



National Housing Trust

FOR OFFICIAL USE

BATCH #																				
NIS #																				
TRN #																				

Application for Home Grant

WHO CAN APPLY?

- ANY CURRENT CONTRIBUTOR TO THE NHT:
 - WHO HAS CONTRIBUTED FOR AT LEAST TEN (10) YEARS;
 - WHOSE INCOME PLACES HIM/HER IN THE TWO (2) LOWEST INCOME BANDS;
 - WHO HAS NEVER RECEIVED A LOAN (INDIVIDUALLY OR AS A CO-APPLICANT), TO BUILD, PURCHASE OR IMPROVE ON A HOUSE;
 - WHO IS NOT A HOMEOWNER;
 - WHO OWNS OR HAS ACCESS TO LAND ZONED FOR RESIDENTIAL PURPOSES;
 - WHO IS BUYING OR BUILDING A HOUSE;
 - WHO IS PROCESSING HIS/HER LOAN DIRECTLY THROUGH THE NHT;
 - WHO HAS SATISFIED THE ELIGIBILITY REQUIREMENTS FOR A NON-HOMEOWNER'S LOAN.
- THE HOME GRANT CAN ONLY BE USED TO ASSIST WITH BUILDING OR PURCHASING A HOUSE.

INSTRUCTIONS

1. ALL SECTIONS OF THIS FORM MUST BE COMPLETED
2. DO NOT WRITE IN SECTIONS LABELLED "FOR OFFICIAL USE".
3. DO NOT USE CORRECTION FLUID (WHITEOUT) OR ERASER (RUBBER) ON THIS FORM. CORRECT ALL ERRORS BY DRAWING A LINE THROUGH THE ERROR AND INITIALING SAME.
4. THE NAME YOU WRITE ON THIS FORM MUST BE THE SAME AS YOU PRESENTLY USE ON LEGAL OR OTHER IMPORTANT DOCUMENTS SUCH AS YOUR PASSPORT OR DRIVER'S LICENCE.
5. THE FOLLOWING DOCUMENTS MUST BE ATTACHED TO THE APPLICATION FORM FOR COMPLETENESS:
 - (i) Proof of income
 - A letter from your present employer stating your gross monthly income (i.e. income before tax) or your last three pay slips (if employed).
 - Financial statements/declaration of income and expenses (if self-employed).
 - (ii) Proof of contributions to the NHT (i.e. a letter from your past and present employers stating the number of weekly contributions for each year of employment (for years worked with a company) or proof of number of weekly contributions from the NHT (for years worked as self-employed).

NOT TO BE SOLD



NHT HOME GRANT APPLICATION RECEIPT

Application for Home Grant

SECTION A

PARTICULARS OF APPLICANT

1. ARE YOU PRESENTLY CONTRIBUTING TO THE NHT? YES NO

2. NATIONAL INSURANCE NUMBER

3. TAXPAYER REGISTRATION NUMBER

4. GENDER

Letter Number Number Number Number Number Number

MALE FEMALE

5. SURNAME

6. FIRST NAME

7. MIDDLE NAME(S)

8. HAVE YOU HAD A NAME CHANGE BY MARRIAGE OR DEED POLL?

YES NO

9. IF YES, STATE PREVIOUS NAME(S)

10. DATE OF BIRTH

DD/MM/YYYY

11. MAILING ADDRESS AND TELEPHONE NO.

NO./STREET _____

DISTRICT _____

PARISH _____

TELEPHONE NO. (HOME) _____

CELLULAR NO. _____

12. HOME ADDRESS

NO./STREET _____

DISTRICT _____

PARISH _____

13. IN WHICH PARISH WOULD YOU LIKE YOUR INTERVIEW TO BE HELD?

14. DO YOU WORK FOR SOMEONE (EMPLOYED) OR FOR YOURSELF (SELF-EMPLOYED)?

EMPLOYED SELF-EMPLOYED BOTH

15. WHAT IS YOUR MAIN OCCUPATION? PLEASE GIVE YOUR PRECISE OCCUPATION (e.g., POLICE INSPECTOR, TRAINED GRADUATE TEACHER)

SECTION B

PREVIOUS LOAN AND HOME OWNERSHIP INFORMATION

1. HAVE YOU EVER RECEIVED A LOAN/BENEFIT FROM THE NHT?

NO

YES WHAT WAS THE PURPOSE OF THE LOAN?

TO PURCHASE A HOUSE TO PURCHASE A LOT TO BUILD A HOUSE TO IMPROVE ON A HOUSE

OTHER, (PLEASE STATE) _____

2. HAVE YOU EVER TAKEN OVER A LOAN FROM SOMEONE WHO RECEIVED AN NHT BENEFIT? YES NO

3. HAVE YOU EVER JOINED OR CO-APPLIED WITH ANYONE WHO OBTAINED A LOAN/BENEFIT FROM THE NHT?

NO

YES WHAT WAS THE PURPOSE OF THE LOAN?

