



Homemaker Program Application Part 2

(to be completed by individuals/owner-occupants)

City of Knoxville
Community Development Department



Address of property: _____ CLT #: _____

APPLICANT INFORMATION

Applicant: _____

Address _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Driver's License #: _____ SS#: _____ E-Mail: _____

Co-applicant (spouse or other adult) _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Driver's License #: _____ SS#: _____ E-Mail: _____

Have you ever owned a Home? _____ If so, when? _____

Do you ___ own or ___ rent? How long have you lived at current address? _____

Previous address, if less than 5 years at present address _____

**COMPLETE LIST OF ALL THOSE WHO WILL LIVE IN THE NEW HOUSING UNIT,
INCLUDING APPLICANT:**

Name	Relation to Applicant	Age	Sex	Occupation	School/Employer
	<i>Self</i>				

Employment

Applicant's employer _____

Address _____ Phone # _____ # of years _____

Co-applicant's employer _____

Address _____ Phone # _____ # of years _____

If less than 5 years at present employer, give previous employment information on the back of this application.

Income

LIST ALL HOUSEHOLD INCOME

<u>Source</u>	<u>Amount</u>	<u>Further Explanation</u>
Applicants employment	\$ _____ per _____	_____
Co-applicants employment	\$ _____ per _____	_____
Contributions from other household members	\$ _____ per _____	_____
Other contributions	\$ _____ per _____	_____
Social Security	\$ _____ per _____	_____
SSI	\$ _____ per _____	_____
VA Benefits	\$ _____ per _____	_____
Retirement Pension	\$ _____ per _____	_____
Child Support	\$ _____ per _____	_____
Other	\$ _____ per _____	_____

Credit Information

LIST ALL DEBTS, INCLUDING CAR LOANS, FURNITURE, CREDIT CARDS, PERSONAL LOANS, ETC. USE ADDITIONAL SHEETS IF NECESSARY.

Type of Debt	Lender	Account Number	Payment	Balance

Have you ever had a home loan or a home improvement loan which resulted in foreclosure, deed in lieu of foreclosure, or judgment? _____

If yes: Property address: _____

Name & address of lender _____

Have you ever had an account turned over to a collection agency or resulted in a judgment? Yes No

If yes, state when, the reason for, and how the debt was resolved: _____

Have you ever filed bankruptcy? Yes No If yes, when? _____

ATTACH ADDITIONAL INFORMATION AS NECESSARY TO EXPLAIN PAST OR PRESENT CREDIT PROBLEMS THAT MAY APPEAR ON YOUR CREDIT REPORT.

Other Regular Monthly Expenses

Life insurance \$ _____ per month for coverage of \$ _____

Car insurance \$ _____ per month Health insurance \$ _____ per month

Medical expenses \$ _____ Food \$ _____ Phone \$ _____ Clothing \$ _____

Gas \$ _____ Savings \$ _____ Day Care \$ _____ Cable \$ _____

Other \$ _____ (explain) _____

References

List three references other than relatives. You must include complete addresses and phone numbers.

Name: _____ **Phone:** _____ Association Landlord

Address _____

Name: _____ **Phone:** _____ Association _____

Address _____

Name: _____ **Phone:** _____ Association _____

Address _____

Counseling/Training

Have you previously been involved in any pre-purchase or homeownership counseling program, credit counseling program, or economic self-sufficiency program (i.e. Operation Bootstrap, Family Self-Sufficiency, FirstHome, JOBS, etc.)? ___ Yes ___ No

If yes, please identify the program, and briefly describe your participation in the program on the back of this page.

If no, are you willing to seek this type of counseling *if* required? ___ Yes ___ No

PROJECT DESCRIPTION

What is your offering price? \$_____

If price is below fair market value or listing price, **of those properties which do not indicate "minimum"**, explain reason for reduced offer. (Example: Subsidy is needed to make project affordable and feasible; development cost will exceed fair market value. Support your reason by completing the Project Sources and Uses of Funds Statement on page 5.)

Is the parcel an unbuildable lot that will be used for additional yard space? ___Yes ___ No
If yes, list any specific plans for maintenance or improvement.

Name, address and phone number of Proposed Developer (**qualifications and experience of *proposed developer* must be attached**):

Planned development will be (*check one*) ___ new construction ___ rehabilitation of an existing structure. (**Attach a site plan and floor plan if new construction is proposed. If unavailable, these must be provided within 90 days of contract execution.**)

Briefly describe any other pertinent details of your proposed development for the parcel.

Project Sources and Uses of Funds

Uses of Funds

Property Purchase \$ _____

Construction / Renovation \$ _____

List Contingencies (examples: set aside dollars for unplanned or increased cost of items that may occur)
_____ \$ _____

List Soft Costs (examples: developer fees, site design, permits, taxes, insurance, closing costs, etc.)
_____ \$ _____

Other (examples: mowing, utilities, etc.)
_____ \$ _____

Total Uses of Funds \$ _____

Total Use should equal Total Source

Sources of Funds

Purchaser Investment \$ _____

Loan Source (From: _____) \$ _____

Loan Source (From: _____) \$ _____

Other _____ \$ _____

Other _____ \$ _____

Total Source of Funds \$ _____

Information for government monitoring purposes

Applicant:

- Male Female
- American Indian/Alaskan Native
- Asian Pacific Islander
- Hispanic
- Black
- White
- Other (specify)

Co-Applicant:

- Male Female
- American Indian/Alaskan Native
- Asian Pacific Islander
- Hispanic
- Black
- White
- Other (specify)

I DO NOT WISH TO SUPPLY THIS INFORMATION
Initials: _____

I DO NOT WISH TO SUPPLY THIS INFORMATION
Initials: _____

I (we) certify that all information in this application, and all information furnished in support of this application, is true and complete to the best of my (our) knowledge and belief. I (we) authorize verification of any information, including verification of my (our) credit report.

Signature of Applicant

Date

Signature of Co-Applicant

Date

NOTE: Applications will only be accepted for properties on the Homemakers List at the date of application. Due to the fact that competing proposals may be received at the same Homemakers Committee meeting please ensure your proposed price and development plan is your "best and final" offer for purchase. Incomplete applications may be accepted, HOWEVER keep in mind in the event of competing applications the "best and final" offer for purchase will receive priority.

Return to: City of Knoxville
Community Development Department
ATTN: Homemakers Program
P.O. Box 1631
Knoxville, TN 37901

