



Project Build a Future

Application for Housing

Please complete the entire application as fully as possible. **Attach the required documents and return them with the signed application to Project Build a Future, 2306 Third Street. If you have any questions, please call 439-7191.**

APPLICANT INFORMATION

Please Print Clearly

Name: _____
First MI Last

Street: _____

City State Zip Code

Home: (____) _____-_____ Work: (____) _____-_____

Mobile/Cell: (____) _____-_____ Fax: (____) _____-_____

Email: _____

_____ Birth Date: ____/____/____
Social Security Number

Race (please check one):

- | | |
|--|--|
| 1. White <input type="checkbox"/> | 2. Black or African American <input type="checkbox"/> A |
| 3. American Indian/Alaskan Native <input type="checkbox"/> | 4. Asian <input type="checkbox"/> |
| 5. Native Hawaiian/Other Pacific Islander <input type="checkbox"/> | 6. American Indian/Alaskan Native and White <input type="checkbox"/> |
| 7. Asian and White <input type="checkbox"/> | 8. Black/African American and White <input type="checkbox"/> |
| 9. American Indian/Alaskan Native and Black <input type="checkbox"/> | 10. Other <input type="checkbox"/> |

You should select both a "Race" category and a "yes" or "no" for Hispanic origin.

Ethnicity (please check "yes" or "no" for Hispanic Origin): **Hispanic:** Yes ☐ No ☐

Immigrant Status (please check one):

1. You are U.S. born and 1 or both of your parents are foreign born ☐
2. You are U.S. born but 1 or both grandparents are foreign born ☐
3. You are foreign born ☐
4. You, your parents and grandparents are all U.S. born ☐

How did you find out about PBAF?

- | | |
|-----------------------------------|--|
| 1. Paper <input type="checkbox"/> | 2. PBAF Homebuyer <input type="checkbox"/> |
| 3. TV <input type="checkbox"/> | 4. Event <input type="checkbox"/> |
| 5. Other <input type="checkbox"/> | _____ |

Gender (please check one): Male ☐ Female ☐ Non-Binary ☐

Marital Status (please check one): Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed ☐

Disabled (please check one): Yes ☐ No ☐

Veteran (please check one): Yes ☐ No ☐

Current Housing Arrangement please check the most accurate)

- | | |
|--|---|
| 1. Rent <input type="checkbox"/> | 2. Homeless <input type="checkbox"/> |
| 3. Homeowner with mortgage <input type="checkbox"/> | 4. Living with family member not paying rent <input type="checkbox"/> |
| 5. Homeowner with mortgage paid off <input type="checkbox"/> | 6. Other _____ |
| How long at this address _____ | If renting when does your lease expire _____ |

Household Type (please check the most accurate)

- | | |
|---|--|
| 1. Female headed single parent household <input type="checkbox"/> | 2. Male headed single parent household. <input type="checkbox"/> |
| 3. Single adult <input type="checkbox"/> | 4. Two or more unrelated adults <input type="checkbox"/> |
| 5. Married with children <input type="checkbox"/> | 6. Married without children. <input type="checkbox"/> |
| 7. Other <input type="checkbox"/> | |

TOTAL Family/Household Size: _____

How many children/dependents? _____

What ages are they? _____

Are there non-dependents who are living in the home? (please check one) Yes ☐ No ☐

If yes, list below:

Relationship	Age
Relationship	Age

Annual Family or Household Income: \$ _____

APPLICANT'S EDUCATION

Please check your highest level of education.

High School ☐ HiSET/GED ☐ Jr College ☐ Technical College ☐ University ☐ Graduate School ☐
Other _____

APPLICANT'S CURRENT EMPLOYMENT

Please Print Clearly

*****Attach proof of income (ONE month of pay stubs, Social Security / Child Support award letter)**

Employer: _____

Title _____ Hire Date _____
Street _____ City _____ State _____ Zip Code _____

Phone: (____) _____ - _____

Please check one: Part-Time ☐ Full-Time ☐

Gross Income (before taxes): \$ _____

Is this amount paid (Please check one): hourly ☐ weekly ☐ every two weeks ☐ twice a month ☐ monthly? ☐

Secondary Employer: _____

Title _____ Hire Date _____
Street _____ City _____ State _____ Zip Code _____

Phone: (____) _____ - _____

Please check one: Part-Time ☐ Full-Time ☐

Gross Income (before taxes): \$ _____

Is this amount paid (Please check one): hourly ☐ weekly ☐ every two weeks ☐ twice a month ☐ monthly? ☐

CO-APPLICANT INFORMATION

Please Print Clearly

Name: _____
First MI Last

Street: _____

City _____ State _____ Zip Code _____

Home: (____) _____ - _____ Work: (____) _____ - _____

Mobile/Cell: (____) _____ - _____ Fax: (____) _____ - _____

Email: _____

_____ - _____ - _____ Birth Date: ____/____/____

Social Security Number

Race (please check one):

- | | |
|--|--|
| 1. White <input type="checkbox"/> | 2. Black or African American <input type="checkbox"/> A |
| 3. American Indian/Alaskan Native <input type="checkbox"/> | 4. Asian <input type="checkbox"/> |
| 5. Native Hawaiian/Other Pacific Islander <input type="checkbox"/> | 6. American Indian/Alaskan Native and White <input type="checkbox"/> |
| 7. Asian and White <input type="checkbox"/> | 8. Black/African American and White <input type="checkbox"/> |
| 9. American Indian/Alaskan Native and Black <input type="checkbox"/> | 10. Other <input type="checkbox"/> |

You should select both a "Race" category and a "yes" or "no" for Hispanic origin.

