

# Marion County SHIP Program

## Purchase Assistance Applicant Prescreen

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_

Email \_\_\_\_\_

Household Size/# \_\_\_\_\_ Marital Status \_\_\_\_\_ Disable \_\_\_\_\_

Gross Income:

Including O.T, Child Support, Social Security, Cash Assistance, Pensions.

Household Member #1 Gross Income \_\_\_\_\_

Household Member #2 Gross Income \_\_\_\_\_

Household Member #3 Gross Income \_\_\_\_\_

Household Member #4 Gross Income \_\_\_\_\_

Current Homeowner? Yes No Credit Score \_\_\_\_\_

Judgments Yes No Collections Yes No Bankruptcy Yes No

Ability to save \$1,500 to \$2,000 Yes No

Ability to Attend homebuyer class Yes No



**KAP Design Group**  
**The Perez Team Kiefer Realty**

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