

North Dakota Assistive Technology Financial Loan Program
Loan Application: Part 3 - 1
Financial Information-Monthly Income



| <i>Applicant</i> | Gross Amount for 1 month |
|---|---------------------------------|
| Employment (before tax income) | \$ |
| Social Security Supplemental Income (SSI) | \$ |
| Social Security Disability Insurance (SSDI) | \$ |
| Pension/Retirement | \$ |
| Disability Benefits | \$ |
| Unemployment Insurance | \$ |
| Rental Income | \$ |
| Child Support | \$ |
| Alimony | \$ |
| Interest Income | \$ |
| Fuel Assistance | \$ |
| Housing Assistance | \$ |
| Family Subsidy | \$ |
| TANF | \$ |
| Home Health Income | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| TOTAL | \$ |

NOTE: Alimony, Child Support or Separate Maintenance Income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

| <i>Applicant</i> | Amount |
|------------------------------------|---------------|
| Current Amount in Checking Account | \$ |
| Current Amount in Savings Account | \$ |

North Dakota Assistive Technology Financial Loan Program

Loan Application: Part 3 - 1

Financial Information-Monthly Income



| <i>Co-Applicant</i> | Gross Amount for 1 month |
|---|---------------------------------|
| Employment (before tax income) | \$ |
| Social Security Supplemental Income (SSI) | \$ |
| Social Security Disability Insurance (SSDI) | \$ |
| Pension/Retirement | \$ |
| Disability Benefits | \$ |
| Unemployment Insurance | \$ |
| Rental Income | \$ |
| Child Support | \$ |
| Alimony | \$ |
| Interest Income | \$ |
| Fuel Assistance | \$ |
| Housing Assistance | \$ |
| Family Subsidy | \$ |
| TANF | \$ |
| Home Health Income | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| TOTAL | \$ |

NOTE: Alimony, Child Support or Separate Maintenance Income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

| <i>Co-Applicant</i> | Amount |
|------------------------------------|---------------|
| Current Amount in Checking Account | \$ |
| Current Amount in Savings Account | \$ |

North Dakota Assistive Technology Financial Loan Program

Loan Application: Part 3 - 1

Financial Information-Monthly Income



| <i>Person with Disability</i> | Gross Amount for 1 month |
|---|---------------------------------|
| Employment (before tax income) | \$ |
| Social Security Supplemental Income (SSI) | \$ |
| Social Security Disability Insurance (SSDI) | \$ |
| Pension/Retirement | \$ |
| Disability Benefits | \$ |
| Unemployment Insurance | \$ |
| Rental Income | \$ |
| Child Support | \$ |
| Alimony | \$ |
| Interest Income | \$ |
| Fuel Assistance | \$ |
| Housing Assistance | \$ |
| Family Subsidy | \$ |
| TANF | \$ |
| Home Health Income | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| TOTAL | \$ |

NOTE: Alimony, Child Support or Separate Maintenance Income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

| <i>Person with Disability</i> | Amount |
|--------------------------------------|---------------|
| Current Amount in Checking Account | \$ |
| Current Amount in Savings Account | \$ |

North Dakota Assistive Technology Financial Loan Program

Loan Application: Part 3 - 2

Financial Information-Monthly Payments



| <i>Applicant</i> | Monthly Payments |
|-----------------------------|------------------|
| Car Loan | \$ |
| Mortgage/Rent | \$ |
| Phone | \$ |
| Cable | \$ |
| Heat | \$ |
| Utilities | \$ |
| Car Insurance | \$ |
| Health Insurance | \$ |
| Homeowners/Rental Insurance | \$ |
| Childcare | \$ |
| Child Support | \$ |
| Alimony | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Leases | \$ |
| Food | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |

| | |
|------------------|----|
| Other: Specify | \$ |
| Medical Payments | \$ |
| TOTAL | \$ |

| <i>Applicant</i> | Answer |
|-----------------------------------|---------------------------------------|
| Can you afford a monthly payment? | Yes or No Circle One |
| If Yes, how much? | \$ |

North Dakota Assistive Technology Financial Loan Program

Loan Application: Part 3 - 2

Financial Information-Monthly Payments



| <i>Co-Applicant</i> | Monthly Payments |
|-----------------------------|-------------------------|
| Car Loan | \$ |
| Mortgage/Rent | \$ |
| Phone | \$ |
| Cable | \$ |
| Heat | \$ |
| Utilities | \$ |
| Car Insurance | \$ |
| Health Insurance | \$ |
| Homeowners/Rental Insurance | \$ |
| Childcare | \$ |
| Child Support | \$ |
| Alimony | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Leases | \$ |
| Food | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |

| | |
|------------------|----|
| Other: Specify | \$ |
| Medical Payments | \$ |
| TOTAL | \$ |

| <i>Co-Applicant</i> | Answer |
|-----------------------------------|---------------------------------------|
| Can you afford a monthly payment? | Yes or No Circle One |
| If Yes, how much? | \$ |

North Dakota Assistive Technology Financial Loan Program

Loan Application: Part 3 - 2

Financial Information-Monthly Payments



| <i>Person with Disability</i> | Monthly Payments |
|-------------------------------|------------------|
| Car Loan | \$ |
| Mortgage/Rent | \$ |
| Phone | \$ |
| Cable | \$ |
| Heat | \$ |
| Utilities | \$ |
| Car Insurance | \$ |
| Health Insurance | \$ |
| Homeowners/Rental Insurance | \$ |
| Childcare | \$ |
| Child Support | \$ |
| Alimony | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Loan/Credit Card | \$ |
| Leases | \$ |
| Food | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |
| Other: Specify | \$ |

| | |
|------------------|-----------|
| Other: Specify | \$ |
| Medical Payments | \$ |
| TOTAL | \$ |