



CAPITAL AREA HOUSING PARTNERSHIP

MICHIGAN IDA APPLICATION REVIEW

Request for Information Form

Date: _____

Applicant's Name: _____

Reviewer's Name: _____

Capital Area Housing Partnership is in need of information to determine your eligibility to participate in the Michigan IDA program. Please bring the following documents with you when you come in for your appointment:

_____ IDA application, filled out to the best of your ability

_____ Current Driver's License or Identification Card

_____ Social Security Card for each household member

_____ Most recent payroll check stub, showing year-to-date earnings

_____ Prior Year IRS tax return for all household members (18 and over)

_____ Most recent 1099 forms (if self-employed)

_____ Most recent W-2 forms for all household members

_____ Child support statements showing the last 12 months

_____ Documentation for any other household income received in the last calendar year (Such as Social Security Award Letter)

If you have any questions or need additional information, please contact **LeighAnna** at **(517) 332-4663**.

Thank you and we look forward to working with you!