

APPLICATION TO PURCHASE AFFORDABLE HOUSING

PERSONAL INFORMATION

APPLICANT

Name _____
Address _____
City _____ State _____ Zip _____
Home Telephone _____ Social Security Number _____

CO-APPLICANT

Name _____
Address _____
City _____ State _____ Zip _____
Home Telephone _____ Social Security Number _____

EMPLOYMENT/INCOME INFORMATION

EMPLOYER

Name _____
Address _____
City _____ State _____ Zip _____
Telephone No. _____
Annual Gross Salary _____ OT/Bonus/Other _____
Total Earnings _____ Monthly Income _____
List All Other Sources & Annual Amount Of Income _____
List All Other Sources & Annual Amount Of Income _____
List All Other Sources & Annual Amount Of Income _____

EMPLOYER

Name _____
Address _____
City _____ State _____ Zip _____
Telephone No. _____
Annual Gross Salary _____ OT/Bonus/Other _____
Total Earnings _____ Monthly Income _____
List All Other Sources & Annual Amount Of Income _____
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List All Other Sources & Annual Amount Of Income _____

OCCUPANCY OF AFFORDABLE UNIT

Name Of Occupant _____	Age _____	Sex _____
Name Of Occupant _____	Age _____	Sex _____
Name Of Occupant _____	Age _____	Sex _____
Name Of Occupant _____	Age _____	Sex _____

PREFERENCE INFORMATION

Applicant	Do you live in Wilton? _____	If Yes, State Length Of Residency _____
Co-Applicant	Do you live in Wilton? _____	If Yes, State Length Of Residency _____

IMPORTANT: SEE OVER FOR SUPPLEMENTAL APPLICATION

SUPPLEMENTAL APPLICATION FORM

NAMES OF UNIT OCCUPANTS (Applicant, Co-Applicant, Parent, Child, Other)

	Applicant	Age	Sex
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SAVINGS

(List all Savings, Checking, Certificates of Deposit, IRA's, Money Market Accounts, Retirement Plans, Interest Income, Stocks, Bonds and any Pensions) Use a separate sheet if necessary

Name of Bank or Source of Income	Account Number	Balance
_____	_____	_____
Name of Bank or Source of Income	Account Number	Balance
_____	_____	_____
Name of Bank or Source of Income	Account Number	Balance
_____	_____	_____
Name of Bank or Source of Income	Account Number	Balance
_____	_____	_____
Name of Bank or Source of Income	Account Number	Balance
_____	_____	_____

REAL ESTATE (Currently owned by Applicant, Co-Applicant, &/or any other Occupant listed above.)

Property Address	Estimated Value	Outstanding Mortgage
_____	_____	_____
Property Address	Estimated Value	Outstanding Mortgage
_____	_____	_____

CREDIT CARD

Name	Outstanding Balance	Monthly Payment	# of Payments Remaining
_____	_____	_____	_____
Name	Outstanding Balance	Monthly Payment	# of Payments Remaining
_____	_____	_____	_____
Name	Outstanding Balance	Monthly Payment	# of Payments Remaining
_____	_____	_____	_____
Name	Outstanding Balance	Monthly Payment	# of Payments Remaining
_____	_____	_____	_____

OTHER FIXED OBLIGATIONS (Child care expenses, Alimony and Child Support Payments)

Type of Expense	Outstanding Balance	Monthly Payment
_____	_____	_____
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_____	_____	_____
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_____	_____	_____

The selection of purchasers for affordable housing units will be undertaken in accordance with such marketing program as is approved by the Town of Wilton.

Verification is needed for all the above mentioned. Please attach copies of most recent paycheck stub(s)*, last 2 years income tax returns, bank statements and supporting documentation showing balance, interest earned & other such information requested above. The Town of Wilton requires documentation of all information on your application. Failure to report all assets, their true market value & or income produced by such assets shall result in rejection of the application and possible prosecution for fraud. Any applicant who has assigned, conveyed, transferred or otherwise disposed of property or other assets within the past two years, without fair consideration in order to qualify for this housing shall be disqualified.

Any applicant making a false statement in connection with this application shall be subject to the laws relating to perjury of the State of New Jersey.

* Only attach for applicant & co-applicant

Declaration Statement for Affordable Housing

I/We, the undersigned, state that I/We have read and answered fully and truthfully each of the preceding questions for all members of our household/occupant(s) who are to occupy the unit in the above house for which the application is made, all of whom are listed above.

I/We hereby certify that I/We, Do/Will Not maintain housing in another location. I/We further certify that this will be my/our permanent residence. I/We understand that my/our eligibility for housing will be based on applicable income limits and by the Town of Wilton's selection criteria. I/We certify that all information in this application is true to the best of my/our knowledge and I/We understand that false statements or information are punishable by law and will lead to cancellation of this application. All adult applicants, 18 or older, must sign the application below.

I/We further understand that as part of the application process my/our credit reference(s) may be checked without further authorization and that:

I/We hereby authorize the release of the requested information about me/us.
A photocopy of this form shall be valid as the original. Information
obtained under this consent is limited to information that is no older
than 12 months.

Applicant(s) Name (Please Print)

Applicant(s) Name (Please Print)

Applicant(s) Name (Please Print)

Applicant(s) Name (Please Print)

Applicant(s) Signature

Date

Applicant(s) Signature

Date

Applicant(s) Signature

Date

Applicant(s) Signature

Date