APPLICATION CHECKLIST	
Print Your Name Date:	
Please do not use white out on the application. Original application must be submitted; faxed copies are not acceptable.	
☐ All adult household members (18 years of age or older) <u>must</u> sign the application.	
☐ FULLY SIGNED SALES CONTRACT (all parties)	
☐ Attach: Copies of photo ID and Social Security Cards for all household members.	
☐ Attach: Copy of current 2 years income tax return with W2s and/or 1099's for all household members employed ove age of 18.	r the
☐ Attach: Guardian for a minor (except foster children): Please provide official proof of guardianship.	
☐ Attach: Proof of citizenship/ resident alien. Copy of front and back of Alien Registration Cards (Green Card), if any a is not a citizen, voter's registration, or passport.	applicant
☐ Attach: Copy of Birth Certificate for all household members.	
☐ Attach: Six months most current paycheck stubs for all household members who are currently employed.	
□ Attach: Self-employed Requirements: An audited or un-audited financial statement of business income along with a statement from the self-employed giving anticipated net income for the next 12 months. If you are unable to provide this of the following may be accepted: a) Signed and dated copies of prior three (3) years' tax returns along with a state affidavit of anticipated net income for the next 12 months; or b) Signed and dated statements of net income for the months from a certified accountant.	one (1) ement or next 12
☐ Attach: If any household member is receiving Social Security or SSI Benefit, attach a current benefit statement for each	ach
person. (Current benefit statements can be requested in person at your Social Security Administration Office)	
☐ Attach: A commitment/approval letter from a Bank or Lender stating the amount of loan for which you are qu	alified
and the estimated interest rate and terms for a first mortgage.	
Attach: Child Support must be reported for all children who are not living with both of their natural parents. For exa applicants who have children in the household and who are not residing with both natural parents must show that he/she collecting the amount of court ordered support reported in the divorce/separation/child support agreement by providing a court order. If the applicant does not have a court order or if the applicant is not currently receiving the court order support must show proof that he/she has recently opened a child support case (indicating case number) with the past days at the Child Support Enforcement Office, State of Florida Department of Revenue (Telephone number 800.622.5437)	is copy of pport, st 90
Attach: Proof of other income received by any household member, such as: Alimony, Unemployment benefits, Pens	ion
Benefits, or any other income you receive regularly.	
Attach: A complete copy of the last six months bank statements, for all accounts that are open for each household n	nember.
<ul> <li>☐ Attach: A copy of last month's statement for Retirement funds, IRA, State or other funds.</li> <li>☐ Attach: Homebuyer Class Certificate for each buyer</li> </ul>	
<ul> <li>☐ Attach: Proof or marriage, divorce, alimony, child support (If divorced, attach a copy of your Divorce Decree).</li> <li>☐ Attach: If any household member 18 or older is in school and working; a copy of current school registration showing it</li> </ul>	how
many credits they are taking.	now
Attach: Credit Reports (for applicant & co-applicant)	
Attach: Buyer inspection and Lender appraisal for property under purchase contract.	
This program is open to all without regard to race, color, sex, handicap, religion, familial or marital status, or nation origin. The City of Pompano Beach is a first come, first eligible basis. Those who supply the program with all the information needed to process their application while funds are available will be processed first. Your "APPLICATION" will be denied do not provide the requested information. Your "APPLICATION" will be denied if the information is received after all fund been obligated. If you have any questions or need assistance please call the number below.  *NOTE: There are Limited Funds and Restrictions Apply.	ation I if you

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