



**Moorhead Neighborhood Services Division
Home Improvement Programs**
PO Box 779, Moorhead, MN 56561-0779
(218) 299-5434

Thank you for your interest in applying for a Moorhead Home Improvement Loan. We look forward to working with you on a project that will improve your home and help to enhance the neighborhood in which you live.

Please submit your completed application and \$50 processing fee*, made payable to the City of Moorhead, to the following address:

Mary L. Schmitt
Neighborhood Services Division
City of Moorhead
500 Center Ave, 4th Floor
Moorhead MN 56560

Phone: 218-299-5434
Fax: 218-299-5399

Once city staff has reviewed your application, you will be contacted to set up an inspection time. Applications and inspections are processed in the order in which they are received.

For additional information, you can visit the Housing section of the City's website: www.cityofmoorhead.com

SPECIAL ACCOMMODATIONS

Do you need this application to be **translated** into another language?
If so, what language? _____

Do you have a **disability** that requires a special accommodation?
If so, what accommodation? _____

Call 299-5434 or send this page to the above address and we will make the necessary arrangements as quickly as possible.

*If household qualifies for HUD sponsored program, the processing fee will be returned to applicant.



APPLICATION MOORHEAD HOME IMPROVEMENT LOANS

Please complete all questions.

SECTION A: General Information

NAME - APPLICANT #1: _____
NAME - APPLICANT #2: * _____
ADDRESS: _____
NUMBER OF DEPENDENTS: _____ **AGES:** _____
PHONE: Home: _____ Work: _____ Other: _____
E-MAIL: _____

**Include name of individual to be listed on legal documents with applicant, if applicable.*

SECTION B: Race/Ethnicity

| | |
|---|---|
| <p>Applicant #1: (Check one)</p> <p> <input type="checkbox"/> a. White <input type="checkbox"/> b. Black/African American <input type="checkbox"/> c. Asian <input type="checkbox"/> d. American Indian/Alaskan Native <input type="checkbox"/> e. Native Hawaiian/Other Pacific Islander <input type="checkbox"/> f. American Indian/Alaskan Native & White <input type="checkbox"/> g. Asian & White <input type="checkbox"/> h. Black/African American & White <input type="checkbox"/> i. American Indian/Alaskan Native & Black <input type="checkbox"/> j. Other Multi-Racial </p> <p>Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic</p> <p>Disabled: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>NOTE: Racial/ethnic group data and disability information is obtained for statistical purposes only. Data will not be considered by any local or federal official in determining the applicant's eligibility.</p> | <p>Applicant #2: (Check one)</p> <p> <input type="checkbox"/> a. White <input type="checkbox"/> b. Black/African American <input type="checkbox"/> c. Asian <input type="checkbox"/> d. American Indian/Alaskan Native <input type="checkbox"/> e. Native Hawaiian/Other Pacific Islander <input type="checkbox"/> f. American Indian/Alaskan Native & White <input type="checkbox"/> g. Asian & White <input type="checkbox"/> h. Black/African American & White <input type="checkbox"/> i. American Indian/Alaskan Native & Black <input type="checkbox"/> j. Other Multi-Racial </p> <p>Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic</p> <p>Disabled: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>NOTE: Racial/ethnic group data and disability information is obtained for statistical purposes only. Data will not be considered by any local or federal official in determining the applicant's eligibility.</p> |
|---|---|

SECTION C: Property to be Improved

Do you currently own your home or are you intending to purchase a home that needs rehab?
 Own Purchase

CURRENT ADDRESS: _____
Date Purchased (approx): _____
Purchase Price: \$ _____
Year Built: _____

Is the property in the 100-year flood plain? Yes No

Was the home purchased using downpayment assistance (Minnesota Housing Finance Agency or other)?
 Yes No

SECTION D: Income and Credit Information

Please complete the attached "Loan Application" to assist with application processing. Also note here if you have income from: Social Security Veterans Benefits Railroad Retirement Employment

The following information will help us match you to the most appropriate program:

What is your gross annual household income: \$_____

SECTION E: Property Information

Please answer the following questions ONLY if certain:

Heating: Oil Gas Electric Other _____

Square Footage: 1st Floor: _____ 2nd Floor: _____ # of Bedrooms: 1st Floor: _____ 2nd Floor: _____

Is house insulated? Ceilings: Yes No Walls: Yes No Floor: Yes No
Storm Windows/Doors: Yes No

What types of work are you interested in completing? (Please check and describe.)

- Electrical _____
- Plumbing _____
- Heating _____
- Foundation _____
- Roof _____
- Windows and/or Doors _____
- Siding/Exterior Paint _____
- Garage _____
- Finish basement _____
- Landscaping/Deck _____
- Addition _____
- Kitchen remodel _____
- Bathroom remodel _____
- Interior Finishes _____
- Accessibility Changes _____
- Convert property from rental _____
- Other (describe) _____

Estimated Loan Amount: \$_____

SPECIAL NEEDS OR OTHER REQUIREMENTS:



CITY OF MOORHEAD

HOME IMPROVEMENT LOAN APPLICATION

CITY USE ONLY: _____ DATE APPLICATION RECEIVED _____ FACE TO FACE _____ BY MAIL _____ BY TELEPHONE

I AM APPLYING: _____ INDIVIDUALLY _____ WITH CO-APPLICANT _____ AS CO-SIGNER FOR:

