



MIAMI-DADE AFFORDABLE HOUSING FOUNDATION, INC.

19 West Flagler Street, Suite 311, Miami, Florida 33130

Phone: (305) 373-9750 E-mail: mdahfi@bellsouth.net

September 28, 2005

FIRST-TIME HOME BUYER PRE-QUALIFICATION APPLICATION

Print, complete, sign and mail to us along with a money order payable to: **Miami-Dade Affordable Housing Foundation, Inc.** that would include a \$25 application fee plus a \$15 fee for each person's credit report (tri-merged from three major credit bureaus in the U.S. – examples: one individual \$40, a married couple \$40, two individuals \$55, three individuals \$70, four individuals \$85). We will not process your application and you will not be considered official Home Buyer Club members until we receive the full payment. Additionally, copies of the following documents are required in order to create your file:

- 1- Explanation letters, bankruptcy documents, divorce decree (if applicable);
- 2- Two most recent bank statements;
- 3- Two most recent pay stubs, if paid bi-weekly. Four most recent pay stubs, if paid weekly;
- 4- Social Security, Pension, Child Support (include any other benefit statement letters);
- 5- IRS W-2's together with complete federal tax returns for the last two years. If self-employed, a current profit and loss statement is also required;
- 6- Birth certificates for all dependent children;
- 7- Florida identification, driver's license or passport.

Referred by:

I. BORROWER INFORMATION

Borrower's Name (include Jr. or Sr., if applicable)

Social Security Number	Home Phone	Alternate Phone	Date of Birth
Marital Status (check one): Married _____ Unmarried _____ Separated _____		Dependents: No. _____ Ages: _____	
Current Address			Monthly Rent \$
Street: _____ Apt. _____			Yrs. At present address
City	State	Zip	

II. EMPLOYMENT AND MONTHLY INCOME INFORMATION

Name and Address of Employer		Yrs. (from – to present)
Name _____		
Street: _____ Suite _____		Business Phone
City	State	Zip
Position/Title/Type of Business		
Gross Monthly Income \$	Overtime \$	Bonus \$

OTHER INCOME

Child Support \$	Alimony &	Social Security \$	Pension \$	Other Income \$
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If employed in current position for less than two years complete the following:

Name and Address of Previous Employer		Dates (from – to)
Name _____		
Street: _____		Business Phone
City	State	Zip
Title	Reason For Leaving	Monthly Income \$

III. ASSETS AND LIABILITIES

Assets: Bank Accounts – Checking, Savings, etc.

Name of Bank	Address of Bank	Account Number	Type of Account	Estimated Current Balance
				\$
				\$
				\$
Total Assets				\$

Liabilities: Credit Cards – Department Stores, Banks, Car, Student Loan, etc.

Name of Creditor	Address of Creditor	Account Number	Monthly Payment You Make	Estimated Balance You Owe
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
Total Debt			\$	\$

Landlords (Past Two Years)

Name of Landlord	Address of Landlord	Dates You Rented

Have you had a foreclosure or repossession or filed bankruptcy in the last 7 Years?

(Check One) Yes _____ No _____

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CO-BORROWER

September 28, 2005

I. CO-BORROWER INFORMATION				
Borrower's Name (include Jr. or Sr., if applicable)				
Social Security Number	Home Phone	Alternate Phone	Date of Birth	
Marital Status (check one): Married _____ Unmarried _____ Separated _____		Dependents: No. _____ Ages: _____		
Current address			Monthly Rent \$	Yrs. at present address
Street: _____ Apt. _____				
City	State	Zip		
II. EMPLOYMENT AND MONTHLY INCOME INFORMATION				
Name and Address of Employer			Yrs. (from – to present)	
Name _____			Business Phone	
Street: _____ Suite _____				
City	State	Zip		
Position/Title/Type of Business				
Gross Monthly Income \$	Overtime \$	Bonus \$		
OTHER INCOME				
Child Support \$	Alimony \$	Social Security \$	Pension \$	Other Income \$
If employed in current position for less than two years complete the following:				
Name and Address of Previous Employer			Dates (from – to)	
Name _____			Business Phone	
Street: _____ Suite _____				
City	State	Zip		
Title _____			Monthly Income \$	
Reason For Leaving				

III. ASSETS AND LIABILITIES

Assets: Bank Accounts – Checking, Savings, etc.

Name of Bank	Address of Bank	Account Number	Type of Account	Estimated Current Balance
				\$
				\$
				\$
				\$
Total Assets				\$

Liabilities: Credit Cards – Department Stores, Banks, Car, Student Loan, etc.

Name of Creditor	Address of Creditor	Account Number	Monthly Payment You Make	Estimated Balance You Owe
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
Total Debt			\$	\$

Landlords (Past Two Years)

Name of Landlord	Address of Landlord	Dates You Rented

Have you had a foreclosure or repossession or filed bankruptcy in the last 7 Years?

(Check One) Yes _____ No _____

I/We understand that my/our application will not be processed and I/we will not be considered official Home Buyer Club member(s) until my/our full payment is received. I/We have attached copies of the following documents (mark with X):

- 1- Explanation letters, bankruptcy documents, divorce decree (if applicable).
- 2- Two most recent bank statements.
- 3- Two most recent pay stubs, if paid bi-weekly. Four most recent pay stubs, if paid weekly.
- 4- Social Security, Pension, Child Support (include any other benefit statement letters).
- 5- IRS W-2's together with complete federal tax returns for the last two years. If self-employed, a current profit and loss statement is also required.
- 6- Birth certificates for all dependent children.
- 7- Florida identification, driver's license, or passport.

DISCLOSURE:

I/We understand that, this is not an application for extension of credit or a commitment to lend. It is offered to assist the home buyer(s) in establishing a realistic price range. There are additional factors involved in determining an applicant's qualification, including a recent credit report. By signing below I/we acknowledge that the information provided is true and complete to the best of my/our knowledge. I/we hereby authorize the Home Buyers Club to obtain all information necessary, including a credit report, to assist me/us in an evaluation of capacity to successfully accomplish home ownership. I/we understand that the information may be shared with lenders in an effort to determine eligibility for mortgage financing and/or develop a plan to correct qualification deficiencies in the pursuit of a mortgage approval.

Applicant/Borrower:	Date:
X	X
Applicant/Co-Borrower:	Date:
X	X
Applicant/Co-Borrower:	Date:
X	X
Applicant/Co-Borrower:	Date:
X	X

INFORMATION FOR MONITORING PURPOSES

You are not required to furnish this information, but are encouraged to do so.

Race/ National Origin: (check one)

- I do not wish to furnish this information
- Black, not of Hispanic origin White, not of Hispanic origin
- Hispanic Other, (specify) _____

Sex: Female Male

Office Use Only

Pre-qualified by:	Date:
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