

Please explain in clear handwriting what your needs are:

How did you hear about us? _____ Best time(s) to telephone you: _____

General Questions:

Husband's Name (include last name)	Teudat Zehut / Kuppa #	Cell Phone
Wife's Name (including last name)	Teudat Zehut / Kuppa #	Cell Phone
Full Home Address (include CITY)		Home Phone
Husband's Email	Wife's Email	Aliyah Date

Additional Questions:

Do you have a Social Worker	Do you have a file with the Revacha	Do you own a Car
Are you receiving Financial Assistance from any Programs Currently?		

Employment Details: (If more than one, please include details)

Employment - Husband	Description	DOB (Date of Birth)
Employment - Wife	Description	DOB (Date of Birth)

Housing Questions:

Do you currently Rent	Monthly Rental Amount	Do you receive Gov't Rental Assistance
If yes, when did Gov't Assistance Start	Amount per month	Did you ever apply for an APARTMENT from the Gov't

Do you Own your Home	Do you have a Mortgage	Monthly Mortgage Amount
Current Value of the Home	Full Mortgage Balance	When did you buy the Property
Do you Own Any Additional Property	Current Property Value(s)	Mortgage Balance(s)
Total Rental Income	Are you listed on the Deed	When did you Buy this Property
Have you ever sold an apartment in Israel	If yes, when was it sold	Are you listed on ANY Deed
Have you ever applied to Ministry of Housing	If yes, when were you approved	What branch are you affiliated with

Additional Notes:

Mortgage / Investment Questions:

Are you interested in an Investment Property		Are you willing to take out a Mortgage	Have you been Pre-Approved
If yes, at which Bank	Have you ever been turned down for a Mortgage		If yes, at which bank
Cash Available towards Purchase		Any other funds available towards the investment – where	

Income: (Monthly)

Husband's Income	
Wife's Income	
Rental Assistance from Organizations	
Children – Kitzbat Yeladim	
Unemployment	
Rental Income from Apt / Investment	
Long Term Disability – Siudi - סיעודי	
Bituach Leumi Nehut (%)	
Bituach Leumi Nehut (%)	
Bituach Leumi Nehut (%)	
Bituach Leumi Nayadut (%)	
Sherutim Meyuhadim - שר"מ	
Parents	
Gmach	
Additional Income	

Expenses: (Monthly)

Rent	
Mortgage	
Average Utilities	
Tuition	
Tutoring	
Therapy #1	
Therapy #2	
Therapy #3	
Health Insurance	
Prescriptions	
Food	
Transportation Expenses	
Foreign Worker – Oved Zar	
Other:	
Total Debt Outstanding (not including Mortgages)	

Additional Notes:

List all Family Members (whether there is a medical issue or not)

Kupah: Meuhedet / Clalit / Leumit / Maccabi

Name	Age	Therapies, Diagnosis, Disability, Medications
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		