

## Housing Credit Program Applicant Questionnaire

### Household Information

List all household members that are applying to live in this apartment with you.

Name <i>First, Middle Initial, Last</i>	Relationship to Head of Household	M/F	Social Security Number	Age	Birth Date <i>Month, Date, Year</i>

**Current Address:** \_\_\_\_\_  
\_\_\_\_\_

**Daytime Phone:** \_\_\_\_\_ **Evening Phone:** \_\_\_\_\_

**How did you find out about the Seaway Lofts?** Community Development Office

YES      NO

- 1. Do you expect any additions to the household within the next twelve months?**  
 Name & Relationship: \_\_\_\_\_  
 Explanation: \_\_\_\_\_
- 2. Is there anyone living with you or are you living with anyone now who won't be living with you at this property?**  
 Name & Relationship: \_\_\_\_\_  
 Explanation: \_\_\_\_\_
- 3. Do you have full custody of your child(ren)?** *(If no, obtain proof of amount of time child{ren} will be living in unit.)*  
 Explanation: \_\_\_\_\_
- 4. Are there any absent household members who under normal conditions would live with you?** *(For example, a spouse away in the military.)*  
 Explanation: \_\_\_\_\_
- 5. Does your household have or anticipate having any pets other than those used as service animals?**

### Emergency Contact

List someone in the area that is not already on the application.

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Years Known:** \_\_\_\_\_



## Rental History

YES

NO

6. Have you or any one else named on this application filed for bankruptcy?  
Explanation: \_\_\_\_\_
7. Have you or any one else named on this application been convicted of a felony?  
Explanation: \_\_\_\_\_
8. Have you or any one else named on this application been convicted for dealing or manufacturing illegal drugs?  
Explanation: \_\_\_\_\_
9. Have you or any one else named on this application been convicted of property damage?  
Explanation: \_\_\_\_\_
10. Have you or any one else named on this application been evicted from a rental unit of any type including an apartment, home, mobile home or trailer?  
Explanation: \_\_\_\_\_

## Housing References

List the past THREE years of housing references. (If additional space is required, use the back of this page.)

	<u>Landlord's Name/Address</u>	<u>Your Address</u>	<u>Own/Rent</u>	<u>Dates</u>
Name:	_____	_____	Own <input type="radio"/>	From: _____
Address:	_____	_____	Rent <input type="radio"/>	To: _____
Phone:	( ) _____	_____		
Name:	_____	_____	Own <input type="radio"/>	From: _____
Address:	_____	_____	Rent <input type="radio"/>	To: _____
Phone:	( ) _____	_____		
Name:	_____	_____	Own <input type="radio"/>	From: _____
Address:	_____	_____	Rent <input type="radio"/>	To: _____
Phone:	( ) _____	_____		

## Personal Reference

List a personal reference other than a relative.

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

## Vehicle Identification

List vehicle information for all vehicles that are owned or operated by any household member.

	<u>Tag/License Plate #</u>	<u>State Issued</u>	<u>Make/Model/Year</u>
Vehicle #1:	_____	_____	_____
Vehicle #2:	_____	_____	_____

# Income Information

Earned income is counted for anyone 18 or older (unless legally emancipated). However, if the income is unearned income such as a grant or benefit, it is counted for all household members including minors.

**Include all income anticipated for the next 12 months.  
Do YOU or ANYONE in your household receive OR expect to receive income from:**

**YES**                      **NO**

                       
(If yes, use EMC #01)

**11. Employment wages or salaries?** *(Include overtime, tips, bonuses, commissions and payments received in cash.)*

<u>Household Member</u>	<u>Name of Company</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____

                       
(If yes, use EMC #02)

**12. Self-employment?** *(Include overtime, tips, bonuses, commissions and payments received in cash.)*

<u>Household Member</u>	<u>Type of Business</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____

                       
(If yes, use, EMC #03)

**13. Regular pay as a member of the Armed Forces/Military?**

<u>Household Member</u>	<u>Base Name &amp; Branch</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____

                       
(EMC #04)

**14. Unemployment benefits or workman's compensation?**

<u>Household Member</u>	<u>Case Worker</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____

                       
(If yes, use EMC #05)

**15. Public Assistance, General Relief, AFDC or Temporary Assistance for Needy Families (TANF)?**

<u>Household Member</u>	<u>Case Worker</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____

                       
(If yes, use EMC #06)                      (If no, use EMC #19)

**16. (a) Child Support or Alimony?**

*(We must count court-ordered support whether or not it is received unless all reasonable legal action has been taken to remedy. We must also count support that is not court-ordered rather received directly from payer.)*

<u>Household Member</u>	<u>Payer</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____

**(b) How is the support received?** *(Check all that apply)*

- Child Support Enforcement Agency**      *Name of Agency:* \_\_\_\_\_
- Court of Law**                                      *Name of Court:* \_\_\_\_\_
- Directly from Individual**                      *Name of Person:* \_\_\_\_\_
- Other**    *Explain:* \_\_\_\_\_

                       
(If yes, obtain proof of legal action.)

