

**CITY OF BALDWIN PARK
NEIGHBORHOOD STABILIZATION PROGRAM
APPLICATION**

BORROWER INFORMATION											
Borrower's Name (include Jr. or Sr. if applicable)				Co-Borrower's Name (include Jr. or Sr. if applicable)							
-- -- ()				-- -- ()							
Social Security Number		Home Phone		Social Security Number		Home Phone					
Current Address			Apt. #	Current Address			Apt. #				
City	State	Zip		City	State	Zip					
<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried (including single, divorced & widowed)			<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried (including single, divorced & widowed)	Age					
<input type="checkbox"/> Separated				<input type="checkbox"/> Separated							
Dependents (List all who will reside in the home)											
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
Name		Relationship		Social Security Number		Monthly Income					
-- -- \$											
EMPLOYMENT INFORMATION											
Borrower's Employer			Self-Employed <input type="checkbox"/>			Co-Borrower's Employer					
						Self-Employed <input type="checkbox"/>					
Employers Name				Employers Name							
Address		City	State	Zip		Address		City	State		
Title			Years at this Job		Title			Years at this Job			
()											
Phone			Contact Person			Phone			Contact Person		
\$											
Hourly Wage			Hours Per Week		Hourly Wage			Hours Per Week			
List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):											
								()			
Alternate Name			Creditor		Phone Number		Account Number				
()								()			
Alternate Name			Creditor		Phone Number		Account Number				
Are you claiming any of the following Preferences:											
					Veteran	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
If yes, please provide supporting documentation					Family with 3 or more children	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
					Working or Living in Baldwin Park	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
ACKNOWLEDGMENT AND AGREEMENT											
I/we understand that this application supplements with the Freddie Mac Form 65, Fannie Mae Form 1003 and any other equivalent form. I/we also certify that the information provided in this application is true and correct as of the date set forth opposite my/our signatures on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to fine, or imprisonment or both under the provisions of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to the Lender, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application.											
Borrower's Signature				Date		Co-Borrower's Signature				Date	
X						X					