

Southern Maryland Tri-County Community Action Committee, Inc.
Physical: 8383 Old Leonardtown Road – Mail: P.O. Box 280, Hughesville, Maryland 20637-0280
HOUSING COUNSELING SERVICES APPLICATION

To be completed by Housing Counselor			
Application Received: _____	HCO Entry Date: _____		
CAP-60 Entry Date: _____	HCO Member#: _____		
AP60 Member #: _____	HUD Case: _____		

Applicant: _____

First Name	Middle Name	Last Name
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Co-Applicant: _____

First Name	Middle Name	Last Name
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LIABILITIES/DEBT

Please list any debts you have, including credit cards, auto loans, student loans, and childcare expenses.
DO NOT include rent, utilities, or other monthly expenses.

Paid To	Current Balance	Monthly Payment	Whose Debt? A- Applicant, CA- Co-Applicant BO- Both
TOTAL OUTSTANDING BALANCES			TOTAL MONTHLY PAYMENTS

MONTHLY EXPENSES

MONTHLY BUDGET			
Expense	Amount	Expense	Amount
Current Monthly Rent or Mortgage		Savings	
2 nd Mortgage		Emergency Funds	
Homeowner Association Fees		Car Insurance	
Water/Sewer		Gas – Automobile	
Electric		Maintenance-Automobile	
Gas		Telephone	
Oil		Cellular Phone	
Property Taxes		Payroll Deductions	
House/Renter's Insurance		Federal Taxes	
Home Repair and Maintenance		State Taxes	
Furniture		FICA	
Groceries		Other Deduction:	
Dining Out		Other Deduction:	
Medical /Dental Insurance			
Prescriptions		TOTAL EXPENSES (Monthly)	
Life Insurance		TOTAL LIABILITIES/DEBT (Monthly)	
Day Care			
Clothing & Shoes		TOTAL INCOME (Monthly)	
Education, Lunch, Supplies, Field Trips		NET SURPLUS (income less expenses)	
Recreation, Vacation, Sports			
Church/Charity			
Cable/ Satellite TV/Internet			
Presents			

DEMOGRAPHICS

RACE

- Black or African-American
 American Indian / Alaskan Native
 Multi-Race
 White
 Native Hawaiian / Pacific Islander
 Other
 Asian

REFERRED BY

- Staff/Board Member
 Walk-In
 TV/Radio
 Print Advertisement
 Newspaper Article
 Bank: _____
 Other: _____
 Realtor: _____