Ethnicity (please check "yes" or "no" for Hispanic Origin): Hispanic Yes ☐ No ☐

Immigrant Status (please check one):

1. You are U.S. born and 1 or both of your parents are foreign born ☐
2. You are U.S. born but 1 or both grandparents are foreign born ☐
3. You are foreign born ☐
4. You, your parents and grandparents are all U.S. born ☐

Gender (please check one): Male ☐ Female ☐ Non-Binary ☐

Disabled (please check one): Yes ☐ No ☐

Veteran (please check one): Yes ☐ No ☐

Relationship to Applicant (please check one): Spouse ☐ Daughter ☐ Son ☐ Sister ☐
Brother ☐ Girlfriend ☐ Boyfriend ☐ Mother ☐ Father ☐ Other: _____

CO-APPLICANT EDUCATION

Please check your highest level of education.
High School ☐ HiSET/GED ☐ Jr College ☐ Technical College ☐ University ☐ Graduate School ☐
Other _____

CO-APPLICANT CURRENT EMPLOYMENT Please Print Clearly

***Attach proof of income (ONE month of pay stubs, Social Security / Child Support award letter)

Employer: _____

Title _____ Hire Date _____
Street _____ City _____ State _____ Zip Code _____

Phone: (_____) _____ - _____

Please check one: Part-Time ☐ Full-Time ☐
Gross Income (before taxes): \$ _____
Is this amount paid: (Please check one) hourly ☐ weekly ☐ every two weeks ☐ twice a month ☐ monthly? ☐

Secondary Employer: _____

Title _____ Hire Date _____
Street _____ City _____ State _____ Zip Code _____

Phone: (_____) _____ - _____

Please check one: Part-Time ☐ Full-Time ☐
Gross Income (before taxes): \$ _____
Is this amount paid (Please check one): hourly ☐ weekly ☐ every two weeks ☐ twice a month ☐ monthly? ☐

OTHER INCOME Please Print Clearly

List any other types of income received by any member of the household.

(Attach proof of other income such as award letters, check stubs)

Type of Income	Monthly Amount
Alimony/Child Support	
Rental Income	
Social Security	
Pension Income	
Public Assistance	
Self-employment Income	
Dependent SSI Income	
Disability Income	
Other Employment	

	Applicant		Co-Applicant	
Please check one for each applicant:	Yes	No	Yes	No
Can you document your child support / alimony income? If yes, how long will it continue?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	_____	_____	_____	_____
If your child or a family member receives SSI, how many more years will the payments continue?	_____	_____	_____	_____
	Yes	No	Yes	No
If you receive disability income, is it for a permanent disability?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LIABILITIES / DEBTS

Please list any debts you have, including credit cards, auto loans, student loans, and payday loans, tax liens expenses. Do NOT include rent, utilities, childcare, or collections from credit report.

Paid To:	Current Balance	Monthly Payment	Who's Debt? A=Applicant B=Both C=Co-Applicant

	Applicant		Co-Applicant	
<i>Please check one for each applicant:</i>	Yes	No	Yes	No
Have you made your payments on time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you filed for bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chapter 7?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chapter 13?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, when was it discharged? _____				
What is your current monthly rent or mortgage payment?	_____		_____	
	Yes	No	Yes	No
Do you have a Section 8 housing voucher?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, have you had it more than 2 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL INFORMATION

	Applicant		Co-Applicant	
<i>Please check one for each applicant:</i>	Yes	No	Yes	No
Have you owned a home in the last three (3) years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a contract on a house at this time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently working with a real-estate agent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most convenient time for an individual appointment?	_____		_____	

AUTHORIZATION

I authorize Project Build a Future to:

- (a) refer my file to a lender to pull my/our credit report in connection with my pursuit of a loan to purchase a home;
- (b) to review my/our credit file for housing counseling in connection with my pursuit of a loan to purchase a home;
- (c) pull my/our credit report and review my/our credit file for informational inquiry purposes; and
- (d) obtain a copy of the HUD-1 Settlement Statement, Appraisal, and Real Estate Note(s) when I purchase a home, from the lender who made the loan or the title company that closed the loan.

I/We understand that any intentional or negligent representation(s) of the information contained on This form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

Applicant Signature _____

Date _____

Co-Applicant Signature _____

Date

CERTIFICATION

Privacy Act Statement: The information on this form is being collected by the Department of Housing and Urban Development (HUD) to help determine an applicant's eligibility. It will be used to provide the basis for managing the program covered by this form, for protecting the Government's financial interest and for verifying the accuracy of the information furnished. It may be released to appropriate federal, state and local agencies when relevant, to civil, criminal, or regulatory investigators or prosecutors. Failure to provide some information may result in a delay or rejection of your approval. HUD is authorized to ask for this information by the U.S. Housing Act of 1937, as amended, 42 U.S.C. 1437 et seq., the Housing and Community Development Amendments of 1981 P.L. 97-35, 85 Stat., 348, 408.

The applicant certifies that all information in this application, and all information furnished in support of this application is given for the purpose of obtaining mortgage assistance through Project Build a Future. The applicant further agrees that verification of any of the information contained in this application may be obtained from any source named herein.

Penalty for false or fraudulent statements: U.S.C. Title 18, Sec 1001, provides that “Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both.”

Applicant(s) Statement: I/we understand that false statements or information are punishable under federal law.

Applicant Signature _____

Date

Co-Applicant Signature _____

Date _____

After application is completed and signed, attach required documentation (proof of ALL income paperwork) and return to:

Project Build a Future
2306 Third Street
Lake Charles, LA 70601
337-439-7191
Attn: Homebuyer Counselor
reneed@projectbuildafuture.org