



6470 Route 20a, Suite 1  
 Perry, NY 14530  
 585.237.2600  
 wccainc.org

## HOMEBUYER EDUCATION APPLICATION

Applicant name	Email	Address	Phone#

Household Members Income/Assets:

Family Member	Monthly Income	Bank Name	Other

Are you disabled?  Yes  No

Are you a veteran?  Yes  No

Are you an eligible US citizen?  Yes  No

Are you at least 18 years of age?  Yes  No

Have you owned a home in the last 3 years?  Yes  No

Have you or another family member been employed for 12 months consecutively?  Yes  No

Have you or your family ever been homeless?  Yes  No

Do you have Outstanding judgements or Collections?  Yes  No

Have you or your family used an assistance program to help pay for housing ?  Yes  No

Have you or your family used other services offered by WCCA?  Yes  No Which? \_\_\_\_\_

Do you currently rent, own, or live with friends/family? \_\_\_\_\_

How many times have you moved in the last 10 years? \_\_\_\_\_

How long have you lived in your current residence? \_\_\_\_\_

When do you plan to purchase a home? \_\_\_\_\_

How many family members will attend this class? \_\_\_\_\_

How did you learn about the Homebuyer Education Class? \_\_\_\_\_

Which bank will you apply for a mortgage through? \_\_\_\_\_

Please return this form by emailing to Dennis @ [dweibel@wccainc.org](mailto:dweibel@wccainc.org) or bring it to the office when making your payment.  
 If you have any questions, please email or call Dennis @ 585.237.2600.

I understand I will need to provide at least 24 months of employment history and the two most recent years of tax returns for myself and anyone else applying for a mortgage with me. I understand my credit may be reviewed by the participating bank of my choice to determine my mortgage eligibility, and I understand the grant money from the [Homebuyer Dream Program](#) is given out on a first come first serve basis statewide.

Type or Sign: \_\_\_\_\_

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