

**CENTRAL FLORIDA COMMUNITY DEVELOPMENT CORPORATION
CLIENT INTAKE FORM**

Date: _____

Client #: _____

Please provide information about yourself for client tracking purposes. Thank You.

1. First Name _____ MI _____ Last Name _____
(Primary Applicant)

2. First Name _____ MI _____ Last Name _____
(Co-Applicant)

3. Address _____ City _____ State _____ Zip Code _____

4. Home Phone () _____ Work Phone () _____ Cell# _____

5. Social Security # _____ Social Security # _____

Please check all that applies:

6. Ethnicity African American Hispanic Asian Native American White Other: _____

7. Marital Status Single Married Divorced Separated Widowed

8. Gender M F Female Head of Household?

9. Are you a first-time homebuyer? Disabled Senior

10. Family Size _____

11. Annual Gross Income (before taxes) \$ _____ + \$ _____ = \$ _____

12. Income level: Very Low Low Moderate

13. Current Payment Rent \$ _____ Mortgage \$ _____

14. Current Landlord _____ Phone# _____

15. How did you hear about our organization?

- Newspaper Bank Government Walk-In Staff Member Previous Customer
 Friend/Relative Realtor Flyer TV/Radio Homebuyer Fair
 Other _____

Comment: _____

