CATHOLICS FOR HOUSING, INC.

18139 Triangle Shopping Plaza, Suite 209, Dumfries, VA 22026-2582 Phone (703) 221-4510 Fax (703) 221-3708
Email: cath4hsg@verizon.net www.catholicsforhousing.org

Preliminary Application for NSP Homeownership Initiative
Please print and return to the address above to the attention of Karen DeVito

Name _____
Last Name **First Name** **Middle Initial**

Current Street Address _____

Current City/State/Zip _____

Phone Number _____ **Alternate Phone Number** _____

Email Address _____

Family Composition (Include yourself as Head of Household)

Name	Relationship	Date of Birth	Social Security Number-*optional*
	Head of Household		

Income Information – List GROSS Income from all sources

Name	Source of Income	Amount of Income	Pay period Circle One
			Weekly Bi-weekly Bi Monthly Monthly Annual
			Weekly Bi-weekly Bi Monthly Monthly Annual
			Weekly Bi-weekly Bi Monthly Monthly Annual
			Weekly Bi-weekly Bi Monthly Monthly Annual
			Weekly Bi-weekly Bi Monthly Monthly Annual

I/We understand that eligibility for this program is income based. I/We hereby certify that the income shown on this application represents the **total gross** household income as of this date, _____, 2011. I/We understand that this program will be developed throughout the coming year.

_____ _____
Signature, Head of Household Printed Name

_____ _____
Signature, Spouse or Co-Head of Household Printed Name

EQUAL HOUSING OPPORTUNITY

PROUD MEMBER OF United Way
United Way of the National Capital Area

Submit