



**DON'T SEND APPLICATION UNTIL YOU HAVE ALL ATTACHMENTS THAT APPLY TO YOU AND APPLICATION COMPLETED.**

**COPIES ONLY, WE WILLN'T RETURN ORIGINALS IF YOU GIVE THEM TO US**

**DO NOT MAKE COPIES DOUBLE SIDED**

**YOU MAY MAIL OR DROP OFF YOUR APPLICATION AT OUR OFFICE**

**YOU WILL BE CONTACTED AFTER YOUR APPLICATION HAS BEEN REVIEWED.**

**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

- ❖ Pay stubs for the most recent month for everyone in the household over 18 years old that works part-time and/or full-time, even if they are not going to be on the loan.
- ❖ If anyone in the household receives Social Security, SSI, or Disability, please provide evidence of the amount and the time from you will receive.
- ❖ Copy of any court ordered child support, will except print out of payments from the DCSE website.
- ❖ Copy of most recent bank statement for the past 3 months for all Checking and Savings accounts, include all pages.
- ❖ Copy of Federal Tax Return for 2020 and 2019 with W2's. If self-employed we will need three years of Federal Tax Return.

*(If you do not have all two-(2) years, please contact the IRS @ 1-800-829-1040  
Request Tax Letter 1722 or a printout covering the tax year you are missing)*

- ❖ \$28.00 check made out to Blue Ridge Housing Network, Inc. for an in-file credit report (soft pull). If your Lender has printed one for you and it is less than 30 days old, we will except that.

134-A Peyton Street  
Front Royal, VA 22630  
Phone: (540) 622-2711

**Client 1 Information**

First Name: \_\_\_\_\_

SSN: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

# of Dependents # \_\_\_\_\_

# Years of School \_\_\_\_\_

# \_\_\_\_\_

Date of Birth \_\_\_\_\_

/ / \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Marital Status:      Single      Married

\*If separated, we will need a copy of agreement

Email address \_\_\_\_\_

**Present Address**

Present Address: \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Own / Rent? \_\_\_\_\_

Years in Residence \_\_\_\_\_

**Former Address**

(If residing at present address less than 2 years)

Former Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Own / Rent? \_\_\_\_\_

Years in Residence \_\_\_\_\_

**Income Information**

Gross Monthly Income: \_\_\_\_\_

When did you start this job? \_\_\_\_\_

Do you get paid:     Weekly     Every 2 weeks

twice a month     monthly?

Child Support / Alimony Income: \_\_\_\_\_ Self Employed Income: \_\_\_\_\_

Social Security / Disability Income: \_\_\_\_\_

Bank Interest &amp; Dividend Income: \_\_\_\_\_ Gift Income: \_\_\_\_\_

**PLEASE FILL THIS PAGE OUT ONLY IF YOU ARE GOING TO BE ON THE LOAN**

**Client 2 Information**

First Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Middle Initial: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_ # of Dependents # \_\_\_\_\_

Last Name: \_\_\_\_\_ # Years of School \_\_\_\_\_ Date of Birth \_\_\_\_\_  
# \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Marital Status (Single – Married – Separated – Divorced) \_\_\_\_\_ Email address \_\_\_\_\_  
\*If separated, we will need a copy of agreement \_\_\_\_\_

**Present Address**

Present Address: \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Own / Rent? \_\_\_\_\_ Years in Residence \_\_\_\_\_

**Former Address**

(If residing at present address less than 2 years)

Former Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Own / Rent? \_\_\_\_\_ Years in Residence \_\_\_\_\_

**Income Information**

Gross Monthly Income: \_\_\_\_\_ When did you start this job? \_\_\_\_\_

Do you get paid: Weekly Every 2 weeks twice a month monthly?

