



Eligible Owner Occupied

Request to View Property

Name: _____

Current Address: _____

Cell Phone Number: _____ Home Phone Number: _____

Email Address: _____

Properties to view:

Property Address (1) _____

Property Address (2) _____

Income Information:

Self Employed: Yes _____ No _____ **CHN will require tax returns with Schedule C**

Monthly Income: \$ _____ Pay Stub Child Support Award Letter

Other Household Occupant Monthly Income: \$ _____

Number of Household Members _____

Proof of Funds:

Funds available to purchase: \$ _____ Bank Statement
 Proof of Funds letter from Bank
 401 K Statement

Source of funds: _____ Gift Letter
 Tax Return Documents

Are you related to any CHN employee or contracted employee? Yes _____ No _____

If yes, please provide the name _____

Do you currently own a home? _____ If yes, please do not proceed with request.

This document is my expressed interest in viewing the above mentioned property. I understand that this document does not guarantee me the opportunity to purchase this or any other property from the Cleveland Housing Network.

Signature: _____ Date: _____

Signature: _____ Date: _____

Office Use Only:
Time Received _____
Proof of funds Received _____
Source of funds Received _____