



## CANCER STATE AID PROGRAM REAL ESTATE/PROPERTY ASSETS WORKSHEET

If the applicant owns any real estate other than the primary residence this form must be completed and submitted with the CSA Financial Application – form 3621F

**Patient Name:** \_\_\_\_\_ **DOB:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Real Estate assets:** Grand total equity of all properties listed in #1 and #2 added together: \$

Round all numbers to the nearest whole number.

Enter the grand total value calculated into Section VI of form 3621F, the CSA Program application and add to the value listed on line 6 on the financial eligibility worksheet.

\*The principle residence or home of the applicant is not included as an asset. Assets include financial investments and banking accounts, land, rental properties, and other family resources.

**Amounts received from rental property are to be counted as earned income and that property is not included as an asset.** Rental income should be listed on the application in section IV and should not be included on this form.

If such property is not currently rented, the fair market value of the property will be counted as an asset and entered into Section VI on the application.

Fair market value must be documented by a printout of a web page from a site such as Home Gain <http://www.homegain.com/homevalues> or Zillow <http://www.zillow.com/> which clearly displays the address of the property and the current estimated home value. Tax and mortgage documents showing the home value, loan amount, and remaining balance owed may be required to assist determination of Cancer State Aid eligibility.

### List the Applicant's owned real estate (assets):

**Property by Type – only complete the sections for the property type that is owned by the patient and family.**

1. **Land** that is not rented to another person(s): **Estimated Equity Value of Land from 1E.** \$

A. Legal address of owned land:

\_\_\_\_\_

B. Number of acres or size of lot:

\_\_\_\_\_ Acres or Lot size: \_\_\_\_\_ feet x \_\_\_\_\_ feet

C. If the land has an existing mortgage loan:

Original loan amount borrowed: \$\_\_\_\_\_ Amount paid on the loan: \$\_\_\_\_\_

Remaining amount owed on the mortgage loan (subtract amount paid from the amount borrowed): \$\_\_\_\_\_

D. The estimated sales price of the land: \$\_\_\_\_\_

Please use the web sites for Home Gain <http://www.homegain.com/homevalues> or Zillow <http://www.zillow.com/> to obtain the estimated sale price for which the land could be sold.

- E. **Calculate the equity/asset value of the land:** Estimated sales price minus (-) the amount owed equals (=) the estimated equity; **enter** above where indicated (first line for number 1). A copy of the print out from the web site used to obtain the fair market value of the land is required with the application. Printout must clearly show the estimated sales price and those of surrounding similar properties, and the date the document was printed.

If there are no immediately surrounding properties with prices, then provide a printout of similar properties in that county or region. Information provided is subject to verification.

2. **Other real estate** (house, mobile home, duplex, other building etc.) owned that is not currently rented to another person(s) and is not the principle residence of the applicant:

Type of property: \_\_\_\_\_ **Estimated Equity Value of Property from 2D.** \$

A. Legal address of property: \_\_\_\_\_

- B. If the property (house or property other than land) has an existing mortgage loan:

Original loan amount borrowed: \$ \_\_\_\_\_ Amount paid on the loan: \$ \_\_\_\_\_

Remaining amount owed on the mortgage loan (subtract amount paid from the amount borrowed): \$ \_\_\_\_\_

- C. The estimated sales price of the property: \$ \_\_\_\_\_

Please use the web sites for Home Gain <http://www.homegain.com/homevalues> or Zillow <http://www.zillow.com/> to obtain the current estimated sales price for the property.

- D. **Calculate the equity/asset value of the property:** Estimated sales price minus (-) the amount owed = estimated equity; **enter** above where indicated (first line for number 2). A copy of the print out from the web site used to obtain the fair market value of the land is required with the application. Printout must clearly show the estimated sales price and those of surrounding similar properties, and the date the document was printed. If there are no immediately surrounding properties with prices, then provide a printout of similar properties in that county or region.

All information provided is subject to verification. If more pages are needed this form may be copied.

**Applicant/Patient signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Person completing form: \_\_\_\_\_ Title: \_\_\_\_\_  
*Signature*

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Provide contact information only if different from that listed in Section I on the application form 3621F.

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Provider Facility (site): \_\_\_\_\_