City of Plattsburgh EDRLF Loan Monthly income and expense statement

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Applicant's Name: _____

Part A. Marital Status and Dependents

Please select your current Marital Status:

Single
Married
Divorced
Separated
Widowed
Common Law
Unknown
Please list all dependents of you and your spouse with their age and relationship to you (if applicable).

Part B. Applicant's Employer Information

Name and Address of your employer:

How long have you been employed at this job:

Occupation (please state job title or provide brief description):

Part C. Spouse or Companion's Employer Information

Name and Address of your spouse's employer:

How long has spouse been employed at this job: Occupation (please state job title or provide brief description):

Second employer (if applicable): indicate if for applicant or spouse Name and Address of your **Second** employer:

How long have you been employed at this second job: Occupation (please state job title or provide brief description):

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Notes:

Part 1. Current Household Monthly Income

State the monthly income for all persons living in your household who contribute to household expenses. If your income for one of the below categories varies from month to month, state the average income for the previous 6 months and note "avg. varies" complete the below chart by entering in your income for all six months.

	Applicant	Spouse or Companion	Others	For Office Use Only
Gross wages, salary, tips, bonuses, overtime, commissions.				
Income from operation of business: a. Gross Income - b. Expenses = c. Net Income.				
Rent and other real property income:: a. Gross Income - b. Expenses				
= c. Net Income.				
Interest, dividends, and royalties.				
Pension and retirement income (NOT Social Security).				
Regular contributions from others to the household expenses, including child support.				
Unemployment Compensation.				
Other sources not already mentioned. Describe:				
			TOTAL MONTHLY	

Part 2. Current Household Expenses

Indic	ate how much you pay for each item each month:
1.	Rent or Home Mortgage:
	Does that amount include real estate taxes: 🗌 No 🗌 Yes
	Does that amount include property insurance: 🗌 No 🗌 Yes
2.	Utilities:
	a. Electricity and heating fuel:
	b. Water and sewer:
	c. Telephone service/long distance:
	d. Do you have any other utility bills? If yes , describe and enter monthly amount below:
3.	Home maintenance (including repairs and upkeep):
4.	Food:
5.	Clothing:
6.	Laundry and dry cleaning:
7.	Medical and dental expenses:
8.	Transportation (do NOT include car payments):
9.	Recreation and entertainment:
10.	Charitable contributions:
11.	Insurance NOT deducted from wages or included in home mortgage payments:
	a. Homeowner's or renter's insurance:
	b. Life insurance:
	c. Health insurance:
	d. Auto insurance:
	e. Other insurance (describe and list monthly amount):
12.	Tax bills NOT deducted from wages or included in home mortgage payments:

13.	Installment	payments	for car,	furniture,	etc.	(Describe):
	motumnom	paymonic	ioi oui,	rannaro,	0.0.	100001100).

•	Alimony, maintenance and support paid to others:
5.	Payments for support of additional dependents not living at your home:
6.	Regular expenses from operation of business, profession or farm:
7.	Describe any increase or decrease in expenses you expect to occur within the next year?

The undersigned applicant for a grant and loan from the City of Plattsburgh certifies that he foregoing information is complete and accurate as of the below date.

Date; _____

Applicant's signature

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