Child Support / Alimony Income: \_\_\_\_\_ Self Employed Income: \_\_\_\_\_

Social Security / Disability Income: \_\_\_\_\_

Bank Interest & Dividend Income: \_\_\_\_\_ Gift Income: \_\_\_\_\_

**PLEASE FILL THIS PAGE OUT FOR EVERYONE IN THE HOUSEHOLD THAT HAS INCOME AND IS NOT GOING TO BE ON THE LOAN**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_ Self Employed Income: \_\_\_\_\_

Child Support / Alimony Income: \_\_\_\_\_

Social Security / Disability Income: \_\_\_\_\_

Bank Interest & Dividend Income: \_\_\_\_\_ Gift Income: \_\_\_\_\_

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First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_ Self Employed Income: \_\_\_\_\_

Child Support / Alimony Income: \_\_\_\_\_

Social Security / Disability Income: \_\_\_\_\_

Bank Interest & Dividend Income: \_\_\_\_\_ Gift Income: \_\_\_\_\_

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First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_ Self Employed Income: \_\_\_\_\_

Child Support / Alimony Income: \_\_\_\_\_

Social Security / Disability Income: \_\_\_\_\_

Bank Interest & Dividend Income: \_\_\_\_\_ Gift Income: \_\_\_\_\_

**Present Housing Expense** (combine client 1 and client 2)

Current Rent: \_\_\_\_\_

Do you currently live in subsidize housing? (based on income)    Yes         No

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**Monthly Debt** (not to include food, clothes, utilities, daycare, etc.) (Combine client 1 and client 2)

Car Payment: \_\_\_\_\_                      Loan Payment: \_\_\_\_\_

Credit Card Payment: \_\_\_\_\_              Student Loan: \_\_\_\_\_

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

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**Government Reporting**

Ethnicity of Head of Household: (please circle one)

Not Hispanic / Latino

Hispanic / Latino

Race of Head of Household:

**Single Race:**

- White/Caucasian \_\_\_\_\_
- Black/African American \_\_\_\_\_
- American Indian / Alaska Native \_\_\_\_\_
- Asian \_\_\_\_\_
- Native Hawaiian / Other Pacific Islander \_\_\_\_\_

**Multi-Race:**

- Black/African American and White \_\_\_\_\_
  - American Indian / Alaska Native and White \_\_\_\_\_
  - Asian and White \_\_\_\_\_
  - American Indian / Alaska Native and Black \_\_\_\_\_
  - Asian and Black/African American \_\_\_\_\_
  - Other multiple races \_\_\_\_\_
-

**Liquid Assets**

Do you have a Savings Account? \_\_\_\_\_ If yes, how much is your account? \_\_\_\_\_

Do you have any stocks/bonds/money markets? \_\_\_\_\_ If yes, how much? \_\_\_\_\_

Will anyone be giving you gift of funds? \_\_\_\_\_ If yes, how much? \_\_\_\_\_

Do you have an inheritance? \_\_\_\_\_ If yes, how much? \_\_\_\_\_

County/City you wish to purchase in: \_\_\_\_\_

Cash you have available for down payment: \_\_\_\_\_

**Declarations** (please circle)**Client 1****Client 2**

Does the client intend to occupy the property as his/her primary residence?

YES NO

YES NO

Has the client had an ownership interest in a property in the last 3 years?

YES NO

YES NO

Has the client been declared bankrupt within the past 7 years?

YES NO

YES NO

Has the client had property foreclosed upon or given title or deed in lieu thereof in the past 7 years?

YES NO

YES NO

What is the client's citizenship?

US Citizen  
Perm Resident Alien  
Non-perm Res Alien

US Citizen  
Perm Resident Alien  
Non-perm Res Alien

**List all family members in house, including yourself:**

Name	Age	Do they Work?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**All adults over 18 must also be listed, even if they are not going to be on the loan!**

**How did you hear about BRHN?**

Friend \_\_\_\_\_      Loan Officer \_\_\_\_\_      Radio \_\_\_\_\_      TV \_\_\_\_\_  
 Realtor \_\_\_\_\_      Newspaper \_\_\_\_\_      Website \_\_\_\_\_      Other \_\_\_\_\_

.....

