

City of Sonoma

**PRE-QUALIFICATION QUESTIONNAIRE
(FOR SALE HOUSING)**

Application submitted for purchase of unit at: _____
(street address)

Applicant: _____ Social Sec. # _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____

Email Address: _____

Co-Applicant: _____ Social Sec. # _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____

Other household members:

Name: _____ Social Sec. # _____

Gross Annual Household Income _____
(See worksheet attached)

Have you owned any real property within the last three years? Yes No

If yes, please list the location(s) of the property and how title was held:

Application should be submitted with:

- **A copy of the last three years of federal income tax returns**
- **Your most recent pay stub showing year-to-date earnings**
- **Employment, Account, and Income Verification forms**

I/We, the undersigned certify that the information provided to the City of Sonoma on or attached to this form is accurate and complete to the best of my/our knowledge and belief. I/We understand that false statements or information may be grounds for my/our disqualification as a candidate for affordable rental housing and/or termination of tenancy.

Applicant's Signature

Co-Applicant's Signature

Date

Date

Income and Asset Verification Worksheet

Include all household members who receive income from any source.

Step 1.

Name: _____ Gross Annual Income

Wages: _____

Overtime: _____

Other earned income: _____

Interest/Dividends: _____

Social Security/SSI: _____

Pension/Annuity/IRA: _____

Other (describe): _____

Total _____

Name: _____ Gross Annual Income

Wages: _____

Overtime: _____

Other earned income: _____

Interest/Dividends: _____

Social Security/SSI: _____

Pension/Annuity/IRA: _____

Other (describe): _____

Total _____

Name: _____ Gross Annual Income

Wages: _____

Overtime: _____

Other earned income: _____

Interest/Dividends: _____

Social Security/SSI: _____

Pension/Annuity/IRA: _____

Other (describe): _____

Total _____

Gross Annual Household Income _____

Step 2.

Income Verification

- If applicant, co-applicant or other household members are employed in any capacity, have a **Request for Verification of Employment** (attached) completed by the employer. Make additional copies of the form as necessary.
- If applicant, co-applicant or other household members receive income from Social Security, SSI and/or a pension, annuity, IRA or similar account, have a **Request for Verification of Income** (attached) completed by the appropriate agency. Make additional copies of the form as necessary.

Asset Verification

- Have the attached **Request for Verification of Accounts** completed by all banks, credit unions, savings & loans or other depository where the applicant, co-applicant or other household members have active accounts. Make additional copies of the form as necessary.

Date: _____



To: _____
Employer

Address

When complete return to:
City of Sonoma
No. 1 The Plaza
Sonoma, CA 95476

From: _____
Applicant (Please print)

Request for Verification of Employment

The undersigned has applied to purchase affordable housing in the City of Sonoma and verification of employment and related earnings are required to determine eligibility. You are hereby authorized to verify and supply the City of Sonoma with the information requested below. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers.

Signature: _____
Applicant

To be Completed by Employer

Applicant's Date of Employment: _____

Present Position: _____ full-time part time temporary

Current Base Pay: \$ _____ per hour week month year

Earnings:

Type of Pay	Year to Date Gross	Past Year Gross
Base	\$ _____	\$ _____
Overtime	\$ _____	\$ _____
Bonus	\$ _____	\$ _____
Commission	\$ _____	\$ _____

Name of Employer Representative: _____

Signature: _____ Date: _____

Title: _____ Phone: _____

This form may be duplicated as needed.

Date: _____

To: _____
Depository

Address

From: _____
Applicant (Please print)



When complete return to:
City of Sonoma
No. 1 The Plaza
Sonoma, CA 95476

Request for Verification of Accounts

The undersigned has applied to purchase affordable housing in the City of Sonoma and verification of balances on deposit is required to determine eligibility. You are hereby authorized to verify and supply the City of Sonoma with the information requested below. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers.

Signature: _____
Applicant

To be Completed by Depository

Type of Account	Account Number	Date Opened	Current Balance	Avg. Balance for Prior two months
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$

Name of Depository Representative: _____

Signature: _____ Date: _____

Title: _____ Phone: _____

Date: _____

To: _____
Source of Income

Address

From: _____
Applicant (Please print)



When complete return to:
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No. 1 The Plaza
Sonoma, CA 95476

Request for Verification of Income

The undersigned has applied to purchase affordable housing in the City of Sonoma and verification of income is required to determine eligibility. You are hereby authorized to verify and supply the City of Sonoma with the information requested below. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers.

Signature: _____
Applicant

To be Completed by Income Provider

Income Type	Monthly Gross
Social Security/SSI	\$
Pension	\$
IRA/Annuity	\$
Other:	\$

Name of Provider Representative: _____

Signature: _____

Date: _____

Title: _____

Phone: _____