



BETTER HOUSING

for Tompkins County

950 Danby Rd. / Suite 102 / Ithaca, New York 14850 / Ph: 607-273-2187 / Fax: 607-273-1630

Home Buyer Program Pre-Application/Intake Form

Applicant Name: _____ **Date of Birth:** _____

Name of Employer(s): _____

Co-applicant Name (if applicable): _____ **Relationship:** _____

Name of Co-applicant's Employer: _____

in Household: _____ **Estimated Total Gross Annual Income:** _____

Currently: Own _____ **Rent** _____ **Other (explain)** _____ **Monthly Housing Expense:** _____

Current Address: _____

Email Address: _____

Home Phone(s): _____

Work Phone(s): _____

Cell Phone(s) : _____

Area of County you wish to purchase? _____

How did you hear about us? _____

What obstacles have you faced in purchasing a home?

No Down Payment _____ **Bad Credit** _____ **High Debt** _____ **Divorce/Displaced** _____

Employment Concerns _____ **Insufficient Income** _____ **No Housing to Meet Needs** _____

Taken home buyer education: yes _____ **no** _____ **Workshop dates if registering:** _____

Please check all categories that apply to your household.

Female Head of Household

US Veteran

Single Head of Household

Owned Home in Last 3 Years

Completed by: _____

Date: _____