



HOMEOWNERSHIP CENTER, INC.

1404 N. Randolph Avenue PO Box 1579 Elkins, WV 26241
(304) 636-6495 Fax (304) 636-4125

www.hocwv.org

Authorized Use Only Received:
Date: _____
Time: _____

PERSONAL PROFILE (THIS IS NOT A MORTGAGE APPLICATION)

BORROWER				CO-BORROWER			
Name Last First MI				Name Last First MI			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Social Security Number			Date of Birth	Social Security Number			Date of Birth
Home Phone _____				Home Phone _____			
Years of School Completed _____				Years of School Completed _____			
Number of Dependents _____ (Other than yourself)				Number of Dependents _____ (Other than those listed by Borrower)			
Ages of Dependents _____				Age of Dependents _____			
Are there any non-dependents that will be living in the home? (Other than yourself or co-borrower)				Are there any non-dependents that will be living in the home? (Other than yourself or co-borrower)			
<input type="checkbox"/> YES or <input type="checkbox"/> NO If yes, list below:				<input type="checkbox"/> YES or <input type="checkbox"/> NO If yes, list below:			
Name		Relationship	Age	Name		Relationship	Age
Name		Relationship	Age	Name		Relationship	Age
Employer				Employer			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Position/Title			Phone Number	Position/Title			Phone Number
Date Hired			Number of hours per week	Date Hired			Number of hours per week
\$ _____				\$ _____			
Hourly rate or salary amount weekly/bi-weekly/monthly				Hourly rate or salary amount weekly/bi-weekly/monthly			
Previous or Second Employer				Previous or Second Employer			
Address				Address			
City		State	Zip Code	City		State	Zip Code
Position/Title			Phone Number	Position/Title			Phone Number
Dates Employed			Number of hours per week	Dates Employed			Number of hours per week
\$ _____				\$ _____			
Hourly rate or salary amount weekly/bi-weekly/monthly				Hourly rate or salary amount weekly/bi-weekly/monthly			
If employed for LESS than TWO years at one place continue listing employers on a separate page.				If employed for LESS than TWO years at one place continue listing employers on a separate page.			
Borrower's Signature			Date	Borrower's Signature			Date
I authorize the HomeOwnership Center to research my credit file with my pursuit of a loan to purchase real estate				I authorize the HomeOwnership Center to research my credit file with my pursuit of a loan to purchase real estate			

INCOME, CREDIT, SAVINGS**BORROWER****CO-BORROWER**

What is your current rent, NOT including utilities?

\$ _____

\$ _____

How long have you lived there?

Have you owned a home in the last three years?

Yes No

Yes No

Are you married, single, divorced, widowed, separated?

M S D W Sep

M S D W Sep

Have you ever filed Bankruptcy?

Yes No

Yes No

If yes, when was it discharged?

Part-time seasonal employment not listed before?

Yes No

Yes No

How long in this field?/Approximate yearly income

_____/ \$ _____

_____/ \$ _____

Do you receive Child Support or Alimony?

Yes No

Yes No

Can you document this income?

Yes No

Yes No

How long will it continue?/Monthly amount receive

_____/ \$ _____

_____/ \$ _____

Monthly Income from Social Security/Disability/
Retirement/Death Benefits

\$ _____

\$ _____

Any other monthly income not listed before:

Source: _____

\$ _____

\$ _____

LIABILITIES**BORROWER****CO-BORROWER**

Rate your credit: (ex. None, poor, good, etc.)

Do you have any outstanding collections or judgements?

Yes No

Yes No

If yes, approximate amount you still owe:

\$ _____

\$ _____

Monthly Child Care, Child Support or Alimony payments: _____

ADDITIONAL INFORMATION (REQUIRED)**Do you have a contract on a house at this time?****Yes No****Are you working with a real estate agent?****Yes No****Do you have access to the Internet?****Yes No****Email Address:** _____**Do you receive assistance from the Section 8
rental assistance program?****Yes No****Are you an U.S. veteran?****Yes No****Are you Foreign Born?****Yes No****How did you hear about our services?** _____**OTHER INFORMATION (OPTIONAL)****Borrower: Ethnicity**

Hispanic or Latino: Yes No

Race:

American Indian or Alaska Native _____

Asian _____ Black or African American _____

Native Hawaiian or Other Pacifica Islander _____

White _____ Other _____

Sex:

Male _____ Female _____

Co-Borrower: Ethnicity

Hispanic or Latino: Yes No

Race:

American Indian or Alaska Native _____

Asian _____ Black or African American _____

Native Hawaiian or Other Pacifica Islander _____

White _____ Other _____

Sex:

Male _____ Female _____

Any Additional Information: