

DWELLING PLACE REGIONAL COMMUNITY LAND TRUST

HOMEBUYER PRE-APPLICATION

PLEASE BRING OR SEND YOUR COMPLETED PRE-APPLICATION TO THE DWELLING PLACE MAIN OFFICE LOCATED AT 101 SHELDON SE, SUITE 2, GRAND RAPIDS, MI 49503 OR EMAIL TO DAVID DEVELDER AT DDEVELDER@DPGR.ORG. IF YOU HAVE QUESTIONS PLEASE CONTACT DAVID AT 616-252-9691. PRE-APPLICATION MUST BE FILLED OUT FOR ALL HOUSEHOLD MEMBERS WHO ARE 18 YEARS OR OLDER.

Part 1: Household Information

Primary Applicant

First Name:		Middle Initial:		Last Name:	
DOB:	___/___/___	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Primary language:	
Email Address:					
Mailing Address:	Street:	City:	State:	Zip:	
Physical Address (if different):	Street:	City:	State:	Zip:	
Phone:	(H):	(W):	(C):		
	Race (Voluntary):	Education Attainment:	Employment Status:		
	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> American Indian AND White <input type="checkbox"/> Asian AND White <input type="checkbox"/> Black or African American AND White <input type="checkbox"/> American Indian AND Black <input type="checkbox"/> Other multiple race	<input type="checkbox"/> Less than High School Diploma <input type="checkbox"/> High School Diploma or equivalent <input type="checkbox"/> Some post-secondary education <input type="checkbox"/> Certification from vocational or tech training program <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's or other graduate degree	<input type="checkbox"/> Self-employed <input type="checkbox"/> Work full-time for employer <input type="checkbox"/> Work part-time for employer <input type="checkbox"/> Homemaker <input type="checkbox"/> Full-time student <input type="checkbox"/> Permanently unable to work <input type="checkbox"/> Unemployed and seeking work <input type="checkbox"/> Unemployed and NOT seeking work		
Are you a veteran?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you Active Military?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Were you born in the USA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
				Ethnicity: (Voluntary)	<input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic

Co Applicant

First Name:		Middle Initial:		Last Name:	
DOB:	___/___/___	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to Primary Applicant:	<input type="checkbox"/> Spouse <input type="checkbox"/> Non-married partner
Email Address:					
Phone:	(H):	(W):	(C):		
	Race (Voluntary):	Education Attainment:	Employment Status:		
	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> American Indian AND White <input type="checkbox"/> Asian AND White <input type="checkbox"/> Black or African American AND White <input type="checkbox"/> American Indian AND Black <input type="checkbox"/> Other multiple race	<input type="checkbox"/> Less than High School Diploma <input type="checkbox"/> High School Diploma or equivalent <input type="checkbox"/> Some post-secondary education <input type="checkbox"/> Certification from vocational or tech training program <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's or other graduate degree	<input type="checkbox"/> Self-employed <input type="checkbox"/> Work full-time for employer <input type="checkbox"/> Work part-time for employer <input type="checkbox"/> Homemaker <input type="checkbox"/> Full-time student <input type="checkbox"/> Permanently unable to work <input type="checkbox"/> Unemployed and seeking work <input type="checkbox"/> Unemployed and NOT seeking work		
Are you a veteran?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you Active Military?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Were you born in the USA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
				Ethnicity:	<input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic

Other Household Members

First Name:		Middle Initial:		Last Name:	
DOB:	___/___/___	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to Primary Applicant:	
Ethnicity (Voluntary):	<input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic	If 18 years or older:			
Race (Voluntary):		Educational Attainment:	Employment Status:		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> American Indian AND White <input type="checkbox"/> Asian AND White <input type="checkbox"/> Black or African American AND White <input type="checkbox"/> American Indian AND Black <input type="checkbox"/> Other multiple race		<input type="checkbox"/> Less than High School Diploma <input type="checkbox"/> High School Diploma or equivalent <input type="checkbox"/> Some post-secondary education <input type="checkbox"/> Certification from vocational or tech training program <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's or other graduate degree	<input type="checkbox"/> Self-employed <input type="checkbox"/> Work full-time for employer <input type="checkbox"/> Work part-time for employer <input type="checkbox"/> Homemaker <input type="checkbox"/> Full-time student <input type="checkbox"/> Permanently unable to work <input type="checkbox"/> Unemployed and seeking work <input type="checkbox"/> Unemployed and NOT seeking work		
Does this household member live in the home at least 25% of the time?				<input type="checkbox"/> Yes <input type="checkbox"/> No	

