## City of Fairfax For-Sale Affordable Dwelling Unit Progam Supplemental Application

You must complete the Supplemental Application and provide supporting documents to confirm you live and/or work in the City of Fairfax, have a household member with a disability, and have a dependent child under 18 before the listing closing date. The supporting documents may include but are not limited to the following: driver's license or identification, lease, utility bill, employer information, and Social Security Disability Insurance statement to confirm a person with a disability. Please do not provide any medical information stating the nature of the disability.

NAME OF HEAD OF HOUSEHOLD:	
NAME OF CO-HEAD OF HOUSEHOLD:	
EMAIL: PHON	E NUMBER:
Check "Yes" or "No" to all the questions and fill in the dates where applicable:	
Do you live in the City of Fairfax?	Yes 🗖 No 🗖
If yes, when did you move into the City of Fairfax?	
Do you work in the City of Fairfax?	Yes 🗖 No 🗖
If yes, when did you start working in the City of Fairfax?	
Does anyone in your household have a disability?	Yes 🗖 No 🗖
Does your household have a dependent child unde	r 18? Yes 🗖 No 🗖
For more information on the City of Fairfax ADU Program, please visit:	
https://www.fairfaxva.gov/government/community-development-planning/zoning/affordable- dwelling-units.	

## For more information on the Fairfax County FTHB Program, please visit:

https://www.fairfaxcounty.gov/housing/homeownership/firsttimehomebuyers