



COMMUNITY DEVELOPMENT
PITTSBURG PUBLIC HOUSING
603 N. PINE · Pittsburg KS 66762

(620) 232-1210
www.pittks.org

APPLICATION **DOWNTOWN SECOND STORY LIVING LOAN** **PROGRAM**

**CITY OF PITTSBURG
DIVISION OF COMMUNITY DEVELOPMENT & HOUSING
603 N. PINE
(620)232-1210**

To process your application for the DOWNTOWN SECOND STORY LIVING Loan Program, the following documents are required. Please submit them to the Community Development & Housing Office.

1. Copy of the warranty deed or contract of sale.
2. Copy of the most recent property tax receipt.
3. Copy of the county's most recent appraised value.
4. Proof of current property insurance.
4. Completed Loan application documents.
5. Copy of a recent Credit Report (must be less than 30 days old) (www://freecreditreport.com).
6. Application fee (\$150.00) CAN BE INCLUDED IN TOTAL LOAN AMOUNT IF LOAN IS APPROVED.

If you have any questions regarding the above requirements, contact 232-1210.

DATE APPLICATION RECEIVED: _____

BY: _____
AGENCY REPRESENTATIVE



CITY OF PITTSBURG COMMUNITY DEVELOPMENT & HOUSING DOWNTOWN SECOND STORY LIVING LOAN APPLICATION

Amount of Loan _____

Maximum Desired Payment _____

JOINT CREDIT (You and the Co-Applicant will both be obligated to repay the loan and credit information will be reported in the name of each of you.) You must provide information about the Co-Applicant in Part B of this application.

INDIVIDUAL CREDIT (You alone will be obligated to repay the loan and credit information will be reported in your name only.) If you are relying on the income of another person to establish your own creditworthiness, you must provide information about that person in the Co-Applicant section of this application and have that person sign this application.

This loan is to be used for: Secured Indicate marital status of Applicant: Married Unmarried Separated Co-Applicant: Married Unmarried Separated

Purpose: _____

APPLICANT			CO-APPLICANT			Relationship to Applicant _____			
Name		Birth date:		Name		Birth date			
Address			Address						
City	State	Zip	City	State	Zip				
Previous Address if less than 5 years		Address		City		State		Zip	
No. Dependents	Home Phone	Business Phone		No. Dependents	Home Phone	Business Phone			
Driver=s License No./State		SS #		Driver=s License No./State		SS #			
Present Employer			Present Employer						
Position		#yrs.		Position		# yrs.			
Previous Employer		# yrs		Previous Employer		# yrs.			
Name of Nearest Relative Not Living With You			Name of Nearest Relative Not Living With You						
Address		City/St/Zip		Address		City/St/Zip			
Relationship		Phone#		Relationship		Phone#			

MONTHLY INCOME	
Applicant Salary	
Co-Applicant Salary	
Rental Income	
Pension	
Social Security	
Other	
Total Income	

PRESENT CREDITORS: List all debts now owing including mortgages, auto loans, credit cards, revolving credit, finance companies, dept. store, child support, etc.					
Creditors	Balance	Monthly Payment	Credit Limit	Date Opened	Purpose/Collateral

List all other household members:		
NAME	RELATIONSHIP	AGE

Monthly Housing Expenses			
Mortgage Payment		Gas Utility	
Maintenance		Electric Utility	
Homeowners Insurance		Water Utility	
Property taxes			

ITEMS IN NEED OF REPAIR (LIST IN PRIORITY)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

I (we) represent that the information contained in this application is true and correct and understand that you will rely on the truth of the foregoing statements. You are authorized to obtain additional information from any credit bureau, the sources listed on the application or any other person.

Signature of Applicant

Signature of Co-Applicant

Date