First Name:		Middle Initial:		Last Name:	
DOB:	___/___/___	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to Primary Applicant:	
Ethnicity (Voluntary):	<input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic	If 18 years or older:			
Race (Voluntary):		Educational Attainment:	Employment Status:		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> American Indian AND White <input type="checkbox"/> Asian AND White <input type="checkbox"/> Black or African American AND White <input type="checkbox"/> American Indian AND Black <input type="checkbox"/> Other multiple race		<input type="checkbox"/> Less than High School Diploma <input type="checkbox"/> High School Diploma or equivalent <input type="checkbox"/> Some post-secondary education <input type="checkbox"/> Certification from vocational or tech training program <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's or other graduate degree	<input type="checkbox"/> Self-employed <input type="checkbox"/> Work full-time for employer <input type="checkbox"/> Work part-time for employer <input type="checkbox"/> Homemaker <input type="checkbox"/> Full-time student <input type="checkbox"/> Permanently unable to work <input type="checkbox"/> Unemployed and seeking work <input type="checkbox"/> Unemployed and NOT seeking work		
Does this household member live in the home at least 25% of the time?				<input type="checkbox"/> Yes <input type="checkbox"/> No	

First Name:		Middle Initial:		Last Name:	
DOB:	___/___/_____	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship to Primary Applicant:	
Ethnicity (Voluntary):	<input type="checkbox"/> Hispanic <input type="checkbox"/> Not Hispanic		If 18 years or older:		
Race (Voluntary):	Educational Attainment:		Employment Status:		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> American Indian AND White <input type="checkbox"/> Asian AND White <input type="checkbox"/> Black or African American AND White <input type="checkbox"/> American Indian AND Black <input type="checkbox"/> Other multiple race	<input type="checkbox"/> Less than High School Diploma <input type="checkbox"/> High School Diploma or equivalent <input type="checkbox"/> Some post-secondary education <input type="checkbox"/> Certification from vocational or tech training program <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's or other graduate degree		<input type="checkbox"/> Self-employed <input type="checkbox"/> Work full-time for employer <input type="checkbox"/> Work part-time for employer <input type="checkbox"/> Homemaker <input type="checkbox"/> Full-time student <input type="checkbox"/> Permanently unable to work <input type="checkbox"/> Unemployed and seeking work <input type="checkbox"/> Unemployed and NOT seeking work		
Does this household member live in the home at least 25% of the time?				<input type="checkbox"/> Yes <input type="checkbox"/> No	

***If you have additional household members, please list the information on an additional sheet.**

Part 5: Current Living Situation

What best describes your current living situation? Rent Own Live with Parents/Friends Other

Are you currently a Dwelling Place resident? Yes No

How many bedrooms are in your current home? _____

Approximate household income (any household members over age of 18 earning income) \$ _____

Current monthly rent/mortgage payment: \$ _____

Monthly utilities: \$ _____

Are you at risk of being displaced from your current home? Yes No

If yes, please explain: _____

Please describe any special needs or accommodations required by your household (i.e. "one-level only" or "at least one ADA-accessible bathroom required)

Part 6: Homeownership Goals

Do you own or share ownership in any Real Estate?

Yes No

If yes, have you sold this property? When?

Yes No _____

How much do you currently have saved specifically for buying a home?

\$ _____

Where are you interested in purchasing?

How many bedrooms would you like in your new home?

Have you completed the Homebuyer Education Workshop in the last 3 years?

Yes No

Date you completed a Dwelling Place CLT Orientation:

