



**MORTGAGE ASSISTANCE PROGRAM (MAP) ELIGIBILITY WORKSHEET**

**APPLICANT INFORMATION**

Borrower		Co-Borrower	
Name		Name	
Address		Address	
City, State, Zip		City, State, Zip	
Date of Birth		Date of Birth	
Home Number		Home Number	
Work Number		Work Number	
Social Security		Social Security	
Email		Email	

**GROSS MONTHLY INCOME (include income for ALL persons in household)**

	Borrower	Co-Borrower	Other Household Member	Other Household Member
Gross monthly income	\$	\$	\$	\$
Overtime	\$	\$	\$	\$
Bonuses	\$	\$	\$	\$
Commissions	\$	\$	\$	\$
Dividends/Interest	\$	\$	\$	\$
Alimony/Child Support	\$	\$	\$	\$
Unemployment	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
Other monthly income	\$	\$	\$	\$
<b>TOTAL MONTHLY INCOME</b>	\$	\$	\$	\$

**PERSONS TO OCCUPY HOUSEHOLD (OTHER THAN APPLICANTS)**

Name	Age	Relationship

**TOTAL PERSONS IN HOUSEHOLD:**

Have you owned a home that was your principal residence in the last three years?     Yes     No

Are you a U.S. citizen?     Yes     No

Are you a permanent resident alien?     Yes     No

Have you attended a homebuyer seminar?     Yes     No

Are you currently working with a Realtor?     Yes     No

List areas in which you are interested in purchasing:

OFFICE USE ONLY
Qualifying Income for Household Size:
_____
<input type="checkbox"/> Income qualifies

