

Instructions: Complete all information on this application. Please print. Use ink.

Borrower Information

Last Name		Fi	MI	
				Yes No
Social Security (or Tax ID Numb	Date of Bir er)	th Dependent 18	s under Other Dependents	Disabled Household
Household Size	e Employer			Years Employed
()			()	
Business Phone	2	Extension	Home Phone	
Mailing Addres	S		Mailing Address 2	
City		State		Zip Code
information, su data on individ classified as pri this informatio approve your a it. Where acces authorized. You Minnesota Stat	uch as income, credit repo uals by Minnesota Statute vate data on individuals u n; but if you do not provid pplication. The informatic ss to the data is authorized ur name, address, and am	rts, financial statement is 462A.065. Other data nder Minnesota Statut le it, we may be unable on will be shared with M d by state statute or feo ount of assistance you . The disclosure of you	to determine your eligibili Ainnesota Housing staff wh deral law, it may be made a apply for and receive are c Social Security Number or	ns, are classified as private ot described above are ou are not required to provide ty for this program and nose jobs require them to see
Sex	Male Female	Ethnicity	Hispanic or Latino Not Hispanic or Latino	
Marital Status	 Married Not Married Separated 	Race (select 1 or more)	White Asian Black or African Americ American Indian or Alas Native Hawaiian or Oth	skan Native
I do not wi	sh to furnish this informat	ion		

MURL_Borrower_Application_State

Co-Borrower Information (Repeat for all Co-Borrowers)

Last Name		F	First Name MI	
Social Security (or Tax ID Number) Sex Male Ethnic		[Ethnicity	Date of Birth	
	Female		Not Hispanic or Latino	
Marital Status	Married Not Married Separated	Race (select 1 o more)	White Asian Black or African American American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander	
I do not wish to furnish this information				
Relationship to Borrower			ead of Household Other Adult endent Spouse	

Household Information

Income

List all income for household residents age 18 or over. Income listed should include all income which can be reasonably expected to be received during the next 12 months.

Income includes, but is not limited to, the following sources by any resident, 18 or over:

Base Pay	Educational Grants
Self-Employment	Transfer Payment Income (Unemployment Compensation, Public Assistance, Worker's Compensation, Disability, VA, Pensions, Social Security Benefits)
Variable Income (Bonus, Overtime, Shift Pay, Commissions, Tips, Seasonal)	Interest/Dividend
Flexible Benefit Cash	Rental Income (If you have lease with renter)
Housing Car/Allowance	Roommate's Income (If there is not a lease with renter)
Child/Spousal Support	Other

Name of Resident	Source	Annual Income
	Total Annual Household Income \$	

Assets

List the cash value of assets held by all household residents. If money is owed on any item, the value listed should equal the market value of the item minus the amount that is owed.

Cash on hand, in checking accounts, or in savings accounts (including those held in trust).	
	\$
Cash value of Securities of U.S. Savings Bonds, IRAs, 401K, etc.	\$
Redemption value of life insurance policies.	\$
Personal property including, but not limited to: farm equipment, farm stock, business machinery, and/or inventory, additional vehicles, etc. excluding household furnishings, clothing, and one personal vehicle.	\$
Other (i.e., other land holdings, etc. specify):	\$
TOTAL ASSETS	\$

Business assets of self-employed individuals must be verified by attaching a net worth statement signed and prepared by an impartial third party.

Debt History

List the outstanding balance of all loans and credit cards and the balance you currently owe.

Bank/Credit Card Name	Outstanding Balance	Current
		Yes No
		Yes No
		Yes No

Credit History

Your credit score will be used as a factor to determine whether you do not qualify for traditional mortgage financing.

I allow the MURL Program Administrator to request my credit score and/or credit history from a reporting agency.

I do not wish to allow the MURL Program Administrator to request my credit score and/or credit history from a reporting agency.

Certification:

I/We certify that the statements contained in this application are true, accurate and complete to the best of my/our knowledge and belief.

Each of the undersigned hereby acknowledge that any owner of this loan, its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the loan, for any legitimate business purpose through any source, including a source named in this application or a consumer reporting agency.

Signatures: All residents age 18 or over with an income must sign this application.

Borrower Signature		Date of Application
Co-Borrower Signature	-	Date of Application
Co-Borrower Signature	-	Date of Application
	÷	
	\$	
MURL Program Administrator		Estimated Contract for Deed Amount