

# Consumer Rescue Fund - Customer Information form

**PLEASE COMPLETE ALL FIELDS**

Check One: Individual <input type="checkbox"/> Joint signers <input type="checkbox"/>	If checked as "joint", do both applicants live at same address? Circle One: YES NO If above answer is NO, please complete separate information forms for each signer.	Date:
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### APPLICANT(S) & CURRENT ADDRESS

Your First name	MI	Your Last Name	Social Security Number	Date of Birth
N1 (Name One)				
Your First name	MI	Your Last Name	Social Security Number	Date of Birth
N2 (Name Two)				
Number & Street		City	State	ZIP code County
Check One: Rent <input type="checkbox"/> Own <input type="checkbox"/> Other <input type="checkbox"/>		Date of Residency:	Home Phone#:	Cell Phone#:
Nearest Relative: Name, address & phone#				

### PREVIOUS ADDRESS(ES) (please complete if at current address for less than 3 years)

Number & Street		City	State	ZIP code	County
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other <input type="checkbox"/>		Dates of Residency, from:		to:	
Number & Street		City	State	ZIP code	County
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other <input type="checkbox"/>		Dates of Residency, from:		to:	
Number & Street		City	State	ZIP code	County
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Other <input type="checkbox"/>		Dates of Residency, from:		to:	

### PRIMARY EMPLOYMENT OR INCOME SOURCE

N1's Employer or Income Source		Number & Street		City	State	ZIP code
Hire date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period)			
			/wk biwly /mo /yr			
N2's Employer or Income Source		Number & Street		City	State	ZIP code
Hire date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period)			
			\$ /wk biwly /mo /yr			
Please list all additional income sources separately under Additional Income on page 2 & if necessary also on the Addendum page.						

### ② PREVIOUS EMPLOYMENT / PRIMARY INCOME (required for each applicant with less than 3 yrs with primary income)

Circle Source:	Employer or Income Source	Number & Street		City		
N1 or N2						
State	ZIP code	Start date:	End date:	Position or Status:	Work Phone#:	
Circle Source:						
Employer or Income Source		Number & Street		City		
N1 or N2						
State	ZIP code	Start date:	End date:	Position or Status:	Work Phone#:	
Circle Source:						
Employer or Income Source		Number & Street		City		
N1 or N2						
State	ZIP code	Start date:	End date:	Position or Status:	Work Phone#:	

\* All sections marked with an Asterisk have additional space on the Addendum page \*

**BANKING INFORMATION**

Circle account type: <b>Savings / Checking</b>	Institution/ Balance:	Circle Acct holder(s): <b>N1 / N2 / Both</b>
Circle account type: Savings / Checking	<b>N/A</b>	Circle Acct holder(s): <b>N1 / N2 / Both</b>

**VEHICLES**

Year:	Make:	Model	Paid? Y / N	VIN#:	Mileage:	Circle Owners: N1 / N2 / Both
Year:	Make:	Model	Paid? Y / N	VIN#:	Mileage:	Circle Owners: N1 / N2 / Both
Year:	Make:	Model	Paid? Y / N	VIN#:	Mileage:	Circle Owners: N1 / N2 / Both

**FAMILY**

Total number in family including applicant(s), spouses & dependents:	List Dependents Full Name(s) & their Date of Birth(s)	Dependent(s) List Continued with Name(s) & Date of Birth(s)

**\* ADDITIONAL EMPLOYMENT OR INCOME SOURCES (list each income source separately)**

Circle Source: <b>N1 or N2</b>	Employer or Income Source	Number & Street	City, State & ZIP
Start date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period) \$ /wk biwkly /mo /yr
Circle Source: <b>N1 or N2</b>	Employer or Income Source	Number & Street	City, State & ZIP
Start date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period) \$ /wk biwkly /mo /yr
Circle Source: <b>N1 or N2</b>	Employer or Income Source	Number & Street	City, State & ZIP
Start date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period) \$ /wk biwkly /mo /yr
Circle Source: <b>N1 or N2</b>	Employer or Income Source	Number & Street	City, State & ZIP
Start date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period) \$ /wk biwkly /mo /yr

**ADDITIONAL MORTGAGE(S) (residential property only)**

Current 2nd Mortgage Holder:	Date:	Current Balance: \$	Payment: \$/mo	Rate: %	Terms: (mos)
Current 3rd Mortgage Holder:	Date:	Current Balance: \$	Payment: \$/mo	Rate: %	Terms: (mos)

**FIRST MORTGAGE INFORMATION (residential property only)**

Current Mortgage Holder	Original Mortgage Lender(if not the current holder)	Loan Servicer(if not the Current Mortgage Holder)				
Mortgage Date:	Original Balance:	Current Balance:	Payment: \$/mo	Rate: %	Circle Rate Type: ARM / Fixed	Terms: (mos)

