

Shared Equity Applicant Checklist

Applicant Name: _____

Current Address: _____

Cell Phone: _____

Email: _____

Completed Shared Equity Buyer Application

Last Three Years of IRS Returns

Last Two Months of Paystubs

Last Two Months Checking Statements

Last Two Months Savings Statements

Most recent Statements from Additional Income Sources (*if applicable*)

Please send all documents to Tieasha Gayle Program Coordinator tgayle@cljct.org.