



977 East Masten Circle  
 Milford, DE 19963  
 Phone: (302) 422-8255



Date received: \_\_\_\_\_

Please include a **\$17.50 money order** per person for a credit report.

**Only money orders can be accepted and must be brought to the scheduled orientation.**

**Applicant** \_\_\_\_\_

Last Name                      First Name                      Middle Initial

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Daytime phone number \_\_\_\_\_

Evening phone number \_\_\_\_\_

Present Address \_\_\_\_\_

Years at present address \_\_\_\_\_

If at present address less than two years, provide:

Previous Address \_\_\_\_\_

Years at previous address \_\_\_\_\_

Employer's Name \_\_\_\_\_

Employer's Address \_\_\_\_\_

Years there \_\_\_\_\_ Phone # \_\_\_\_\_

**Co-Applicant** \_\_\_\_\_

Last Name                      First Name                      Middle Initial

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Daytime phone number \_\_\_\_\_

Evening phone number \_\_\_\_\_

Present Address \_\_\_\_\_

Years at present address \_\_\_\_\_

If at present address less than two years, provide:

Previous Address \_\_\_\_\_

Years at previous address \_\_\_\_\_

Employer's Name \_\_\_\_\_

Employer's Address \_\_\_\_\_

Years there \_\_\_\_\_ Phone # \_\_\_\_\_

Total number of people who will be living in the household:

Children (under 18) \_\_\_\_\_ Adults (over 18) \_\_\_\_\_

Would you consider your current home over crowded? \_\_\_\_\_ How many bedrooms? \_\_\_\_\_

Does your current residence lack adequate plumbing, electric, heat or in dis-repair? \_\_\_\_\_

Does anyone in the household have any special needs? \_\_\_\_\_

Have you been displaced/homeless? \_\_\_\_\_

Please check the areas in which you are interested in living:                       Kent County                       Sussex County

Would you like to receive periodic news from us about our programs, services, and events through our quarterly newsletter?

Yes                       No                      Email address \_\_\_\_\_

How did you hear of the Milford Housing Development Corporation? \_\_\_\_\_

X \_\_\_\_\_  
 Applicant Signature

X \_\_\_\_\_  
 Co-Applicant's Signature

\*By signing this application, the applicant/co- applicant authorizes MHDC, Housing Services Department to obtain a credit report. There is a \$500 loan processing fee to submit a USDA 502 application. **This fee is WAIVED IN FULL for Self Help clients. If a client decides not to continue with the Self Help program after becoming eligible for their loan this \$500 fee will be due in full at closing.**