

**QUALIFYING PRE-APPLICATION FOR HOME REPAIR PROGRAM**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ E-mail: \_\_\_\_\_

CELL #: \_\_\_\_\_

**Please check your answers**

Is your home within the ***incorporated boundaries*** of your city  Yes  No

Have you owned and lived in your home for at least 1 year?  Yes  No

Do you now have Veterans Administration loan on your home?  Yes  No

What is the present balance on your home mortgage? Amount \$ \_\_\_\_\_

Do you have a second mortgage on your home?  Yes  No Amount, if any \$ \_\_\_\_\_

Do you have a Home Equity Loan?  Yes  No Amount, if any \$ \_\_\_\_\_

Are your mortgage payments up to date? (check boxes below)

*If no, they must be current before we can process this pre- application.*

**1<sup>st</sup> Mortgage**)  Yes  No      **2<sup>nd</sup> Mortgage**)  Yes  No      **Home Equity**)  Yes  No

What is the present estimated market value of your home? Amount \$ \_\_\_\_\_

Are your property taxes paid up to date?  Yes  No

*If no, they must be current before we can process this pre-application.*

Is your home presently involved in foreclosure proceedings?  Yes  No

*If yes, we can't process your pre-application until this matter has been resolved.*

Have you ever participated in the Home Repair Program before?  Yes  No

Are you presently involved in bankruptcy proceedings?  Yes  No

Do you owe IRS any back taxes?  Yes  No

*If so, you must provide copy of payment agreement to NWHP.*

Are you willing to assume a **no interest lien** on your property for the total amount of rehab, which must be paid off when your house is sold? (**lien is required to proceed**)  Yes  No

Please indicate the number of people living in the household. **Adult** \_\_\_\_\_ **Child** \_\_\_\_\_

Do you have physical assets (excluding your home) exceeding \$150,000.00  Yes  No

Please list the names that are on the title of the property \_\_\_\_\_

Please indicate the total income of **every one** living in the household. \$ \_\_\_\_\_

*You must include anyone **18 yrs.** and over living in the household, all parties' information will be verified.*

Do you or anyone in your home own a business?  Yes  No

Are you or anyone in the household self-employed?  Yes  No

Please list the types of repairs you need to have done on your home:

Mortgage/HE
Totals =
\$

**Please return this form via mail: 1701 E. Woodfield Rd, Suite 203, Schaumburg, IL 60173**

via fax: 847.969.0564 via email: [michellehill@nwHP.net](mailto:michellehill@nwHP.net)

If you have any questions about this pre-application, please call 847.969.0561 or email [michellehill@nwHP.net](mailto:michellehill@nwHP.net)