

# A/MCHF Borrower Profile

Name: \_\_\_\_\_

Income: \_\_\_\_\_

Address of Property: \_\_\_\_\_

City: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Type of Assistance (circle):                      **Down Pmt.**                      **Cl. Costs\_**                      **Rehab.**

Type of Rehab: \_\_\_\_\_

A/MCHF Payment Amount: \_\_\_\_\_

Borrower Contribution: \_\_\_\_\_

Seller's Contribution \_\_\_\_\_

Current Affordability (total debt/ income) \_\_\_\_\_

Employer(s): \_\_\_\_\_

Mortgage (Type, Term, Interest Rate): \_\_\_\_\_

Mortgage Amount: \_\_\_\_\_

Mortgage Originator: \_\_\_\_\_

Realtor: \_\_\_\_\_

Closing Agent: \_\_\_\_\_

Address to send check: \_\_\_\_\_

Closing Date: \_\_\_\_\_

Home Stretch Training Completed                      Yes \_\_\_\_\_                      No \_\_\_\_\_

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