WCHA Homebuyer Program P.O. Box 0397 Oshkosh, WI 54903 Winnebago County Housing Authority Home Buyer Application



Please print clearly.

Applicant Name & (Maiden Name if applicable)	:		
SS#	Date of Birth:		
Co-Applicants Name & (Maiden Name if application)	able):		
SS#	Date of Birth:		
Telephone Number: Home/cell	Work		
Residence Address (Street Address)	(City/Village/Town) (County) (State) (Zip Code		
E-Mail Address (please include at least one email	il address)		
Translator name and phone number (if required)			
Disabled Household Member: Yes	No Single Parent:YesNo		
If yes, is this member the head of household?	Yes No		
Are you a U.S. Citizen or of legal alien status?	YesNo		
Racial/Ethnic Background (Check All That Appl	y)		
White	American Indian/Alaskan Native & White		
Black/African American	Asian & White		
Asian	Black/African American & White		
American Indian/Alaskan Native	American Indian/Alaskan Native & Black/African American		
Native Hawaiian/Other Pacific Islander	Balance/Other		
All family members in household (list below):	Number in household*:		

*Include all other people residing at this address or who will be living with you when you purchase a home.

Name	Age	Sex	Name	Age	Sex

• No provision of a marital property agreement (including a Statutory Individual Property Agreement pursuant to Sec. 766.587, Wis. Stats.), unilateral statement classifying income from separate property under Sec.766.59, or court decree under Sec. 766.70 adversely affects the creditor unless the creditor is furnished with a copy of the document prior to the credit transaction or has actual knowledge of its adverse provisions at the time the obligation is incurred.



INCOME AND EMPLOYMENT HISTORY

What is your TOTAL GROSS monthly househol	d income?	\$	
Indicate total income from all sources before taxe	es (clarify who is rec	eiving income if co-applicant	t):
\$SSI	\$	UNEMPLOYMEN	NT COMPENSATION
\$SOCIAL SECURITY	\$	WORKMAN'S CO	OMPENSATION
\$VETERAN'S BENEFITS	\$	CHILD SUPPOR	I/ALIMONY
\$PENSION/RETIREMENT	\$	INTEREST/DIVID	DENDS
	\$	OTHER	
(WAGES) (EMPLOYER)	(ADDRESS)	(# OF Y	EARS EMPLOYED)
\$			
\$			
\$			
\$			
Any other income or public benefits:			
ASSET INFORMATION			
Do you have a savings plan to buy a home?	Yes	_No How much?	
Household member Ban	k	Checking/Savings	Current Amount
Bank Account 1:			
Bank Account 2:			
Bank Account 3:			
Bank Account 4:			
Bank Account 5:			
Retirement / 401k / Investment / Property Owner			
Any other assets:			

CREDIT / DEBT INFORMATION

Do you feel all adults have a good credit rating?	Ye	s	No
Please Explain:			
List all loans (bank, payday, school, vehicle, home, et	c), charge accour	nts, credit cards,	judgments, or government debt:
(household member) (type of debt)	(current: Y/N)	(total owed)	(monthly requirement)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
	Total Debt:	Total I	Monthly Requirement:
Other Debt information			
CURRENT HOUSING:			
Number of years you lived at your present address?	Number o	f times moved in	the last two (2) years?
Why did you move?			
Do you live:ApartmentHous	seDu	plex What is y	our current monthly rent? \$
Are you delinquent on any utilities?Yes	No If ye	es, detail:	
If you pay your own utilities, how much per month on	n average do you	pay for all utiliti	es?
Do you consider your residence to be safe and sanitary			
Does anyone in your household currently own any rea	al estate property,	such as a house	, investment property, or cottage?
Have you ever owned a home?Yes			

