



Affordable Homeownership Application

Property Address You are Applying for:

Household Information:

Please list each household member that will occupy the apartment. All non-related household members must fill out separate rental applications. This application must include income and asset information for anyone who will be 18 years or older during the next 12 months.

Name First, Middle, Last	Relationship	M/F	Social Security Number	Date of Birth Month, Date, Year

Contact Information:

Current Address: _____

Home Phone: () _____ Cell Phone: () _____ Email: _____

General Information:

YES **NO**

- Have you ever filed for bankruptcy?
If no explain: _____
- Has there ever been a judgement or foreclosure against you?
If yes explain: _____
- Do you have any accounts in collections?
If yes explain: _____





4. How did you hear about this program?

Housing References: (List the past three years of housing, please use back of page if additional space is needed)

1. Current Address: _____ City: _____ State: _____ Zip: _____

From: _____ To: _____ (Month/Year) Monthly Rent Amount: \$ _____

Landlord: _____ Landlord's Phone Number: (____) _____

Landlord Email: _____ Reason for Leaving: _____

2. Previous Address: _____ City: _____ State: _____ Zip: _____

From: _____ To: _____ (Month/Year) Monthly Rent Amount: \$ _____

Landlord: _____ Landlord's Phone Number: (____) _____

Landlord Email: _____ Reason for Leaving: _____

3. Previous Address: _____ City: _____ State: _____ Zip: _____

From: _____ To: _____ (Month/Year) Monthly Rent Amount: \$ _____

Landlord: _____ Landlord's Phone Number: (____) _____

Landlord Email: _____ Reason for Leaving: _____

Emergency Contact Information:

Name/Address: _____

Phone: (____) _____ Email: _____

Relationship to Head of Household: _____

Vehicle Information:

Make: _____ Model: _____ Year: _____ Color: _____ Year: _____

Make: _____ Model: _____ Year: _____ Color: _____ Year: _____



Asset Information:

Please include all assets and the current value of each asset(s) for **ALL** household members (attach additional pages if necessary) Please refer to cwd.org/lease-to-purchase/ to see what supporting documents are required for submittal along with your application. Submission of supporting income documentation is **required** to be considered a complete application.

CIRCLE ONE		Type of Account	Establishment name & Contact	Account Number	Current Value
Y	N	Checking Acct. #1			
Y	N	Checking Acct. #2			
Y	N	Savings Acct. #1			
Y	N	Savings Acct. #2			
Y	N	Trust Account			
Y	N	Certificate of Deposits			
Y	N	Certificate of Deposits			
Y	N	Certificate of Deposits			
Y	N	Money Markets			
Y	N	Mutual Funds			
Y	N	Pension/Annuity (NOT Paid Periodically)			
Y	N	IRA/Keough/401 K			
Y	N	Stocks/Bonds			
Y	N	Real Estate (FMV – Mortgage Balance)			
Y	N	Land Contract (provide amortization schedule)			
Y	N	Personal Property/Investment			
Y	N	Cash kept at home - \$500 or more on hand, not in checking/savings account.			
Y	N	Safe Deposit Box in the past 2 years			
Y	N	Lump Sum Payment			
Y	N	Assets disposed of in the past 2 years			
Y	N	Whole Life Insurance Policy			
Y	N	Total Household Assets Less Than \$5,000			

Income Information:

Please indicate each source of ESTIMATED ANNUAL income that you receive or anticipate receiving in the next (12) months. Please refer to cwd.org/lease-to-purchase/ to see what supporting documents are required for submittal along with your application. Submission of supporting income documentation is **required** to be considered a complete application.

Circle one	Description	Family member	Source	Annual income
Y N	Employment #1			
Y N	Employment #2			
Y N	Self - Employment			
Y N	Social Security			
Y N	Public Assistance			
Y N	Veterans Benefit			
Y N	Pension/Annuity (Periodic Payments)			
Y N	Disability			
Y N	Child Support/Alimony (Court Ordered)			
Y N	Military Compensation			
Y N	Unemployment			
Y N	Rental Income/Land Contract Pmts.			
Y N	Other Income			
Y N	Lottery Payments (periodic)			
Y N	Workers Compensation			
Y N	Previous Employment			
Y N	Unemployed/Zero Income			
Y N	Recurring Gift			
Y N	Housing Authority/Section 8			



1501 WILLIAMSON STREET | MADISON WI 53703
608.256.3527 | WWW.CWD.ORG

I verify that the information in the attached application is correct and true to the best of my knowledge. I hereby authorize release of any and all information to Common Wealth Development, Inc. regarding my income, assets, credit history, and recognize that Common Wealth Development will check for any conviction record through public records.

The undersigned certify that the information and statements provided above are true and complete to the best of my/our knowledge and belief. I/We consent to release the information in order to qualify for Housing. I/We understand that providing false information or making false statements may be grounds for denial of my/our application and may subject me/us to criminal penalties. I/We agree to provide verifications of all income and assets as required by the Owner or its agent. I/We further authorize disclosure of all information which will verify my/our income and assets. I/We understand applicants must be eligible for the Housing program. Subject to approval, this will be my/our primary residence.

A credit check will be completed through a credit bureau. By completing this application, applicant grants management permission to confirm the above information supplied by applicant. The Fair Credit Reporting Act requires that management disclose to applicant that an investigative consumer report including information as to applicant's character, general reputation, personal characteristics and mode of living will be made.

Each Applicant 18 years of age or older must sign and date below.

Signature _____

Date _____

Signature _____

Date _____

*****SUBMIT COMPLETED APPLICATIONS AND SUPPORTING DOCUMENTATION TO HOMES@CWD.ORG OR TO
COMMON WEALTH DEVELOPMENT 1501 Williamson St., Madison WI, 53703*****