**PROPERTY INFORMATION (please complete if you checked "Own" @ current address)**

Purchase Date:	Purchase Price:	Current Home Value:	Property Taxes: \$ ___/yr Included in mtg pmt? Y <b>N</b>	Homeowners Ins: \$ ___/yr Included in mtg pmt? Y <b>N</b>		
Check <input type="checkbox"/> 2 Flat <input type="checkbox"/> Property type: Duplex <input type="checkbox"/>	3 Flat <input type="checkbox"/> Manufactured <input type="checkbox"/>	4 Flat <input type="checkbox"/> Modular <input type="checkbox"/>	A-typical <input type="checkbox"/> Single Family <input type="checkbox"/>	Condominium <input type="checkbox"/> Single Wide <input type="checkbox"/>	Double Wide <input type="checkbox"/> Townhouse <input type="checkbox"/>	HOA fee: \$ ___/mo

Please complete the ADDITIONAL PROPERTY section on the ADDENDUM page if you own other properties.

② PREVIOUS EMPLOYMENT CONTINUED

Circle Source: <b>N1</b> or <b>N2</b>	Employer or Income Source	Number & Street			City
State	ZIP code	Start date:	End date:	Position or Status:	Work Phone#:
Circle Source: <b>N1</b> or <b>N2</b>	Employer or Income Source	Number & Street			City
State	ZIP code	Start date:	End date:	Position or Status:	Work Phone#:

ADDITIONAL PROPERTIES

Number & Street		City		State	ZIP code	County
<b>1)</b>						
Purchase Date:	Purchase Price:	Current Value:	Property Taxes: \$ _____ / yr Included in mtg pmt? Y N	Homeowners Ins: \$ _____ / yr Included in mtg pmt? Y N		
Property Type: (see list in Property section, pg 1)	Check property use:		Business <input type="checkbox"/> Farm <input type="checkbox"/> Rental <input type="checkbox"/> Vacant <input type="checkbox"/> Vacation <input type="checkbox"/>	Rental Income: Y N	# rental units:	
Current 1st Mortgage Holder:	Date:	Current Balance:	Payment: \$/mo	Rate: %	Terms: (mos)	
		\$				
Current 2nd Mortgage Holder:	Date:	Current Balance:	Payment: \$/mo	Rate: %	Terms: (mos)	
		\$				
Number & Street		City		State	ZIP code	County
<b>2)</b>						
Purchase Date:	Purchase Price:	Current Value:	Property Taxes: \$ _____ / yr Included in mtg pmt? Y N	Homeowners Ins: \$ _____ / yr Included in mtg pmt? Y N		
Property Type: (see above list in Property section)	Check correct property use:		Business <input type="checkbox"/> Farm <input type="checkbox"/> Rental <input type="checkbox"/> Vacant <input type="checkbox"/> Vacation <input type="checkbox"/>	Rental Income: Y N	# rental units:	
Current 1st Mortgage Holder:	Date:	Current Balance:	Payment: \$/mo	Rate: %	Terms: (mos)	
		\$				
Current 2nd Mortgage Holder:	Date:	Current Balance:	Payment: \$/mo	Rate: %	Terms: (mos)	
		\$				
Number & Street		City		State	ZIP code	County
<b>3)</b>						
Purchase Date:	Purchase Price:	Current Value:	Property Taxes: \$ _____ / yr Included in mtg pmt? Y N	Homeowners Ins: \$ _____ / yr Included in mtg pmt? Y N		
Property Type: (see above list in Property section)	Check correct property use:		Business <input type="checkbox"/> Farm <input type="checkbox"/> Rental <input type="checkbox"/> Vacant <input type="checkbox"/> Vacation <input type="checkbox"/>	Rental Income: Y N	# rental units:	
Current 1st Mortgage Holder:	Date:	Current Balance:	Payment: \$/mo	Rate: %	Terms: (mos)	
		\$				
Current 2nd Mortgage Holder:	Date:	Current Balance:	Payment: \$/mo	Rate: %	Terms: (mos)	
		\$				

② ADDITIONAL EMPLOYMENT OR INCOME CONTINUED

Circle Source: <b>N1</b> or <b>N2</b>	Employer or Income Source	Number & Street		City, State & ZIP
Start date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period) \$ _____ /wk biwkly /mo /yr	
Circle Source: <b>N1</b> or <b>N2</b>	Employer or Income Source	Number & Street		City, State & ZIP
Start date:	Position or Status:	Work Phone#:	Gross Income: (Circle applicable time period) \$ _____ /wk biwkly /mo /yr	