

SINGLE-FAMILY ELIGIBILITY PROGRAMS (SFEP) PROPERTY DATA FORM



APPLICANT INFORMATION

First Name:		Middle Name:		Last Name:	
Property Address:					
Street Address		City		State	Zip Code
Year Built:					

Please choose one of the following sections to complete.

INFORMATION FOR NEW CONSTRUCTION PROPERTY

Builder:	
Contact Person:	
Phone Number:	

INFORMATION FOR EXISTING PROPERTY

Listing Agent:	
Phone Number:	Email:
Buyer's Agent Name:	
Phone Number:	Email: