

Lake County Consortium HOME Program

Demographic Form – Homebuyer Assistance

Project Sponsor: _____

Property Address: _____

Head of Household: _____

Type of Ownership:

Type of Property:

1 = Individual
2 = Partnership
3 = Corporation
4 = Not-for-Profit
5 = Publicly Owned
6 = Other

1 = 1-4 Single Family
2 = Condominium
3 = Cooperative
4 = Manufactured Home

Total Units Prior to Assistance:

Total Units upon Completion:

Meeting Energy Star Standards?:

Section 504 Accessible?:

Yes No

Yes No

Number of Bedrooms:

Unit Value (Required to fund activity): \$

Gross Monthly Income: \$

Housing to Income Ratio: %

% of Area Median Income

0 to 30% 30+ to 50% 50+ to 60% 60+ to 80%

Ethnicity of Head of Household:

Hispanic/Latino
Yes No

Race of Head of Household:

<i>White</i>	<i>American Indian/Alaskan Native & White</i>
<i>Black/African American</i>	<i>Asian & White</i>
<i>Asian</i>	<i>Black/African American & White</i>
<i>American Indian/Alaskan Native</i>	<i>Amer. Indian/Alaskan Native & Black/African Amer.</i>
<i>Native Hawaiian/Other Pacific Islander</i>	<i>Other multi-racial</i>

Size of Household:
Head of Household:

Number of Adults:
 Single, Non-Elderly Elderly

Number of Children:
 Single Parent Two Parents Other

Lead Paint:

1) Applicable Lead Paint Requirement:

<i>Housing constructed before 1978</i>
<i>Exempt: housing constructed 1978 or later</i>
<i>Otherwise exempt</i>

2) Lead Hazard Remediation Actions:

<i>Visual Assessment/Paint Stabilization (24 CFR 35.1015)</i>
<i>Other Actions required by Local/State Codes</i>

Type of Housing Counseling Received

<i>No Counseling</i>
<i>Post Counseling</i>

<i>Pre-Counseling</i>
<i>Both</i>