

**READING AFFORDABLE HOUSING  
READING WOODS  
RESALE APPLICATION**

Name \_\_\_\_\_ Home Tel. # \_\_\_\_\_

Address \_\_\_\_\_ Work Tel. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ Number in Household \_\_\_\_\_

Email Address: \_\_\_\_\_

**HOUSEHOLD MEMBERS:**

Please list **ALL** household members who will occupy the affordable home:

<b>Name</b>	<b>Date of Birth</b>	<b>Sex</b>	<b>SS#</b>	<b>Relationship</b>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you owned a home or joint interest in a home in the past three years

YES \_\_\_\_\_

NO \_\_\_\_\_

If yes please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PREFERENCE INFORMATION:**

This is an optional section that you may complete:

	Applicant	Co-Applicant	Dependent
Black or African American	_____	_____	_____
Asian	_____	_____	_____
Hispanic or Latino	_____	_____	_____
Native American or Alaskan Native	_____	_____	_____
Native Hawaiian or Pacific Islander	_____	_____	_____
Other (not-White)	_____	_____	_____

**EMPLOYMENT STATUS**

Applicant's Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Name & Tel. # of Present Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Name & Title of Supervisor \_\_\_\_\_  
Annual Gross Salary \_\_\_\_\_

Co-Applicant's Name \_\_\_\_\_  
Occupation \_\_\_\_\_  
Name & Tel. # of Present Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Name & Title of Supervisor \_\_\_\_\_  
Annual Gross Salary \_\_\_\_\_

If other adult household members are employed, please attach a separate sheet with their current employment information.

**INCOME INFORMATION:**

Please complete the following information for all persons receiving income in the household for the past twelve months. Documentation will need to be provided with your application if you wish to enter the lottery.

	<b>APPLICANT</b>	<b>CO-APPLICANT</b>	<b>OTHER</b>
Salary:	_____	_____	_____
Interest & Dividends:	_____	_____	_____
Veteran's Benefits:	_____	_____	_____
Alimony/Child Support:	_____	_____	_____
Other Income:	_____	_____	_____
Total Income:	_____		

**Value of Assets**

Name on Account \_\_\_\_\_  
Bank Name \_\_\_\_\_  
Address \_\_\_\_\_  
Savings \_\_\_\_\_  
Checking \_\_\_\_\_  
Other \_\_\_\_\_

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Bank Name \_\_\_\_\_  
Address \_\_\_\_\_  
Savings \_\_\_\_\_  
Checking \_\_\_\_\_  
Other \_\_\_\_\_

Name on Account \_\_\_\_\_  
Bank Name \_\_\_\_\_  
Address \_\_\_\_\_  
Savings \_\_\_\_\_  
Checking \_\_\_\_\_  
Other \_\_\_\_\_

Securities Value \_\_\_\_\_  
Real Estate Location & Value \_\_\_\_\_  
Other Assets of Value \_\_\_\_\_  
Retirement Assets \_\_\_\_\_

PLEASE CHECK THE FOLLOWING ITEMS THAT APPLY TO YOU:

- \_\_\_\_\_ I/We certify that our household is \_\_\_\_\_ persons
- \_\_\_\_\_ I/We certify that we qualify as first-time home buyers as defined in the Information Packet.
- \_\_\_\_\_ I/We certify that our annual gross household income does not exceed the income limits provided in the Information Packet.
- \_\_\_\_\_ I/We certify that our household assets do not exceed the maximum amount allowed of \$75,000.
- \_\_\_\_\_ I/We certify that our household is able to provide the minimum down payment required for the first-time home buyer program.
- \_\_\_\_\_ I/We certify that we have received a pre-approval letter from a financing Institution proving our qualification for a mortgage to buy an affordable
- \_\_\_\_\_ I/We certify that have read the summary of the resale restrictions in the Information Packet and agree to the restrictions. I/We have been advised that copy of the Deed Rider is available for further review from JWO Consultant Services.
- \_\_\_\_\_ I/We certify that the information in this application and in support of this application is true and correct to the best of my/our knowledge and belief. I/We understand that perjury will result in disqualification from further consideration.

**Your signature(s) below gives consent to JWO Consultant Services, as Monitoring Agent, to verify all income and asset information provided in this application and will provide final verification prior to closing. No applications will be considered complete unless signed and dated by the Applicant/Co-Applicant. This form must be signed by all household members age 18 years or older.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date

**ALL APPLICATIONS MUST BE SUBMITTED TO:**

**JWO CONSULTANT SERVICES  
P.O. BOX 323  
WESTWOOD, MA 02090**

**Supporting Documents Needed to Prove Qualification and Submitted with Application- Any Missing Documents will Disqualify the Acceptance of Your Application**

1. Copies of last two months of pay stubs.
2. Copies of last three years of Federal tax returns with most recent W-2s.
3. Copies of last three months of checking, savings, and all asset account statements. All deposits to checking or savings account must list source of funds for each deposit.
4. A pre-approval letter from an institutional mortgage lender familiar with Deed Restricted properties issued within the past 45 days must accompany this application.
5. This form must be signed by all household members who will be listed on the mortgage and returned with your application.

