

Own Your Home AZ
Office: (520) 261-7979 – www.OwnYourHomeAZ.com
Mailing Address: PO Box 91199, Tucson AZ 85752

Address of desired property: _____ *Date of Application:* _____
Desired Move In Date: _____

To guarantee compliance with the Federal Fair Housing Acts, information is required for **each applicant** over the age of eighteen (excluding dependent children)

PLEASE PRINT LEGIBLY

EMPLOYMENT HISTORY

Applicant's Full Name: _____ Social Security #: _____
 Date of Birth: _____ Driver's License #: _____ State of Issue: _____
 Home Phone #: _____ Work Phone #: _____ Cell #: _____
 Employer: _____ Phone #: _____
 Employer Address (Street, City): _____
 Hire Date: _____ Position: _____
 Gross monthly pay: _____ \$ Hours per week: _____ Supervisor: _____

Co-Applicant's Full Name: _____ Social Security #: _____
 Date of Birth: _____ Driver's License #: _____ State of Issue: _____
 Home Phone #: _____ Work Phone #: _____ Cell #: _____
 Employer: _____ Phone #: _____
 Employer Address (Street, City): _____
 Hire Date: _____ Position: _____
 Gross monthly pay: _____ \$ Hours per week: _____ Supervisor: _____

ADDRESS HISTORY

Current Address: _____ City: _____ State & Zip: _____
 Move-in date: _____ Move-out Date: _____ Rent \$: _____
 Why Moving? _____
 Landlord: _____ Phone #: _____

Previous Address: _____ City: _____ State & Zip: _____
 Move-in date: _____ Move-out Date: _____ Rent \$: _____
 Why Moved? _____
 Landlord: _____ Phone #: _____

OTHER INCOME YOU WOULD LIKE US TO CONSIDER

(For example: Spousal support, child support, disability, social security, self employment etc...)

1. Source: _____ Gross amount per month: \$ _____
 2. Source: _____ Gross amount per month: \$ _____

To Process Application Immediately - FAX to (415) 276-2040

Own Your Home AZ

Office: (520) 261-7979 – www.OwnYourHomeAZ.com

Mailing Address: PO Box 91199, Tucson AZ 85752

LIST TWO (2) PERSONAL REFERENCES TO CONTACT IN CASE OF EMERGENCY

Name:	<input type="text"/>	Relationships:	<input type="text"/>
Full Address:	<input type="text"/>	Phone:	<input type="text"/>
Name:	<input type="text"/>	Relationships:	<input type="text"/>
Full Address:	<input type="text"/>	Phone:	<input type="text"/>

LIST ALL VEHICLES OWNED

<u>Year</u>	<u>Make (ie. Ford/Chevy)</u>	<u>Model</u>	<u>State</u>	<u>License Plate #</u>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ANSWER YES OR NO TO THE FOLLOWING QUESTIONS:

(These questions apply to both Applicant & Co-Applicant.)

	<u>Applicant</u>	<u>Co-Applicant</u>
1. Are you prepared to take on the burden of home ownership, including maintenance and repairs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you prepared to make the monthly payments in full every month on the 1st of the month?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Will you have the entire down payment available prior to moving in?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Have you ever been evicted from a property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you filed bankruptcy in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Have you ever been foreclosed upon in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

LIST ALL NAMES AND AGES OF THE INDIVIDUALS THAT WILL RESIDE IN THE PROPERTY

1	<input type="text"/>	5
2	<input type="text"/>	6
3	<input type="text"/>	7
4	<input type="text"/>	8

VERY IMPORTANT: When submitting this application, you must attach proof of income for each applicant: pay stubs showing current and year-to-date totals; SSI or disability award letters; if self-employed, deposits and 2 months bank statements. Applications submitted without verification of income will not be processed.

Applicant agrees that all credit information maintained by OwnYourHomeAZ may be given to any credit reporting service or other persons who request it. Applicant hereby certifies that the information supplied in this application is true. Applicant understands that any false answers or statements made will be sufficient grounds for eviction/forfeiture. Applicant authorizes present and past landlords and Employers, Banks, Credit references, personal references, and any other person to release information regarding applicants credit, rental and employment history.

Please be sure the application is filled out completely. This will ensure a timely and accurate response.

Applicant Signature	<input type="text"/>	Co-Applicant's Signature	<input type="text"/>
Date:	<input type="text"/>	Date:	<input type="text"/>

NOTE: APPLICATIONS WILL NOT be accepted on a "FIRST-COME, FIRST-SERVED BASIS." THIS PROPERTY IS MANAGED BY A PRINCIPAL REPRESENTING HIS INTEREST AND/OR OF THE OWNER OF THE REAL PROPERTY. THE COMPANY WILL ASSIST ALL PERSONS WITHOUT REGARD TO RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, FAMILIAL STATUS, MARITAL STATUS, HANDICAP, OR ANCESTRY.

To Process Application Immediately - FAX to (415) 276-2040