**(c) If support/alimony is court-ordered but not received, are you taking legal action to remedy?**

Explanation: \_\_\_\_\_

                       
(If yes, use EMC #07)

**17. Regular benefits from the Social Security Administration including Social Security, SSI or SSI-D?**

<u>Household Member</u>	<u>Case Worker</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____



## Asset Information:

Include all assets held and the income derived from the asset. INCLUDE ALL ASSETS HELD BY ALL HOUSEHOLD MEMBERS INCLUDING MINORS.

**Do YOU or ANYONE in your household hold:**

<p><b><u>YES</u></b>      <b><u>NO</u></b></p> <p><input type="radio"/>      <input type="radio"/></p> <p>(if yes, use EMC #09)</p>	<p><b>27. Checking or savings account?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Financial Institute</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Financial Institute</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #09)</p>	<p><b>28. CDs, money market accounts or treasury bills?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Financial Institute</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Financial Institute</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #10)</p>	<p><b>29. Stocks, bonds or securities</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Company or Broker</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Company or Broker</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(EMC #09)</p>	<p><b>30. Trust funds?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Financial Institute</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Financial Institute</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #55 for Pensions, VA Benefits or other retirement benefits. Use EMC #56 for IRAs, 401(k), 403(b), or other retirement savings.)</p>	<p><b>31. Pensions, IRAs, Keogh or other retirement accounts?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Financial Institute</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Financial Institute</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #57)</p>	<p><b>32. Whole life insurance policy?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Insurance Carrier</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Insurance Carrier</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #10)</p>	<p><b>33. Real estate, rental property, land contracts/contract for deeds or other real estate holdings?</b> <i>(This includes your personal residence, mobile homes, vacant land, farms, vacation homes or commercial property.)</i></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Address of Property</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Amount</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Address of Property</u></b>	<b><u>Amount</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #10)</p>	<p><b>34. Personal property held as an investment?</b> <i>(This includes paintings, coin or stamp collections, artwork, collector or show cars, and antiques. This does not include your personal belongings such as your car, furniture or clothing.)</i></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Item</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Value</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Item</u></b>	<b><u>Value</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #13)</p>	<p><b>35. A safe deposit box?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"><b><u>Household Member</u></b></td> <td style="width: 33%; text-align: center;"><b><u>Financial Institute</u></b></td> <td style="width: 34%; text-align: center;"><b><u>Value of Items</u></b></td> </tr> <tr> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> <td style="border-bottom: 1px solid black; height: 20px;"></td> </tr> </table>	<b><u>Household Member</u></b>	<b><u>Financial Institute</u></b>	<b><u>Value of Items</u></b>			
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<p><input type="radio"/>      <input type="radio"/></p> <p>(If yes, use EMC #11)</p>	<p><b>36. Have you or any other household member disposed of or given away any asset(s) for LESS than fair market value within the past 2 years?</b></p>	<p>Household Member: _____ Amount: _____</p> <p>Explanation: _____</p>						

## Applicant Status

The following questions pertain to specific eligibility requirements of the Housing Credit Program.

**YES**                      **NO**

                       
(If yes, use EMC #20)

**37. Are you or any other ADULT household members claiming zero income?**

Household Member: \_\_\_\_\_  
Explanation: \_\_\_\_\_

**YES**                      **NO**

                       
(If yes, use both  
EMC #12 & #18)

*Unsure how to combine the  
different student rules on Tax  
Credit properties coupled with  
HUD and/or RD? Refer EMC 60  
for guidance.*

**38. Are you or any other household members (INCLUDING MINORS) currently a full-time student or expect to be one in the next 12 months?**

Household Member(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

                       
(If yes, use both  
EMC #15 & #21)

**39. Will you or any ADULT household member require a live-in care attendant to live independently?**

Name of Attendant: \_\_\_\_\_  
Relationship (if any): \_\_\_\_\_

                       
(If yes, verify through  
applicable agency)

**40. Is your household currently receiving Section 8 rental assistance?**

Name of Agency: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

                       
(If yes, verify through  
applicable agency)

**41. Will your household be eligible or are you applying to receive Section 8 rental assistance in the next 12 months?**

Name of Agency: \_\_\_\_\_  
Expected Date: \_\_\_\_\_  
Contact Person: \_\_\_\_\_

## Signature Clause

I understand that management is relying on this information to prove my household's eligibility for the Housing Credit Program. I certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application. I also understand that such action may result in criminal penalties.

I authorize my consent to have management verify the information contained in this application for purposes of proving my eligibility for occupancy. I will provide all necessary information including source names, addresses, phone numbers, and account numbers where applicable and any other information required for expediting this process. I understand that my occupancy is contingent on meeting management's resident selection criteria and the Housing Credit Program requirements.

**All ADULT household members must sign below:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## For Office Use Only

Date of Interview: \_\_\_\_\_

Desired Apt. #: \_\_\_\_\_

Desired Move-in Date: \_\_\_\_\_

Accessible: \_\_\_\_\_

Audio/Visual: \_\_\_\_\_