Eligibility Requirements

You are eligible to apply for a Sierra Nevada Community Trust (SNCLT) home if you meet the following criteria:

- 1. Minimum 1 year residency: You must have lived in Douglas, Carson City or Lyon County for at least one year and you must be able to demonstrate the ability to make a living in the area.
- 2. Income: You must earn enough to pay the monthly mortgage, taxes and insurance, and you must earn less than 80% of the median family income (MFI) for the county for your family size. For 2009 the maximum gross income by family size is as follows:

	1	2	3	4	5
Median Family Income	Person	Person	Person	Person	Person
Douglas County MFI \$73,000	40,900	46,750	52,600	58,400	63,100
Carson City MFI \$65,000	36,400	41,600	46,800	52,000	56,200
Lyon County MFI \$58,000	35,950	41,100	46,250	51,350	55,500
Source HUD May 2010	•	•	·	•	·

- 3. Credit Rating: You must have a good credit rating showing no significant delinquencies in the past year and no bankruptcy in the past three years. When you have completed your application form, mall it to SNCLT along with the \$25 credit report fee, and a representative will run your credit report and review it with you.
- **4. Debt:** At the time you apply for a mortgage, your mortgage payment (principal and Interest), taxes and insurance may not exceed more than 29% of your gross monthly income. Your total debt (including the cost of your house) may not exceed 38% of your income. Debt includes any long-term obligations (a repayment period of more than 6 months), such as automobile payments, child support, and student loans, plus the minimum monthly payment for all credit card debts. A SNCLT representative can help you determine this percentage during your initial screening interview. Generally, however, monthly debt obligations of more than \$200-\$250 in addition to house payments will make it difficult for you to qualify.
- 5. Employment or other income: You must have proof of steady employment or income for at least one year. Sources of Income include all wages, overtime and tips; interest and dividends; social security, annuities, pensions; unemployment, disability and severance compensation; allmony and child support; and most forms of public assistance. Self-employed individuals must demonstrate proof of earnings with tax returns for the past two fiscal years. Self-employed individuals income is evaluated after business expenses are removed from the gross income.
- **6. Assets:** If you have assets valued at more than \$10,000, you will be required to use them towards your down payment. Assets include savings, land, mobile home, recreational vehicles, boats, art collections, or similar items. Household possessions, cars, and Individual Retirement Accounts (IRA's) or pensions are not included in your asset calculation.
- 7. First time homebuyer: You must not currently own a home nor have owned a home during the past three years.
- **8. Capital Requirement:** You must be able to contribute, at the time of closing, at least 1% of the purchase price.
- 9. Attend a homebuyer education workshop
- 10. Have a willingness to own a community land trust home.

Sierra Nevada Community Land Trust

Preliminary Housing Application

THANK YOU FOR YOUR INTEREST IN OUR HOUSING PROGRAM. PLEASE FILL OUT EACH SECTION OF THIS APPLICATION AS COMPLETELY AS POSSIBLE. IF A QUESTION DOES NOT APPLY TO YOU, PLEASE WRITE N/A IN THE SPACE PROVIDED. IF YOU HAVE ANY QUESTIONS ABOUT THIS APPLICATION, PLEASE CALL (775) 721-5229.

A co-applicant list the co-applicant senecessary to list a	isted below may be co should be authorized	ontacted in the	CT INFORMATI e event that SNCLT is t sing decisions for the ap	IONunable to reach the primoplicant household. Plea	 nary applicant, and use note: It is not		
Applicant Name ((please print)		Co-applicant N	ame (please print)			
Current Mailing A	Address (street and m	umber)	Current Mailing	Address (street and nur	mber)		
City	State	Zip	City	State	Zip		
Daytime Phone N	lumber		Daytime Phone	Daytime Phone Number			
Evening Phone N	umber		Evening Phone ?	Evening Phone Number			
Mobile Phone Number		Mobile Phone N	Mobile Phone Number				
Email Address			Email Address	Email Address			
Please send me ema	way to communicate wind notifications of future will notifications of future will THE RESIDE AT THE volume that the volume is the contract of the contract that the contract the contract that t	e vacancies. E MAILING A	Email is a Please send a ADDRESS LISTED ABO dicate the move-in date (n	a great way to communica me email notifications of VE? month and year):	ate with me! future vacancies.		
	se list the city and zip c			·····			
f you've lived in yo	our current home for les	s than two year	rs, please provide your pr	revious address(es) below	:		

