

**DIRECT HOMEBUYER ASSISTANCE
PRE-APPLICATION**

DATE _____

Applicant: _____			SSN: _____ - _____ - _____		
First	Middle	Last			
Date of Birth: _____			Home Phone #: (____) _____ - _____		
Month	Day	Year			
			Work Phone #: (____) _____ - _____		
<input type="checkbox"/> 62 Years or Older			<input type="checkbox"/> Female Head of Household		
<input type="checkbox"/> Disabled			Cell Phone #: (____) _____ - _____		
Co-Applicant: _____			SSN: _____ - _____ - _____		
First	Middle	Last			
Date of Birth: _____			Work Phone #: (____) _____ - _____		
Month	Day	Year			
			Cell Phone #: (____) _____ - _____		
<input type="checkbox"/> 62 Years or Older			<input type="checkbox"/> Female Head of Household		
<input type="checkbox"/> Disabled					
Current Street Address: _____					
Mailing Address: _____					
City, State, Zip: _____				County: _____	
Do you own this property? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you actively selling this property? <input type="checkbox"/> Yes <input type="checkbox"/> No		

If you are interested in applying for a direct homebuyer assistance loan, please fill out the information below and on page 2. Please note that in order to be eligible for the program, all applicants must meet the LMI income limits for the county in which they receive assistance. Please contact the NENEDD Housing Department for more information on income qualifications at (402) 379-1150 or mandy@nenedd.org.

Number of persons in the household _____

Estimated gross annual income for all working members of the household \$ _____

FOR OFFICIAL USE ONLY	
Assigned to: _____	Comments: _____
County Income Limit \$ _____	_____

Please complete the back side of this pre-application also and mail completed form to:
**NENEDD
ATTN: Housing Department
111 South 1st Street
Norfolk, NE 68701**



1. Are you pre-approved for a mortgage? Yes No For how much? \$_____

2. Primary lender you are working with: _____

Phone #: (_____) _____

3. Name of realtor you are working with: _____

Phone #: (_____) _____

4. Do you have a property in mind? Yes No Street Address: _____

City, State, Zip: _____

5. When do you anticipate closing on the loan: _____

6. How much direct homebuyer assistance do you need? \$_____

7. Information for Government Monitoring Purposes

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's 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 provides that a lender may not discriminate on the basis of this information, 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, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER	CO-BORROWER
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> American Indian/Alaskan Native & Black African American <input type="checkbox"/> Other Multi-Racial	Race: <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> American Indian/Alaskan Native & Black African American <input type="checkbox"/> Other Multi-Racial
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

