size (Describe household make-up. If children are full time students, please state by their names)

Name of Adults (include yourself)	Relationship	Names of Children	Age	Relationship	
	Self				
					Total
					Household
TOTAL ADULTS		TOTAL CHILDR	REN		

SECTION 3: Funds Available to Purchase (will be verified by a lender)

	Applicant	Co-Applicant
Total Amount in your Checking Account(s)	\$	\$
Total Amount in your Savings Account(s)	\$	\$
Amount can be used from Retirement Funds	\$	\$
Gift Funds Available	\$	\$
Other Funds	\$	\$
TOTAL CASH AND ASSETS	\$	\$

TOTAL COMBINED CASH & ASSETS

\$

SECTION 4: Income (Require income for anyone 18 years or older-unless the person is a full-time student)

MONTHLY INCOME: <u>Bi-weekly Paycheck Formula Sample</u> (Average paycheck stubs provided x26) /divided by 12	Applicant	Co-Applicant	Adult / Child (18+)	Adult or Child (18+)
Gross Monthly Income				
Average Monthly Overtime				
2nd Job/Part-Time/Seasonal				
Commissions (1099s)				
Bonuses/Tips				
Dividends/Interest Earnings				
Business or Investment Earnings				
Pension/Social Security Benefits				
Veterans Administration Benefits				
Unemployment Compensation				
Public Assistance				
Alimony, Child Support, or Separate Maintenance Income				
Other (explain)				
Total Gross Monthly Income (sum of all income sources)	Вох А	Вох В	Вох С	Box D
Gross Annual Income	Box A x 12 =	Box B x 12 =	Box C x 12=	Box D x 12=
				
OTAL COMBINED <u>GROSS</u> ANNUAL IN	ісоме	\$		

SECTION 5: Monthly Debt

	Applicant	Co-Applicant
Car Payment(s)	\$	\$
Other installment loan payments with ten or more monthly payments remaining (e.g. furniture, appliances, etc.)	\$	\$
Average Monthly Credit Card Payment Total	\$	\$
Student Loan Payment	\$	\$
Medical/Health Care Payment(s)	\$	\$
Alimony/Child Support Payments	\$	\$
Other Debts	\$	\$
TOTAL MONTHLY DEBT PAYMENTS	\$	\$

TOTAL COMBINED MONTHLY DEBT PAYMENTS

SECTION 6: Credit History

		Applicant			C	o-Applican	t
Have you ever had a bankruptcy?	Yes	What Year?		Yes	W	hat Year?	
	No			No			
Do you have collection accounts? If	Yes	No		Yes		No	
yes, which type?	Medic	al Tax	Credit	N	∕ledical	Tax	Credit
	Liens	Cards		L	iens	Cards	
	Please expla	in:		Please	explain:		
Are any of your accounts late?	30 days?	60 days?	90 days?	***	30 days?	60 days?	90 days?
Do you have any other credit issues that you know of? (collection accounts, charge-offs, tax liens, judgments, repossessions, foreclosures, or numerous late payments?	Yes If Yes, please	No e explain:		Yes If Yes,	please exp	No blain:	

SECTION 7: Qualifications

	Applicant	Co-Applicant
Can you certify that you have not owned a home in the last three calendar years?	Yes	Yes
	No	No
Do you currently live or work in Fremont?	Yes	Yes
Live in Fremont: An eligible household will be determined to live within the city if the applicant resides at a residential address that is physically located within the current incorporated area of the city of Fremont. The city may require applicants to submit a driver license, voter registration. Work in Fremont: An eligible household will be determined to work within the city if the applicant is working at least 20 hours or more per week within the incorporated area of the city. This includes applicants who have been hired or have received bona fide work offered in the city. Employment must be by an employer that pays business tax in Fremont, through operation of a city-based business that pays business tax in Fremont. Working in the city does not include self-employment consisting solely of operating a business entity established solely for the purposes of investment in a rental property.	No	No

Certification

I/we certify that the information submitted is true and correct to the best of my/our knowledge, and a	ny
misrepresentation is cause to prohibit my participation in any of the City's programs.	

Applicant's Name (please print)	Signature	Date
	 Signature	