NAME	BIRTHDATE	GENDER	SOCIAL SECURITY #	RELATIONSHIP TO
	Ditt.	M/F	(only if 18 or over)	APPLICANT
Do you have any dependents w Yes No If yes, p	who are not household membe please provide a list on a separ	ers (i.e. do not li	ive with you for over 6 mon	ths of the year)?
CURRENT NUMBER OF BE	EDROOMS:	CURRENT MO	NTHLY RENT:	
MARTIAL STATUS OF APP. Unmarried	PLICANT:		☐ Separated	
CITIZENSHIP STATUS OF A US Citizen	·	ent Resident Alie	en Non-	Resident Alien
PLEASE CHECK ALL THAT Single Head of Ho		Head of Househo	old First	time Homebuyer
US Veteran	Owned a	a home in the las	st 3 years	
NUMBER OF PEOPLE LIVIN White (not Hispa Asian or Pacific This information is requested	anic origin) Africa Islander Other	an American (no r:		
IAVE YOU COMPLETED A f yes, please indicate the agend	HOMEBUYER EDUCATIO	ON SEMINAR? and attach a cop	Yes by of your Certificate of Cou	□ No
Would your household prefer a				elow:
IOW DID YOU HEAR ABOU	JT SNCLT?			
Website	Phone book	Office		resident or owner
News Source			Habitat Other:	for Humanity
	ı	•	1 1 1 2111411	. 1

III. FIN	VANCIAL	INFORM	1ATION	
EMPLOYMENT. List the past 2 years employm Household Member Name;	nent for all adul	t members of	the household (use sep	parate sheet if necessary).
Household Member Name: Employer Name:				· · · · · · · · · · · · · · · · · · ·
Street:	L Oity		Contact Phone:	
Position/Title:	City:	To (Data)	State:	Zip:
	**** ** ** t. t. , [Start Date:	End Date:	
Gross Monthly Income: Pay Cycle:	Bi-Monthly [Monthly [Other:	
Household Member Name:				
Employer Name:			Contact Phone:	
Street:	City:		State:	Zip:
Position/Title:		Start Date:	End Date:	
Gross Monthly Income: Pay Cycle:	Bi-Monthly [Monthly	Other:	
Household Member Name:				
				
Employer Name; Street:	0.5		Contact Phone:	
Street: Position/Title:	City:	Datas	State:	Zip:
		Start Date:	End Date:	
Gross Monthly Income: Pay Cycle: E	Bi-Monthly 🔲] Monthly [Other:	
OTHER INCOME. Please list other income for a dividend interest income, alimony, etc. HOUSEHOLD MEMBER	all members of t			AFDC, child support, MONTHLY INCOME
Additional income? If yes, please list on a separate	e sheet. Yes	s 🗌 No		
 ,	TOTAL GROSS	TAINITIAT IN	NCOME FOR 2010	
L			me from tax return	
200	08 Total Gross	Annual Incom	me from tax return	
* PLEASE ATTACH COPIES OF TWO RECENT PAY APPLICATION. YOUR APPLICATION WILL NOT NOT FILED A RECENT TAX RETURN, PLEASE AT DOCUMENTATION OF INCOME, IF POSSIBLE.	Γ BE CONSIDER	RED COMPLE	ETE WITHOUT THES!	SE ITEMS. IF YOU HAVE
Sierra Nevada Comn	_			

ASSETS, Please indica	ate type of assets and	i amounts for all a	dult members of th	he household.	
TYPE OF ASS	SET TOT	TAL ASSET VALU		LE FUNDS	INSTITUTION NAME
Cash					
Checking Account					
Checking Account					
Savings Account					
Savings Account					
Retirement Account					
Gift					
Down payment Assistar	_				
Money market/Mutual f	fund				AND THE PERSON NAMED IN COLUMN TO TH
Inheritance					,
Other =					
Additional assets? Pleas	se indicate here and li	ist on a separate s'	sheet. Yes	□ No	
Amount currently avai					
How much money (aver	rage per month) does	your household r	put toward down p	ayment savings	, if any?
LIABILITIES. Please in TYPE OF LIABILITY Credit Card	indicate debts and am OUTSTANDING BALANCE	nounts for applica	ant and co-applica DELINQUENT? (Y/N)	ant only.	CREDITOR NAME
Credit Card					
Credit Card					
Lease payments					
School loans					
Store accounts					
Medical bills					
Other:					
Additional debts? Please	indicate here and lis	it on a separate sh	neet. Yes	□ No	A
issues in your credit histo Yes* □ No *Answering 'Yes' to this these issues before you ap describe any circumstanc Have you received pre-a	ory that may make th Not Sure s question will not dis approach a lender and ces that would help us approval for a mort	nis difficult (bankr isqualify you from d we are happy to is understand your tgage loan within	ruptcy, loan defaul n our program. The refer you to them. ir credit situation. n the past two yea	It, late payments ere are services a . On a separate s ars? Yes	available to help you resolve
	Tel: 775-000-	-0000 Fax: 775-000-00	PO Box 2109, Minden, 2000 Info@suclt.org operational provides	www.snclt.org	

