

Applicant \_\_\_\_\_  
 Co-applicant \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_

Telephone #

(H) \_\_\_\_\_

(W) \_\_\_\_\_

Family Size:

Applicant \_\_\_\_\_

Co-applicant \_\_\_\_\_

Dependent Children \_\_\_\_\_

Total Family Size: \_\_\_\_\_

Housing Rent: \$ \_\_\_\_\_ /Month

### ASSETS

Home:

Taxable Assessed Value \$ \_\_\_\_\_

Balance of Mortgage \$ \_\_\_\_\_

Monthly Payment \$ \_\_\_\_\_

Other Real Estate-Desc. \_\_\_\_\_

Taxable Assessed Value \$ \_\_\_\_\_

Balance of Mortgage \$ \_\_\_\_\_

Monthly Payment \$ \_\_\_\_\_

Automobile #1

Make/Model/Year \_\_\_\_\_

Monthly Payment \$ \_\_\_\_\_

Automobile #2

Make/Model/Year \_\_\_\_\_

Monthly Payment \$ \_\_\_\_\_

### INCOME (Weekly/Biweekly/Monthly)

Gross Wages-Applicant \$ \_\_\_\_\_

Gross Wages-Co-applicant \$ \_\_\_\_\_

Disability Income \$ \_\_\_\_\_

Alimony \$ \_\_\_\_\_

Child Support \$ \_\_\_\_\_

Rent Income \$ \_\_\_\_\_

Unemployment \$ \_\_\_\_\_

Investment Income \$ \_\_\_\_\_

Gross Soc Security-Applicant \$ \_\_\_\_\_

Gross Soc Security-Co-Applicant \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Checking Balance \$ \_\_\_\_\_

Savings Balance \$ \_\_\_\_\_

Investments \$ \_\_\_\_\_

## COPIES OF THE FOLLOWING ARE REQUIRED IN ORDER TO PROCESS YOUR APPLICATION

*(If These Are Not Applicable To You Please Indicate "NA")*

☐ **Checking Account Statements** (last 2 months) \_\_\_\_\_

☐ **Savings or Investments Statements** (last 2 statements) \_\_\_\_\_

☐ **Payroll** (Last 2 pay vouchers) \_\_\_\_\_

☐ **Federal Income Tax Return** (last calendar year) \_\_\_\_\_

☐ **Notification of Social Security Benefits** \_\_\_\_\_

*Our signatures below indicate that the above information is accurate.*

SIGNATURES:

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Co-applicant \_\_\_\_\_ Date \_\_\_\_\_

**Please return this application along with  
any required copies to:**

**Patient Financial Services  
Ortonville Area Health Services  
450 Eastvold Avenue  
Ortonville, MN 56278**