

# Columbia Cascade Housing Corporation

## Needs Summary

### REGIONAL HOME REPAIR PROGRAM

**This is an Equal Opportunity Program. Discrimination is prohibited.**

#### SCREENING PROCESS

Columbia Cascade Housing Corporation (CCHC) will contact you by mail as soon as your application is screened. Please be patient. To advance in the screening process you must complete all items and sign certifications on last page. Please return completed applications to: Columbia Cascade Housing Corporation, 500 E 2<sup>nd</sup> St, The Dalles, Oregon 97058

#### APPLICANT AND CO-APPLICANT INFORMATION

APPLICANT		CO-APPLICANT	
Name		Name	
Mailing Address		Mailing Address	
Phone Number	Birth Date	Phone Number	Birth Date
Known or estimated Credit score : _____	E-mail Address Highest Education (circle) None primary HS/GED College	Known or estimated Credit score : _____	E-mail Address Highest Education (circle) None primary HS/GED College

#### MEMBER HOUSEHOLD INFORMATION

<b>Number of people in household:</b>			<b>Female head of household</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>White</i>	<i>Black</i>	<i>Hispanic</i>	<b>Number in household who are:</b>	
			<i>Male</i>	<i>Female</i>
<i>Am. Indian or Alaskan Native</i>	<i>Asian or Pacific Islander</i>			
<i>Handicapped</i>	<i>Migrant/Farmworker</i>		<i>Veteran</i>	<i>Disabled Veteran</i>

#### PROPERTY TO BE IMPROVED

Physical Address of Home:	Tax Assessed Value: \$
Date Purchased:	Purchase Price: \$
1 <sup>st</sup> Mortgage Balancer: _____	2nd Mortgage Lender _____
Monthly payment: _____	Monthly payment _____
Type of Heat:	Approximate Square Feet:

Number of Bedrooms:	Is the home a mobile home or stick built? On foundation? Do you own/buying land? Yes___ No
<p align="center"><b>Monthly Income</b></p> Applicant:\$ _____ Co-applicant \$ _____ Other:\$ _____	<p align="center"><b>ASSETS</b></p> Checking:\$ _____ Other \$ _____ Savings\$ _____
<b>Monthly Expenses</b>	
Utilities:	
Loan payments:	
Credit card payments:	
Phone/internet/cable:	
Food:	
Other:	
<b>HOME REPAIRS NEEDED (Please describe repairs in detail)</b>	
Heating/Cooling	
Foundation/Siding	
Electrical/Plumbing:	
Roof/Gutters	
Insulation/Doors/Windows	
Special needs/Accessibility	
Other:	