TO PURCHASE A HOUSE TO PURCHASE A LOT TO BUILD A HOUSE TO IMPROVE ON A HOUSE

OTHER, (PLEASE STATE) _____

4. IS YOUR NAME ON ANY REGISTERED OR COMMON-LAW TITLE FOR ANY RESIDENTIAL PROPERTY?

NO

YES IF REGISTERED TITLE, STATE THE VOLUME, FOLIO NUMBER AND PROPERTY ADDRESS,

VOLUME NUMBER: _____ FOLIO NUMBER: _____

ADDRESS: _____

4b. IF YES, IS THE PROPERTY: LAND ONLY? HOUSE?

5. THE HOUSE THAT YOU LIVE IN: DO YOU LEASE/RENT IT? DO YOU OWN IT? DO YOU LIVE RENT FREE? IS IT OWNED BY SPOUSE/COMMON LAW PARTNER?

SUBMITTED BY _____

NAME OF PERSON WHO SUBMITTED THE FORM

RECEIVING OFFICER _____

DATE _____

NHT'S RECEIVED
STAMP & DATE

SECTION C**PURPOSE OF THE HOME GRANT**

1. FOR WHAT PURPOSE WILL YOU BE USING THE HOME GRANT?

 TO ASSIST WITH BUYING A HOUSE?**OR** TO ASSIST WITH BUILDING A HOUSE?1a. HAVE YOU IDENTIFIED THE HOUSE? YES NO1b. DO YOU OWN OR HAVE ACCESS TO LAND? YES NO**SECTION D****EMPLOYMENT HISTORY****1. Present Employment**

1. PROVIDE DETAILS OF YOUR PRESENT EMPLOYMENT.

NAME OF YOUR EMPLOYER _____

BRANCH/ OFFICE or LOCATION NAME _____

NO./STREET _____

DISTRICT/AREA _____

PARISH _____ TELEPHONE NUMBER(S) _____

2. WHEN DID YOU START WORKING WITH THIS EMPLOYER? _____
DD/MM/YYYY

3. WHAT IS YOUR INCOME BEFORE TAX (I.E. GROSS INCOME)?

TOTAL WEEKLY \$ _____ OR TOTAL FORTNIGHTLY \$ _____ OR TOTAL MONTHLY \$ _____

2. Self-Employment1. WHEN DID YOU START SELF-EMPLOYMENT? _____
MM/YYYY

2. WHAT IS YOUR INCOME AFTER EXPENSES? _____

3. DO YOU PAY NHT CONTRIBUTIONS ON THIS INCOME? YES NO4. HOW LONG HAVE YOU BEEN PAYING CONTRIBUTIONS ON THIS INCOME? FROM _____
YYYY TO _____
YYYY**3. Previous Employment**

	NAME OF EMPLOYER(S)		PERIOD WORKED (MM/YYYY)		NO. OF WKLY CONTRIBUTIONS
			FROM	TO	
(i)			FROM	TO	
(ii)			FROM	TO	
(iii)			FROM	TO	
(iv)			FROM	TO	

(IF MORE SPACE IS NEEDED, ATTACH A SHEET OF PAPER)

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SECTION E

MONTHLY INCOME AND EXPENDITURE

MONTHLY INCOME	\$	MONTHLY EXPENSES	\$
INCOME AFTER TAX (I.E. NET INCOME)		RENT/LEASE	
INCOME FROM		BANK OR CREDIT UNION LOAN PAYMENTS	
• REAL ESTATE (E.G. SOMEONE PAYING YOU LEASE OR NET)		CREDIT CARD PAYMENTS	
• BONUS AND COMMISSIONS		FOOD	
• DIVIDENDS/INTEREST INCOME (E.G. EARNINGS FROM SHARES OR INVESTMENTS)		MORTGAGE	
• OTHER SOURCES		LIFE INSURANCE PREMIUM(S)	
		OTHER LIVING EXPENSES (E.G. ELECTRICITY WATER, ETC)	
TOTAL MONTHLY INCOME		TOTAL MONTHLY EXPENSES	

SECTION F

DECLARATION

ANY PERSON WHO REPRESENTS FALSE DOCUMENTS OR INFORMATION TO OBTAIN A BENEFIT FROM THE NHT WILL BE PROSECUTED.

I DECLARE THAT THE INFORMATION ENTERED ON THIS FORM IS TRUE.

NAME OF APPLICANT _____

SIGNATURE OF APPLICANT _____

DD/MM/YYYY

SECTION G

FOR OFFICIAL USE

APPLICABLE INTEREST RATE & POINTS SUMMARY

(a) APPLICABLE INTEREST RATE: _____

(b) NUMBER OF NHT CONTRIBUTIONS: _____

(c) EARNINGS (WKLY.) \$ _____

TOTAL POINTS _____

NO. OF POINTS

1ST CHECK DONE BY: _____
NAME

SIGNATURE

--	--

INITIALS

2ND CHECK DONE BY: _____
NAME

SIGNATURE

--	--

INITIALS

LOG NUMBER

--	--

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NHT'S RECEIVED
STAMP & DATE