



The Bay Area Affordable Homeownership Alliance

# BELOW MARKET RATE PURCHASE PROGRAM PRESCREEN APPLICATION

ADDRESS, NAME OF DEVELOPMENT, OR CITY/COUNTY/REGION(S) APPLYING FOR:

Today's Date (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

Total # in Household: \_\_\_\_

Please print names:

Borrower First Name: \_\_\_\_\_ MI: \_\_\_\_

Co-Borrower First Name: \_\_\_\_\_ MI: \_\_\_\_

Borrower Last Name: \_\_\_\_\_

Co-Borrower Last Name: \_\_\_\_\_

**PLEASE READ:** Applicants must complete this application thoroughly and accurately. Applications must be received before due date and time. All requested information must be provided. A late application and an incomplete or wrongfully filled out application will result in disqualification from the screening and lottery process.

**Application deadlines will be sent out separately. Applications must be submitted by either:**

- Scanning and uploading to: myhomegateway.org
- Scanning & e-mailing to: bmr@myhomegateway.com
- Faxing application to: (415) 231-5181
- Mailing application to: BAAHA, ATTN: Program Administrator  
5517 Geary Blvd #206  
San Francisco, CA 94121

## BUYER/BORROWER 1 (B1)

FIRST NAME: _____		MI: _____	LAST NAME: _____		DATE OF BIRTH (MDY): ____/____/____	SSN: ____-____-____	
<b>NO PO BOX #s</b>	HOME STREET ADDRESS: _____		APT #: _____	ADDRESS CITY: _____		STATE: _____	ZIP: _____
EMAIL ADDRESS: _____				CELL PHONE #: (____) ____-____		WORK PHONE #: (____) ____-____	
Do you have a homebuyer education certificate (circle one)? If YES, supply year achieved and source. <b>NO</b>   YES, in <u>20</u> from _____			ADDITIONAL INFORMATION:				

## BUYER/BORROWER 2 (B2) a. Relationship to B1?: \_\_\_\_\_ | b. check if same address as B1:

FIRST NAME: _____		MI: _____	LAST NAME: _____		DATE OF BIRTH (MDY): ____/____/____	SSN: ____-____-____	
<b>NO PO BOX #s</b>	HOME STREET ADDRESS: _____		APT #: _____	ADDRESS CITY: _____		STATE: _____	ZIP: _____
EMAIL ADDRESS: _____				CELL PHONE #: (____) ____-____		WORK PHONE #: (____) ____-____	
Do you have a homebuyer education certificate (circle one)? If YES, supply year achieved and source. <b>NO</b>   YES, in <u>20</u> from _____			ADDITIONAL INFORMATION:				

## COMBINED HOUSEHOLD INFORMATION

# OF INDEPENDENTS: _____	# OF DEPENDENTS: _____	COMBINED TOTAL # IN HOUSEHOLD: _____	Have B1 or B2 owned a home in the last 3 years to date (circle one)? If YES, supply date of closing. <b>NO</b>   YES ____/____/____  If you currently own, what is the current market value of your home? \$ _____	
B1 MONTHLY RENT: \$ _____	B2 MONTHLY RENT (if different address): \$ _____	B1 YEARS AT CURRENT ADDRESS: _____	B2 YEARS AT CURRENT ADDRESS: _____	

a. Are you working with a realtor?: **NO** | YES name & contact info: \_\_\_\_\_

b. Are you working with a lender?: **NO** | YES name & contact info: \_\_\_\_\_

## B1 FINCANIAL & CREDIT INFORMATION

<p><b>NAME OF EMPLOYER(S) &amp; GROSS AMOUNT(S) PER YEAR:</b></p> <p>1. _____ : \$ _____</p> <p>2. _____ : \$ _____</p> <p>3. _____ : \$ _____</p> <p>4. _____ : \$ _____</p>		<p><b>ASSET ACCOUNTS (CASH &amp; EQUIVALENT) – SPECIFY TYPE OF ACCOUNT, NAME OF BANK, &amp; AMOUNT:</b></p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p>																			
<p><b>RETIREMENT &amp; INVESTMENT ACCOUNTS – SPECIFY TYPE OF ACCOUNT &amp; AMOUNT:</b></p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p>		<p><b>DEBTS (INSTALLMENTS, CREDIT CARDS, ETC.):</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">LENDER/CREDITOR</th> <th style="width: 33%;">CURRENT BALANCE</th> <th style="width: 33%;">MIN. MOS PYMNT</th> </tr> </thead> <tbody> <tr> <td> </td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td> </td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td> </td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td> </td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td> </td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table>		LENDER/CREDITOR	CURRENT BALANCE	MIN. MOS PYMNT		\$	\$		\$	\$		\$	\$		\$	\$		\$	\$
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<p><b>FICO/CREDIT SCORE:</b></p> <p>_____</p>	<p><b>CITY EMPLOYER LOCATED:</b></p> <p>1. _____ 3. _____</p> <p>2. _____ 4. _____</p>																				

## B2 FINCANIAL & CREDIT INFORMATION

<p><b>NAME OF EMPLOYER(S) &amp; GROSS AMOUNT(S) PER YEAR:</b></p> <p>1. _____ : \$ _____</p> <p>2. _____ : \$ _____</p> <p>3. _____ : \$ _____</p> <p>4. _____ : \$ _____</p>		<p><b>ASSET ACCOUNTS (CASH &amp; EQUIVALENT) – SPECIFY TYPE OF ACCOUNT, NAME OF BANK, &amp; AMOUNT:</b></p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p> <p>_____ : \$ _____</p>																			
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IS THERE ANY OTHER INFORMATION THAT YOU FEEL WE NEED OR INFORMATION RELATED TO THE ABOVE QUESTIONS?

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## BUYER ACKNOWLEDGEMENTS

Please read, sign, and date the following acknowledgment.

I/We verify that the above information is truthful and accurate. Information provided and derived in/from this application will be used to determine your program eligibility and home purchase capacity. Inaccurate or wrongful information could, at the Program Administrator's discretion, disqualify you from the program screening process. I/We authorize the Bay Area Affordable Homeownership Alliance to share our information with an affiliated organization for the purpose of completing the program screening process.

This application is only used to establish a preliminary homebuyer Program eligibility determination and will be used to match information to restriction criteria of program related properties available in the requested areas. It is important that the application is filled out accurately. Wrongful and withheld information could lead to the disqualification of the applicant to participate in the homebuyer program. Make certain to fill out all sections pertaining to your situation. Please make certain to write legibly. We are not responsible for not being able to contact you if you have not supplied your contact information or have made it so that it is illegible. The program administrator will verify receipt of your application and contact you with any additional questions or concerns that they may have. All communications will initially be conducted by e-mail. By signing below, I/We understand the nature, guidelines, and restrictions of this prescreen application.

\_\_\_\_\_  
B1 FIRST & LAST NAME

\_\_\_\_\_  
B1 SIGNATURE

\_\_\_\_/\_\_\_\_/\_\_\_\_  
DATE

\_\_\_\_\_  
B2 FIRST & LAST NAME

\_\_\_\_\_  
B2 SIGNATURE

\_\_\_\_/\_\_\_\_/\_\_\_\_  
DATE