



Blue Ridge Housing Network, Inc.

Lorie Noakes

134-A Peyton Street

Front Royal, VA 22630

E-mail: lnoakes@brhn.org

Phone: (540) 622-2711 Fax: (540) 622-2715

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 2018 and 2017 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)*

- ❖ \$25.00 check made out to Blue Ridge Housing Network, Inc. for an in-file credit report (soft pull).

COPIES ONLY, WE ARE UNABLE TO MAKE COPIES FOR YOU
DO NOT MAKE COPIES DOUBLE SIDED

Please read through all of the application, then sign. You may mail, email or drop off the application. I will contact you for an appointment once I have reviewed your application.

**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 – 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 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: _____

First Name: _____ Last Name: _____

Gross Monthly Income: _____ Self Employed Income: _____

Child Support / Alimony Income: _____

Social Security / Disability Income: _____

Bank Interest & Dividend Income: _____ Gift Income: _____

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

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: _____

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

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 - _____

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.

Name

Date

Name

Date