



Affordable Housing Builds Strong Communities

FirstDown X

2020A10021

Household Composition & Participation Agreement

HOUSEHOLD COMPOSITION - List the head of your household and all members who live in your home. Give the relationship of each household member to the head of household.

Member No.	Full Name	Relationship	Date of Birth
1			
2			
3			
4			
5			
6			

ANNUAL INCOME – Include all sources of income for anyone 18 years or older.

Source	Applicant	Co-Applicant	Other Household Member 18 or Older	Total
Salary				
Overtime Pay				
Commissions				
Fees				
Tips				
Bonuses				
Interest and/or Dividends				
Net Income from Business				
Net Rental Income				
Social Security, Pension(s), Retirement Funds, etc. (Please circle appropriate one[s])				
Unemployment Benefits				
Workers Compensation, etc.				
Alimony, Child Support (need name & address where to send income verification) (Please circle appropriate one[s])				
Other				
TOTALS				

The information provided above is true and complete to the best of my/our knowledge and belief. I/we consent to the disclosure of such information for purposes of income verification related to my/our application for financial assistance. I/We consent for Nebraska Housing Developers Association to work with our lender and closer to collect all documentation needed to process my financial assistance. I/We understand that any willful misstatement of material fact will be grounds for disqualification and any funding provided will be recaptured. I/We agree to comply with any request for additional documentation before and after closing. I/We have read and agree to adhere to all items listed in the program guidelines & definitions.

Print Name

Signature

Date

Print Name

Signature

Date

