



Office Use Only

Date Received _____

Time Received _____

Application for Home Purchase

Personal Information

Applicant Name(s): _____

Number of persons in household: _____

Present Address: _____
Street Number & Name City State Zip Code

Occupancy status: Own Rent Number of habitable rooms: _____
Do not include bathrooms, hallways or laundry rooms.

Current monthly amount you are paying: _____
Include rent + utilities or Mortgage + taxes + insurance + utilities

Home phone: _____ Work phone: _____

Landlord: _____
Name Phone

How long have you lived at this address: _____

Previous Address: _____
Street Number & Name City State Zip Code

Property Information

Is there a specific NDC property in which you are interested? Yes No

If so, what is the address? _____

Type of home you are looking for:

Bedrooms _____ Bathrooms _____ Garage: Yes No

Exterior: Brick Vinyl Wood Misc. needs: _____

Monthly mortgage payment you think you can afford: _____

Are you working with a bank or mortgage company? Yes No

Are you pre-approved for a mortgage? Yes No Amount: _____

How did you learn about New Development Corporation? _____

I certify that to the best of my knowledge the information on this application is true and accurate, and I am aware that inaccurate information could lead to a rejection of this application and inability to attain housing in the future with the New Development Corporation. I also permit the New Development Corporation to obtain a copy of my credit report through the credit reporting agency of their choice and to verify any and all information made on this application. Furthermore, I permit the New Development Corporation to share information attained in this application process with all parties that are necessary to qualify me for occupancy in a New Development Corporation property and to call the appropriate sources to verify any and all information on this application.

Applicant Signature

Date

Second Applicant Signature

Date

Attachments: Please fill out the following forms and return with your application.

Verification of Resources

Family Composition

Verification of Earnings/Employment (Please fill out and sign the top section only. We will send it to your employer.)

Current Schedule of Income Limits:

Household Size	Income Cannot Exceed
1	\$ 52,500
2	\$ 60,000
3	\$ 67,500
4	\$ 75,000
5	\$ 81,000
6	\$ 87,000
7	\$ 93,000
8	\$ 99,000



For assistance with this application, please consult:
Michigan Commission for the Blind (1-800-292-4200)
Michigan Relay Center (1-800-649-3777)

Income limits are subject to change without notice