Affordable Purchase Housing Application

Subdivision Name: Roseville Lofts by C&P Development

Borrower

First	MI	Last

Current Street Address	How Long?

City	State	Zip

Work Phone ( )	Home Phone ( )

Cell Phone	E-mail Address or Fax #

Social Security# (last 4 digits only)	US Citizen Yes ☐ No ☐

Name of Employer	Years on Job	Veteran?

Employer Address

Occupation	Years in Occupational Field

Base Annual Income $	Commission $

Other Sources of Income $	Amount $

Co-Borrower

First	MI	Last

Current Street Address	How Long?

City	State	Zip

Work Phone ( )	Home Phone ( )

Cell Phone	E-mail Address or Fax #

Social Security# (last 4 digits only)	US Citizen Yes ☐ No ☐

Name of Employer	Years on Job	Veteran?

Employer Address

Occupation	Years in Occupational Field

Base Annual Income $	Commission $

Other Sources of Income $	Amount $

List number and ages of all persons that will be living with you during the 1st 12 months of residency in the affordable unit (not including co-borrower)

Dependents #:_____ Ages:_____

Assets

Total of Liquid Cash (Bank Accounts, 401K, Escrow Deposits, Etc.)
$
Value of Investment Accounts
$
Real Estate Owned
$
Amount Available for Down
$

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Liabilities

Monthly Vehicle Payment	$
Monthly Credit Card Payments	$
Monthly Rent Payments	$
Monthly Child Support/Alimony	$
Misc. Monthly Payments	$
Total Monthly Liabilities	$

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Monthly Vehicle Payment	$
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Misc. Monthly Payments	$
Total Monthly Liabilities	$

I/We understand the information above is true and correct to the best of my knowledge. I/We understand any false statements will be grounds for denial of this application for affordable housing and could be punishable by state law.

Signature _____ Date _____ Signature _____ Date _____

Check the preference for which you qualify:
- ☐ Currently reside in the City of Roseville
- ☐ Currently work in the City of Roseville
- ☐ Veteran

Verification of preference attached to application:
- ☐ City of Roseville Utility Bill
- ☐ Pay stub
- ☐ DD214

EQUAL HOUSING OPPORTUNITY