I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, et seq.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## MONTHLY SPENDING PLAN

**Enter what you are currently spending on a monthly basis**

Indicate # of people in household:

Adults \_\_\_\_\_ Children \_\_\_\_\_

### NET MONTHLY INCOME

Source 1 \_\_\_\_\_  
 Source 2 \_\_\_\_\_  
 Other Income \_\_\_\_\_  
**Total Income (A)** \_\_\_\_\_

### FIXED EXPENSES

Rent \_\_\_\_\_  
 Electric \_\_\_\_\_  
 Gas/Oil \_\_\_\_\_  
 Water/Sewer \_\_\_\_\_  
 Telephone (basic) \_\_\_\_\_  
     Long distance \_\_\_\_\_  
     Cellular \_\_\_\_\_  
 Trash pickup \_\_\_\_\_  
 Cable/Internet \_\_\_\_\_  
 Auto payment(s) \_\_\_\_\_  
 Auto Insurance \_\_\_\_\_  
 Life Insurance \_\_\_\_\_  
 Renter Insurance \_\_\_\_\_  
 Child Support/Alimony \_\_\_\_\_  
 Medical Insurance \_\_\_\_\_  
 Child Care \_\_\_\_\_  
 Other \_\_\_\_\_  
**Total (B)** \_\_\_\_\_

### CREDITOR PAYMENTS

Installment Loans \_\_\_\_\_  
 Credit Card Payments \_\_\_\_\_  
 \_\_\_\_\_  
**Total Payments (C)** \_\_\_\_\_

### FLEXIBLE EXPENSES

Saving \_\_\_\_\_  
 Groceries \_\_\_\_\_  
 Lunch (work / school) \_\_\_\_\_  
 Eating out \_\_\_\_\_  
 Entertainment / Hobbies \_\_\_\_\_  
 Laundry / Dry Cleaning \_\_\_\_\_  
 Cleaning Supplies \_\_\_\_\_  
 Clothing \_\_\_\_\_  
 Gasoline / Bus / Taxi \_\_\_\_\_  
 Newspaper / Magazine \_\_\_\_\_  
 Alcohol / Cigarettes \_\_\_\_\_  
 Church / Charity \_\_\_\_\_  
 Tuition / Books \_\_\_\_\_  
 Barber / Beauty Shop \_\_\_\_\_  
 Auto Maintenance \_\_\_\_\_  
 House Maintenance \_\_\_\_\_  
 Doctor / Dentist \_\_\_\_\_  
 Prescriptions \_\_\_\_\_  
 Pets \_\_\_\_\_  
 Parking / Tolls \_\_\_\_\_  
 Lottery / Bingo \_\_\_\_\_  
 Other \_\_\_\_\_  
**Total (D)** \_\_\_\_\_

### EXPENSES

FIXED (B) \_\_\_\_\_  
 CREDITOR (C) \_\_\_\_\_  
 FLEXIBLE (D) \_\_\_\_\_  
**TOTAL EXPENSES (E)** \_\_\_\_\_

Subtract Expenses from Income (A – E):

TOTAL INCOME (A) \_\_\_\_\_  
 TOTAL EXPENSES (E) \_\_\_\_\_  
**DIFFERENCE + or -** \_\_\_\_\_

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Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**CERTIFICATION:** I hereby certify that I have reviewed the above budget with the application(s) and concur that it is reasonable.

Lender or Counselor Signature: \_\_\_\_\_





### **Credit Report Authorization**

I (We) hereby give permission to Blue Ridge Housing Network, Inc. (BRHN) to pull my (our) credit report for the purposes of evaluating my financial situation.

I understand that this credit report will be held in my file by BRHN and the information will not be disclosed to anyone without my written consent.

I further understand that BRHN will not be held responsible for information received in this report.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date