

of San Antonio & Guadalupe Valley

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Mortgage Counseling Questionnaire

NOTE: <u>IF BOTH ADULTS ARE MARRIED **OR** LIVING TOGETHER THEY MUST COMPLETE THE APPLICANT</u> AND CO-APPLICANT SECTIONS. (EVEN IF THE CO-APPLICANT IS NOT EMPLOYED)

Applying for a home in: (Circle one) **Bexar County Guadalupe County Applicant** Co-Applicant Name: Name: Soc. Sec. #. Soc. Sec. #. Date of Birth: Date of Birth: Married Divorced Married Divorced Marital Status: Marital Status: (Circle One) (Circle One) Separated Single Widowed Separated Single Widowed Address: Apt #: City: _____ Zip Code: _____ Home Phone: Cell Phone: Email: ______ Please answer the following questions: Does the applicant or co-applicant currently own a house <u>or</u> has either person owned a house within the past three (3) years? \square YES \square NO How did you hear about Habitat for Humanity? □Facebook □Billboard □Family/Friend □Employer □Flyer □TV Other: APPLICANT INCOME INFORMATION Full-time Job Part-time job (if you have one) \$_____ per hour _____ hours **per week** \$ per hour hours per week or if not paid by the hour \$_____ **or** if not paid by the hour \$ month

If you receive income from any of the following sources, please provide monthly income amount:

Child Support	SSI	Social Security	Veterans Affairs (VA)	Active/Retired Military	Pension/Other
\$	\$	\$	\$	\$	\$

Full -time Job			Part-time job (if you have one)					
\$ per l	nour	hours per week	\$ per hour h			nours per week		
or if not paid b	y the hour \$	month	or if not paid	by the hou	ur \$	month		
f you receive incom	ne from any of the fol	lowing sources, please	e provide monthly	income am	nount:			
Child Support	SSI	Social Security	Veterans Active/Retired Affairs (VA) Military		Pension/Other			
\$	\$	\$	\$	\$		\$		
Name	ame		APPLICANT		Veteran (Circle One) Y N	Monthly Incom		
Name		Relationship to Applicant		Age	Veteran (Circle One)	Monthly Incom if applicable		
			APPLICANT CO-APPLICANT, if applicable		Y N Y N			
		CO-AFFLICA	II V I , if applicable		YN	\$		
					YN	\$		
					Y N	\$		
					Y N	\$		
					Y N	\$		
DEBTS What are your current monthly paymen child support. Do not include utility bills Name/Type of Accou		, subscriptions, phone bill etc L		card, personal and/or ist all debts you are resp				



Applicant Signature

Co-Applicant Signature

Date

Date