V. HOUSING INFORMATION
Are you applying for a specific SNCLT vacancy? Yes No
If yes, please indicate the address or name:
What is the minimum number of bedrooms you desire? Studio 1 2 3
Please describe your current housing. What's good and what's bad about it?
Have you ever lived in a co-op, collective, or been a part of a Homeowners' Association? Are you part of any community organization?
Please describe your current neighborhood. What's good and what's bad about it? Describe anything you have done to improve your neighborhood.
Why are you moving?
If you or any member of your household participate in any community or volunteer activities that you would like to tell us about, please use the space below add attach an additional sheet, if necessary.
Sierra Community Land Trust, PO Box 2109, Minden, NV 89423 Tel: 775-000-0000 Fax: 775-000-0000 Info@snclt.org www.snclt.org

Sierra Nevada Community Land Trust Preliminary Housing Application

If there is anything else you think we should know about your background, housing needs, financial situation, or any other special circumstances of your household, please describe them on a separate sheet.

FINALLY, PLEASE TAKE A MOMENT TO MAKE SURE THAT THIS APPLICATION IS COMPLETE. Incomplete applications may be returned to applicant for additional information before they are processed. Please feel free to contact SNCLT staff at (775) 000-0000 if you have any questions about this application or if you would like assistance completing it.

A COMPLETED APPLICATION WILL HAVE:

- ✓ CURRENT APPLICANT CONTACT, HOUSEHOLD, FINANCIAL, AND CREDIT INFORMATION. YOU SHOULD WRITE N/A IF A QUESTION DOES NOT APPLY TO YOU.
- ✓ INCOME DOCUMENTATION. THIS SHOULD BE IN THE FORM OF TWO RECENT PAYSTUBS, OR LETTER OF REWARD, ETC., AND YOUR MOST RECENT FEDERAL TAX RETURN.
- ✓ \$25.00 CREDIT CHECK FEE, PAYABLE TO THE NORTHERN CALIFORNIA LAND TRUST. YOU WILL RECEIVE A COPY OF THIS REPORT FOR YOUR RECORDS.

CREDIT REPORT AUTHORIZATION AND PRIVACY DISCLOSURE

I hereby authorize and instruct Sierra Nevada Community Land Trust (hereinafter "SNCLT") to obtain and review my credit report. My credit report will be obtained from a credit reporting agency chosen by SNCLT. I understand and agree that SNCLT intends to use the credit report for the purpose of evaluating my financial readiness to purchase a home.

My signature below also authorizes the release to credit reporting agencies of financial or other information that I have supplied to SNCLT in connection with such evaluation. Authorization is further granted to the credit reporting agency to use a copy of this form to obtain any information the credit reporting agency deems necessary to complete my credit report.

In addition, in connection with determining my ability to obtain a loan, I \(\subseteq \) AUTHORIZE \(\subseteq \) DO NOT AUTHORIZE SNCLT to share with potential mortgage lenders my credit report and any information that I have provided, including any computations and assessments that have been produced based upon such information. These lenders may contact me to discuss loans for which I may be eligible.

I understand that I may revoke my consent to these disclosures by notifying SNCLT in writing.

	ABOVE INFORMATION IS TRUE AND CORRECT, AND I JNITY LAND TRUST, OR ITS ASSIGNEES, TO VERIFY THIS
Applicant Signature	Date
Co-Applicant Signature	Date

PLEASE print out & SIGN this last page & fax, mail or email with your completed application.

WE LOOK FORWARD TO WELCOMING YOU TO THE SNCLT HOUSING PROGRAM!

Sierra Community Land Trust, PO Box 2109, Minden, NV 89423
Tel: 775-000-0000 Fax: 775-000-0000 Info@snelt.org www.snelt.org
SNCLT is an equal opportunity housing provider