

**OZARK FOOTHILLS DEVELOPMENT ASSOCIATION SELF-HELP HOUSING PRE-APPLICATION
(THIS APPLICATION DOES NOT DETERMINE ELIGIBILITY)**

APPLICANT INFORMATION

Name: _____ Social Security Number _____ Gender M _____ F _____

Date of birth _____ Number of Dependants _____ E-mail address _____ Race (Optional) _____

Present address _____

Home Phone _____ Cell phone _____ How long have you lived there? _____

Landlords name _____ Address/Phone _____

Current rent \$ _____ Est. Utilities \$ _____ Will you sign loan papers? _____

If you have lived at your present address less than two (2) years, list previous address _____

Landlord _____ Address/Phone _____

Employer Name _____ Position _____ Years Employed _____

Address (City, State, Zip & Phone) _____

Contact Person for Emp. Verification _____ Monthly Gross Income \$ _____

Do you receive: Child Support, Alimony, Separate Maintenance? _____ Monthly Amount \$ _____

CO-APPLICANT INFORMATION

Name: _____ Social Security Number _____ Gender M _____ F _____

Date of birth _____ Number of Dependants _____ E-mail address _____ Race (Optional) _____

Present address _____

Home Phone _____ Cell phone _____ How long have you lived there? _____

Landlords name _____ Address/Phone _____

Current rent \$ _____ Est. Utilities \$ _____ Will you sign loan papers? _____

If you have lived at your present address less than two (2) years, list previous address _____

Landlord _____ Address/Phone _____

Employer Name _____ Position _____ Years employed _____

Address (City, State, Zip & Phone) _____

Contact Person for Emp. Verification _____ Monthly Gross Income\$ _____

Do you receive: Child Support, Alimony, Separate Maintenance? _____ Monthly Amount \$ _____

We need a two (2) year employment history. If you have been at your present job less than two (2) years, please provide previous employment history.

Employer _____ Address _____ Phone _____

Employer _____ Address _____ Phone _____

We need a two (2) year resident history. If you have lived at your present address for less than two (2) years, please provide your previous resident history that has not been listed above.

Address _____ Landlord _____ Phone _____

Landlord Address _____ Rent paid _____ Est Utilities _____

Address _____ Landlord _____ Phone _____

Landlord Address _____ Rent Paid _____ Est. Utilities _____

Please provide any information that you think will help your application: _____

Have you ever filed for Bankruptcy? _____ When? _____ Discharge Date _____

Are you aware of any Court judgements against you? _____ If so, what amount \$ _____

Area of Poplar Bluff you would like to build your home _____

How did you here about Self Help Housing? Newspaper__ TV Ad__ Brochure__ Friend / Relative__ Other__

FOR SHH ONLY: App. Rc'vd _____ By: _____ Application Taken: In Person, By Phone, Dropped-Off

Date sent to USDA ___ / ___ / ___ By: Fax__ Email__ Mail__

STATEMENT OF COMMITMENT/INTEREST

Are you willing to work in a group to help others build their homes and have them help you?

YES NO

Are you willing to build your home on property in close proximity to other Self-Help homes?

YES NO

Will you and other family members be able to work a minimum of 25 hours per week during the construction of the groups' homes?

YES NO

Are you or other family members physically able to do light construction work?

YES NO

Do you have reliable transportation to get to and from the building sites?

YES NO

Are you able to provide consistent child care for your children while building the homes?

YES NO

Do you have any special building skills that could be utilized during the homes construction?

YES NO

If Yes, explain _____

It is mandatory that you, and a co-signer if applicable, attend Homeownership Counseling Meetings. Is this something you are willing to do?

YES NO

What is the maximum house payment per month that you feel like you can pay ?

\$ _____

Sign & Date

Sign & Date