



Neighborhood Housing
KNOXVILLE LEADERSHIP FOUNDATION

Homebuyer Evaluation

Date: _____

Applicant Name: _____

SSN _____

Co-Applicant Name: _____

SSN _____

Address: _____

City, State, Zip: _____

Phone Numbers: _____

How many live in your household? _____

What is your current rent or mortgage payment? \$ _____

Do you have a Section 8 rental voucher? _____ \$ _____ assistance amount

How many places have you lived in the last 2 years? _____

Are you aware of any credit problems we would need to work on? _____

If you know your credit score, what is it? _____

Gross Income (before tax):

(list income for **all** household members)

Person	Source/Employer	Frequency	Amount
	Child support		

Debt:

Source	Final Pmt Due Date	Mo. Payment
Auto		
Student		
Installment		
Revolving		
Other		

(such as Credit Card min mo. Payment)

Employment History (last 2 years):

Person	Employer	Start M/Yr	End M/Yr