

TOWN OF ACTON
AUDUBON HILL AFFORDABLE UNITS
INCOME QUALIFICATION APPLICATION

Name (Head of Household) _____

Phone Number _____ Cell Phone _____

Employer and Work Address _____

Home Address _____

Please list all members of your household including yourself.

Occupant Number	Names of all Persons to Reside in Dwelling (First Name, Middle Initial, Last Name)	Relation to Head	Age	Date of Birth	Social Security Number
HEAD					
2					
3					
4					
5					
6					
7					
8					

INCOME: List all income of all members listed on application to reside in the unit, including earnings, overtime, IRA distributions, part-time employment, bonuses, dividends, interest, annuities, pensions, Veterans Administration (VA) Compensation, gross rental or lease income, commissions, deferred income, welfare payments, social security benefits, disability payments, alimony, support payments, public assistance, sick pay, unemployment compensation, and income received from trusts, business activities, and investments.

Do not record annual income for any person who is a dependant on your most recent income tax return and is (i) 18 years of age or (ii) 22 years of age or less and currently registered as a full-time student at an accredited educational institution.

<u>Source of Income</u>	<u>Address of Source</u>	<u>Amount per Year</u>
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ASSETS: List all checking, savings accounts, CD's, stocks, bonds, retirement accounts, savings bonds and any other investments below. If additional space is needed, please attach another sheet.

<u>Type of Asset</u>	<u>Address</u>	<u>Account No.</u>	<u>Present Balance</u>
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PROPERTY:

Do you own real estate, land and/or mobile home? Yes () No ()

Address: _____ Current Value : _____

Address: _____ Current Value : _____

Have you sold real estate, land or mobile home in the past three years? Yes () No () If yes, when _____

Address: _____ Sales Price: _____

Address: _____ Sales Price: _____

Please explain all circumstances relating to the sale of real estate that would be relevant to our consideration:

EXPLANATIONS:

Please feel free to elaborate on the circumstances of your income and/or other assets that may help us determine your eligibility to purchase an affordable condominium unit.

I, _____ (head of household) hereby swear and certify under the penalties of perjury that:

1. The information in this Application is true, correct, accurate and complete in all respects, and incorporated herein and made part of this Application;
2. (I/We) intend to occupy the Property as (my/our) principal place of residence;
3. The information contained herein is subject to verification by the Town of Acton or its agents

Signature of Head of Household _____ Date _____

Household Member _____ Date _____

Household Member _____ Date _____

PLEASE INCLUDE WITH THIS APPLICATION THE FOLLOWING:

- A completed application signed by all individuals over the age of 18
- A copy of your 2003 & 2004 tax returns including all 1099's, W-2's and schedules.
- A copy of last five pay stubs, a current letter from all sources of income including but not limited to Public Assistance, Social Security, pensions and annuities showing the gross amount.
- A copy of all assets showing current value including all bank accounts, investment accounts, cash life insurance policies, retirement accounts.
- A mortgage pre-approval and proof of adequate assets to cover the downpayment and purchase of unit.