Applicant # 1

Applicant #2

| | | | | | |
|---|----------------------------|------------------|---|----------------------------|------------------|
| FULL NAME | | | FULL NAME | | |
| SSN | DATE OF BIRTH | | SSN | DATE OF BIRTH | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY / STATE / ZIP | | | CITY / STATE / ZIP | | |
| HOW LONG? ___ YRS ___ MTHS _____ OWN _____ RENTED | | | HOW LONG? ___ YRS ___ MTHS _____ OWN _____ RENTED | | |
| PREVIOUS ADDRESS (IF LESS THAN 3 YEARS) | | | PREVIOUS ADDRESS (IF LESS THAN 3 YEARS) | | |
| HOW LONG? ___ YRS ___ MTHS _____ OWN _____ RENTED | | | HOW LONG? ___ YRS ___ MTHS _____ OWN _____ RENTED | | |
| HOME PHONE | WORK PHONE | | HOME PHONE | WORK PHONE | |
| EMPLOYER (INCLUDE ADDRESS) | | | EMPLOYER (INCLUDE ADDRESS) | | |
| HOW LONG? ___ YRS ___ MTHS | | | HOW LONG? ___ YRS ___ MTHS | | |
| POSITION TITLE | MO. SALARY (GROSS) | MO. SALARY (NET) | POSITION TITLE | MO. SALARY (GROSS) | MO. SALARY (NET) |
| PREVIOUS EMPLOYER (IF LESS THAN 3 YEARS) | | | PREVIOUS EMPLOYER (IF LESS THAN 3 YEARS) | | |
| HOW LONG? ___ YRS ___ MTHS | | | HOW LONG? ___ YRS ___ MTHS | | |
| NUMBER OF DEPENDENTS (INCLUDE SELF) | | | NUMBER OF DEPENDENTS (INCLUDE SELF) | | |
| MARITAL STATUS _____ UNMARRIED _____ MARRIED _____ SEPARATED | | | MARITAL STATUS _____ UNMARRIED _____ MARRIED _____ SEPARATED | | |
| NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | | | NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU | | |
| RELATIONSHIP | PHONE NO. (WITH AREA CODE) | | RELATIONSHIP | PHONE NO. (WITH AREA CODE) | |
| OTHER INCOME, ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION. | | | OTHER INCOME, ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION. | | |
| ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE RECEIVED UNDER _____ COURT ORDER _____ WRITTEN AGREEMENT _____ ORAL UNDERSTANDING | | | ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE RECEIVED UNDER _____ COURT ORDER _____ WRITTEN AGREEMENT _____ ORAL UNDERSTANDING | | |
| NATURE OF ADDT. INCOME / MONTHLY AMOUNT / DURATION OF INCOME | | | NATURE OF ADDT. INCOME / MONTHLY AMOUNT / DURATION OF INCOME | | |
| IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUEST IS TO BE PAID OFF? _____ NO _____ YES (EXPLAIN) | | | IS ANY INCOME LISTED IN THIS SECTION LIKELY TO BE REDUCED BEFORE THE CREDIT REQUEST IS TO BE PAID OFF? _____ NO _____ YES (EXPLAIN) | | |

PERSONAL FINANCIAL STATEMENT

| ASSETS | | Total Value | LIABILITIES | | Total | Mo. Payment |
|---|-----------|-------------|--------------------------------|--|-------|-------------|
| CHECKING | BANK NAME | | MORTGAGE OR RENT | | | |
| | | \$ | | | \$ | \$ |
| SAVINGS/CDS | BANK NAME | | SECOND MORTGAGE OR EQUITY LINE | | | |
| | | | | | | |
| TAXABLE MARKET VALUE OF YOUR HOME (Land and Buildings) | | | STUDENT LOANS | | | |
| OTHER REAL ESTATE OWNED | | | 1ST AUTO LOAN | | | |
| 1ST VEHICLE YR | MODEL | | 2ND AUTO LOAN | | | |
| 2ND VEHICLE YR | MODEL | | OTHER LOANS (LIST) | | | |
| IRAS/RETIREMENT PLANS | | | | | | |
| STOCKS | | | CREDIT CARDS (LIST) | | | |
| BONDS | | | | | | |
| MUTUAL FUNDS | | | | | | |
| CASH VALUE OF LIFE INSURANCE FACE AMT \$ | | | | | | |
| PERSONAL PROPERTY | | | DAYCARE EXPENSE | | | |
| OTHER ASSETS (DESCRIBE) | | | ALIMONY/CHILD SUPPORT | | | |
| TOTAL ASSETS | | | TOTAL LIABILITIES | | | |

ARE YOU A CO-MAKER, ENDORSER OR GUARANTOR ON ANY LOAN OR CONTRACT? ___ YES ___ NO ___ YES ___ NO

ARE THERE ANY UNSATISFIED JUDGEMENTS AGAINST YOU? ___ YES ___ NO ___ YES ___ NO

HAVE YOU EVER FILED FOR BANKRUPTCY? ___ YES ___ NO ___ YES ___ NO

ALL INFORMATION SO FURNISHED IS FOR THE CONFIDENTIAL USE OF THE CITY OF MOORHEAD, GATE CITY BANK, OR THE UNITED STATES DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD). UNDER MINNESOTA LAW, IT IS A CRIME TO USE FALSE OR MISELEADING INFORMATION IN THIS APPLICATION IN ORDER TO QUALIFY FOR A LOAN.

SIGNATURES: I CERTIFY THAT EVERYTHING I HAVE STATED IN THIS APPLICATION AND ON ANY ATTACHMENTS IS CORRECT. YOU MAY KEEP THIS APPLICATION WHETHER OR NOT IT IS APPROVED. I AUTHORIZE YOU TO CHECK MY CREDIT AND EMPLOYMENT HISTORY AND TO ANSWER QUESTIONS OTHERS MAY ASK ABOUT MY CREDIT WITH YOU. I UNDERSTAND THAT I MUST UPDATE CREDIT INFORMATION AT YOUR REQUEST IF MY FINANCIAL SITUATION CHANGES.

X

X

Signature
Date
Signature
Date