

Financial Statement

Applicant: _____
Address: _____

Co-Applicant: _____
Address: _____

The below sections should be filled out as applicable to each individual applicant's current financial circumstances. All lawful sources of income will be considered by an Owner in New York State.

Monthly Sources of Income and Projected Housing Expenses

Income:	Applicant	Co-Applicant	Expenses:	Applicant (after closing)	Co-Applicant (after closing)	Joint/Total (after closing)
Base monthly salary:	_____	_____	Maintenance:	_____	_____	_____
Overtime (monthly):	_____	_____	Apt. Financing:	_____	_____	_____
Bonuses (monthly):	_____	_____	Other Mortgages:	_____	_____	_____
Commissions (monthly):	_____	_____	Bank Loans:	_____	_____	_____
Dividends/Interest:	_____	_____	Auto Loans:	_____	_____	_____
Net rental income (Net):	_____	_____	Credit Card Debt:	_____	_____	_____
Other income (Itemize):	_____	_____	TOTAL:	_____	_____	_____
Other (cont'd)	_____	_____				
TOTAL:	_____	_____				

Assets & Liabilities

Assets:	Applicant	Co-Applicant	Liabilities	Applicant (present)	Co-Applicant (present)
Cash/Money Market Funds (Sch A):	_____	_____	Notes payable to banks:	_____	_____
Contract deposit:	_____	_____	Notes payable to relatives:	_____	_____
Stocks & bonds or Brokerage Accounts (Schedule B):	_____	_____	Notes payable to others:	_____	_____
Investment in own business:	_____	_____	Install accounts payable:	_____	_____
Accounts receivable:	_____	_____	Automobile:	_____	_____
Real estate owned (Schedule C):	_____	_____	Other accounts payable:	_____	_____
Automobiles:	_____	_____	Mortgages payable:	_____	_____
Personal property & Furniture:	_____	_____	Unpaid real estate taxes:	_____	_____
Life insurance(cash value):	_____	_____	Unpaid income taxes:	_____	_____
Retirement funds/IRA:	_____	_____	Chattel mortgages:	_____	_____
401k:	_____	_____	Loans on life insurance:	_____	_____
KEOGH:	_____	_____	Credit card debt:	_____	_____
Profit sharing/pension:	_____	_____	Other debts - itemize:	_____	_____
Other assets (Schedule D):	_____	_____	TOTAL LIABILITIES	_____	_____
TOTAL ASSETS:	_____	_____	NET WORTH::	_____	_____

Itemized Schedule of Assets & Liabilities

Schedule A – Cash (attach additional pages if necessary) – Total should match cash line above

Applicant or Co-Applicant	Financial Institution	Type of account	Account Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Itemized Schedule of Assets & Liabilities (continued)

Schedule B – Stock, Bonds and Mutual Funds (attach additional pages if necessary) – Total Should match Stocks & Bonds Line Above

Amount of shares	Description	Marketable value	Non-marketable value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Itemized Schedule of Assets & Liabilities (continued)

Schedule C – Real Estate (attach additional pages if necessary) – Total should match Real Estate line on previous page.

Applicant or Co-applicant	Property Address	Type of Property	Amount of Mortgage/liens	Mortgage Payment	Insurance main, tax & misc.

Itemized Schedule of Assets & Liabilities (continued)

Schedule D – Other Assets (attach additional pages if necessary)

Explanation: _____

IF YOU ARE A PRINCIPAL OF OR ARE EMPLOYED BY A FAMILY BUSINESS, PLEASE COMPLETE THIS SECTION:

	Applicant	Co-Applicant
Dividend or partnership income (present year)	_____	_____
Dividend or partnership income (prior year)	_____	_____
Dividend or partnership income (second prior year)	_____	_____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The foregoing application has been carefully prepared, and the undersigned hereby solemnly declare(s) and certify(s) that all information contained herein is complete, true and correct. The information is submitted as being a true and accurate statement of the financial condition of the undersigned on the _____ day of _____, 20____.

X _____
Applicant

Date

X _____
Co-Applicant (if any)

Date