How did you hear about the Shared Equity Program?	What is your primary reason for wanting to purchase a home?	Which of the following is the biggest barrier to buying a home for your household?	In how many months do you expect to be financially ready to purchase a home?
<input type="checkbox"/> Word of mouth- current/past homeowner or staff <input type="checkbox"/> Word of mouth- general <input type="checkbox"/> Poster/flyer <input type="checkbox"/> Event <input type="checkbox"/> Internet search <input type="checkbox"/> Paid advertisement- newspaper/magazine <input type="checkbox"/> Paid advertisement- radio/TV <input type="checkbox"/> Paid advertisement- other <input type="checkbox"/> Public service announcement- radio <input type="checkbox"/> Public service announcement- TV <input type="checkbox"/> Real estate listing <input type="checkbox"/> Earned media <input type="checkbox"/> Referred by lender <input type="checkbox"/> Referred by real estate agent <input type="checkbox"/> Referred by agency/non-profit <input type="checkbox"/> Homebuyer Education	<input type="checkbox"/> Desire to own a home of my own <input type="checkbox"/> Desire for a larger home <input type="checkbox"/> Change in family situation <input type="checkbox"/> Home buyer tax credit <input type="checkbox"/> Job-related relocation <input type="checkbox"/> Affordability of homes <input type="checkbox"/> Desire to be closer to family/friends <input type="checkbox"/> Desire for a home in a better area <input type="checkbox"/> Desire to be closer to job/school/transit <input type="checkbox"/> Desire for a smaller home <input type="checkbox"/> Retirement <input type="checkbox"/> Establish household <input type="checkbox"/> Greater number of homes for sale/better choice <input type="checkbox"/> Desire for a newly built/custom built home <input type="checkbox"/> Purchase home for family member <input type="checkbox"/> Financial security <input type="checkbox"/> Desire for vacation home <input type="checkbox"/> Other	<input type="checkbox"/> Insufficient savings <input type="checkbox"/> Insufficient income <input type="checkbox"/> Insufficient work history <input type="checkbox"/> Residency <input type="checkbox"/> Over income <input type="checkbox"/> Too many assets <input type="checkbox"/> Poor credit history <input type="checkbox"/> Debt <input type="checkbox"/> Lack of references <input type="checkbox"/> Pending divorce <input type="checkbox"/> Pets <input type="checkbox"/> Own existing home	<input type="checkbox"/> Less than 1 month <input type="checkbox"/> 2-4 months <input type="checkbox"/> 5-6 months <input type="checkbox"/> 7-9 months <input type="checkbox"/> 10 months or more

Additional comments:

Certifications and Acknowledgments

It is our policy to verify all information contained in this pre-application. In acknowledgement of this policy, please sign your name(s) where indicated.

Anyone over the age of 17 who will be living in the home must sign below.

I/We certify the following:

All the information contained and submitted in support of this pre-application is true and complete to the best of my/our knowledge and belief.

I/We are aware that any misrepresentation may result in the forfeiture of my/our right to participate in the Dwelling Place Regional Community Land Trust and may result in legal action against me/us.

I/We understand that completion of this pre-application does not guarantee my/our eligibility for the program and/or that I/we will successfully purchase a home through the Dwelling Place Regional Community Land Trust. I/we understand that the opportunity to purchase a home through the Dwelling Place Regional Community Land Trust is contingent upon the availability of funds and upon my/our successful completion of all Dwelling Place Regional Community Land Trust eligibility requirements.

If I/we purchase a home through the Dwelling Place Regional Community Land Trust I/we agree to enter into restrictions which will require the property to be owner-occupied, limit the transfer of the property to income-eligible buyers, limit the sales price and the amount of equity available upon re-sale or refinance.

I/We also agree to pay Dwelling Place Regional Community Land Trust a monthly stewardship fee of \$50.00 to Dwelling Place Regional Community Land Trust. I/we acknowledge that the intention of these restrictions is to ensure that opportunities to purchase affordable homes be preserved for future generations of buyers.

Consent to Release Information:

I/We authorize representatives from the Dwelling Place Regional Community Land Trust to supply and receive information to/ from my/our employer(s), my/our financial institution(s), other housing assistance programs, the NeighborWorks® HomeOwnership Center, and/or my/our Mortgage Lender to verify the information contained in this pre-application and to confirm my eligibility for Dwelling Place Regional Community Land Trust homeownership opportunities. This information includes, but is not limited to bank statements, employment status, income, outstanding debts, loan applications, appraisals, HUD-1 settlement statements and other financial information. I/We understand that information in this pre-application may be shared with funders for the purpose of funding compliance.

Anyone over the age of 17 who will be living in the home must sign below.

Signature _____ Printed Name _____ Date _____

Signature _____ Printed Name _____ Date _____

Signature _____ Printed Name _____ Date _____

Equal Opportunity: In accordance with the provisions of the Equal Opportunity Act and the Dwelling Place Regional Community Land Trust’s policies, there will be no discrimination against an applicant for these benefits on the basis of age, gender, race, color, marital status, sexual orientation, having one or more minor children, national origin, religion, ethnic background, physical or mental disability, or being a recipient of public assistance. If you or a member of your household is an individual with a disability, you have the right to request reasonable accommodation for that disability. The Dwelling Place Regional Community Land Trust is committed to assuring that each individual has an equal opportunity to the use and enjoyment of the benefits of this program.

Confidentiality: In order to process an pre-application, the Dwelling Place Regional Community Land Trust may supply and receive information as detailed in the “Consent to Release” clause above. Information may also be released to comply with the auditing requirements of program funders. With these two exceptions, all personal and identifying information on an pre-application remains fully confidential.