HOUSING NEEDS/PREFERENCES

Realtor name and	email contact (if you have one):			
Mortgage Lender name, institution, and email contact (if you have one):				
What price range c	lo you think you can afford?	\$50,000;	\$75,000;	\$90,000+
What is the month	ly amount you are hoping to spend	l on your home:		
What cities are yo	u looking to buy in:			
What features in a	home are important to you? (Num	ber of bedrooms, garage	e, backyard, etc.) Explai	n:
	cial facilities that make a home more			
Explain:				
Where did you hea	ar about this Homebuyer Program?	,		
Are you currently	enrolled in any other Housing Pro	gram? If yes, what p	rogram?	
	share any other information you th	-		
	nily or business ties to any staff or			
Yes	No.	If yes, describe who an	d relationship:	
By signing this	s application, I/we the under	ersigned, indicate:		
	nation provided is full, true and o presentation or withholding of re	1		2
2. That I/we have information prove	e no objections to inquiries being ided herein.	g made by the Housing	Authority for the purp	pose of verifying the
3.I/we intend to	occupy the property as my/our	principal residence		

4. That all household income of any/all household members that are/will be living in the household has been disclosed.

Applicant PRINT NAME	Applicant SIGNATURE	Date
Co-Applicant PRINT NAME	Co-Applicant SIGNATURE	Date

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WINNEBAGO COUNTY HOUSING AUTHORITY HOMEBUYER PROGRAM

Fact Sheet (2015)

ELIGIBILITY

Applicants must be income eligible to qualify for homebuyer services and to receive financial assistance through the WCHA Homebuyer Program. County Median Income (CMI) for Winnebago County based on family size determines income eligibility. The household's total gross income cannot exceed 80% of CMI. A percentage the households served will be at or below 50% of CMI. Please note that eligibility numbers are subject to change annually.

<u># in family</u>	income limit
1	\$39,300
2	\$44,900
3	\$50,500
4	\$56,100
5	\$60,600
6	\$65,100
7	\$69,600

REQUIREMENTS

Applicants must be willing to commit to completing the program requirements including: completion of a homebuyer program application and any related forms needed to document eligibility; participation in 8-10 hours of homebuyer education classes; participation in financial counseling; preparing a spending/savings plan; and saving a <u>minimum</u> of \$1500 - \$3500 of personal funds to go towards the down payment/closing costs for the home they want to purchase.

Participants must be also willing to work with the homebuyer program administrator to become pre-qualified for first mortgage financing through one of the WCHA Homebuyer Program lender partners. Homebuyer classes are held regularly in several different locations throughout Winnebago County. Successful completion of the homebuyer process is required in order to access financial assistance for down payment/closing costs and rehabilitation funds used to upgrade properties purchased in conjunction with the program.

FINANCIAL ASSISTANCE

Financial assistance amount is determined on a case by case basis. Funds are allocated as a 0% deferred loan for down payment and/or rehabilitation of a property purchased through the program. Funds are generally available on a first come, first serve basis after the applicants have met all the program requirements.

Homes purchased by participants must be located in Winnebago County. Homes will be inspected to ensure that the properties meet program guidelines and/or that they can be appropriately rehabilitated so as to meet HUD's minimum housing quality standards for health and safety when rehabilitation has been completed. Funds for rehabilitation may be available through the WCHA Homebuyer Program and/or partnering organizations.

For more information contact the WCHA Homebuyer Program at 920-424-1450 or email justimm@ohawcha.org (emails should include in the title HOMEBUYER PROGRAM to prevent being filtered out). Applications are available at the Winnebago County Housing Authority office located at 600 Merritt Ave., Oshkosh and at FISC offices in Oshkosh (1600 W 20th Ave) and Menasha (1800 Appleton Rd).

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AUTHORIZATION FOR RELEASE OF INFORMATION

I/We authorize the release of information, including documentation and other materials, pertinent to eligibility for/or participation in the Winnebago County Housing Authority Homebuyer Program.

Individual Covered Inquires May be About:

Special needs housing components/assistance Credit History Family Composition Employment, Income, Pensions, and Assets Federal, State, or Local Benefits Social Security Numbers Residences and Rental History Utility Payment History

Individuals or Organizations That May Release Information:

s
ties, Shelters, Housing Providers, Etc.)
Child Support
Pension/Annuities
Utility Companies
U.S. Dept. of Veterans Affairs

Conditions:

I/We agree that photocopies of this authorization may be used for the purpose stated above. The information is for the confidential use of the WCHA Homebuyer Program staff and will be not be disclosed or released to any other agency without consent except as required or permitted by law.

Print	Signature of Applicant	Date
Print	Signature of Applicant	Date
Print	Signature of Applicant	Date