

NEIGHBORHOOD STABILIZATION PROGRAM (NSP)



Intake Application

This form is needed to determine if your household is eligible to participate in the Neighborhood Stabilization Program (NSP-2). Please complete shaded sections.

ARE YOU INTERESTED IN: **BUYING A HOME** OR **RENTING**

APPLICANT INFORMATION

Primary Applicant's Name:				US Citizen <input type="checkbox"/> Perm. Resident <input type="checkbox"/> Other <input type="checkbox"/>	Cell Number:	
Spouse's Name:				US Citizen <input type="checkbox"/> Perm. Resident <input type="checkbox"/> Other <input type="checkbox"/>	Cell Number:	
Current Address:					Home Phone:	
City:		State:		Zip Code:		

List all persons who are living with you or will be living with you in your new home.

HOUSEHOLD COMPOSITION

1.	NAMES:	RELATIONSHIP	Date of Birth	GENDER	Student Status			SOCIAL SECURITY NUMBER	Receiving Income	
					F/T= Full Time	P/T= Part Time			Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No
				M / F	F/T	P/T	N/A		Yes	No

Are any of the household members listed above foster children?	No ___	Yes ___	Who?
Are any of the household members listed above a live-in attendant?	No ___	Yes ___	Who?
Are any household members temporarily absent from the home?	No ___	Yes ___	Who?
Do you anticipate any other members will join your household within the next 12 months?	No ___	Yes ___	If yes, explain:

INCOME INFORMATION

Includes: Wages, salaries and tips, alimony, child support, military income, part-time income, temporary income, Social Security, SSI, TANF, other benefits, other income.

FOOD STAMPS ARE NOT CONSIDERED INCOME – do not list food stamps.

List ALL household members and their incomes. Attach a separate sheet if you need more space.

Household Member Name	Source of Income	Payment Basis (weekly, bi-weekly, monthly)

Current Employment Contact Information			
Household Member's Name	Occupation	Work Phone	Work Fax
Name and Street Address of Employer	City	State	Zip Code
Date Hired	Salary \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Other	# of hours per week

Current Employment Contact Information			
Household Member's Name	Occupation	Work Phone	Work Fax
Name and Street Address of Employer	City	State	Zip Code
Date Hired	Salary \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Other	# of hours per week

Current Employment Contact Information			
Household Member's Name	Occupation	Work Phone	Work Fax
Name and Street Address of Employer	City	State	Zip Code
Date Hired	Salary \$ _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Twice a month <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Other	# of hours per week

ASSET INFORMATION			
Do you own real estate property? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what is its current market value? If you have a mortgage on the property, what is the current balance owed on the mortgage? List below the types and sources of any household assets. Provide both the current cash value <u>and the estimated annual income from the asset.</u>			
Household Member Name	Type and Source of Asset (Savings/checking accounts, investments, etc.)	Cash Value of Asset	Annual Income From Asset

LIABILITIES INFORMATION

	Monthly Payment	Balance
Loan \$		
Loan \$		
Car Payment \$		
Car Payment \$		
Credit Card \$		
Credit Card \$		
Rent \$		

CONFLICT OF INTEREST INFORMATION:

1. **Is anyone in the household currently serving (or served within the last 12 months) as an employee, agent, consultant, officer, or elected or appointed official of El Paso Collaborative for Community & Economic Development, or it's consortium members, Habitat for Humanity, Project Vida, AYUDA, Inc., Karma-JKS Properties, Inc. Dawco Home Builders, LLC?** No Yes
If YES, identify who, organization and role? _____ is this a current role? No Yes
If NO, identify date role ceased? _____

2. **Is anyone in the household related to anyone currently serving (or who has served within the last 12 months) as an employee, agent, consultant, officer, or elected official of El Paso Collaborative for Community & Economic Development, or it's consortium members, Habitat for Humanity, Project Vida, AYUDA, Inc., Karma-JKS Properties, Inc., Dawco Home Builders LLC. (Either through familial or business ties)?** No Yes
If YES, identify who, organization and role? _____
If NO, identify date role ceased? _____

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of Assistance related to a dwelling in order to monitor the compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law prohibits discrimination on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, your interviewer is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Interviewer must review the above material to assure that the disclosures satisfy all requirements to which the organization is subject under applicable state law for the particular type of assistance applied for.)

BORROWER		CO-BORROWER	
I do not wish to furnish this information		I do not wish to furnish this information	
Ethnicity:	Hispanic or Latino Not Hispanic or Latino	Ethnicity:	Hispanic or Latino Not Hispanic or Latino
Race:	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White	Race:	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White
Sex:	Female Male	Sex:	Female Male

