

12. Credit: Check all that apply

- I have previously filed bankruptcy
 - I have previously owned or currently own a home
 - I have previously been foreclosed on
 - I have previously sold a home in Short Sale
 - I currently have a judgment against me
- Month/Year Discharged _____
Month/Year Sold _____
Month/Year _____
Month/Year Sold _____
Explain _____

13. Are you currently pre-approved for a loan with a land trust knowledgeable lender? YES NO

Bank/Broker _____ Loan Officer _____
Amount Approved \$ _____ Phone Number _____

14. Are you currently working with a Realtor who showed you the land trust home? YES NO

Name/Brokerage _____ Phone Number _____

15. The following questions due to funder eligibility requirements. Some of our funding partners require us to report the following information if it is available, in which case it may allow us to serve additional households.

Please circle Yes, No, or Prefer not to respond on each question.

A. Are you, or is anyone in your household, physically, developmentally, or mentally disabled?
YES NO Prefer not to respond

B. Are you, or is anyone in your household, recovering from physical, alcohol, or drug abuse?
YES NO Prefer not to respond

C. Are you, or is anyone in your household a person living with AIDS?
YES NO Prefer not to respond

D. Are you, or is anyone in your household a Veteran?
YES NO Prefer not to respond

E. Are you, or is anyone in your household a senior citizen (over the age of 62)?
YES NO Prefer not to respond

F. Are you a Single Parent with no domestic partner living with you?
YES – MALE SINGLE PARENT YES – FEMALE SINGLE PARENT NO

G. Marital Status: SINGLE MARRIED DOMESTIC PARTNERSHIP SEPARATED DIVORCED WIDOWED

H. Ethnicity: Circle All that Apply:
White/Caucasian Hispanic/Latino American Indian Asian Black/African American Other:

I/We certify that all information in this application, and all information furnished to support this application, is given for the purpose of obtaining affordable homeownership through West Central Communities Action, and is true and complete to the best of my/our knowledge and belief.

Signature of applicant Date

Signature of co-applicant Date

Return Completed Application to West Central MN Communities Action - Attn: Affordable Housing
320-304-3058 ext. 7214 Email: janelleb@wcmca.org 503 Hawthorne St. Suite 45, Alexandria, MN 56308