



Dear Applicant: We need you to complete this application to determine if you qualify for a Habitat for Humanity house. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

Please return to: Family Selection Committee c/o

1. APPLICANT INFORMATION

Applicant				Co-applicant			
Applicant's name (include maiden name if applicable)				Co-applicant's name (include maiden name if applicable)			
Social Security Number:		Home Phone:		Social Security Number:		Home Phone:	
Age:		Date of Birth:		Age:		Date of Birth:	
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (inc. single, divorced, widowed)				<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (inc. single, divorced, widowed)			
Dependents (people who live with you not listed by co-applicant)				Dependents (people who live with you not listed by co-applicant)			
Name	Age	Male	Female	Name	Age	Male	Female
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Present Address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent Please give street address, not PO. Box.				Present Address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent Please give street address, not PO. Box.			
Number of Years _____				Number of Years _____			
If Living at Present Address for Less Than Two Years Complete the Following							
Last Address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent				Last Address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent			
Number of Years _____				Number of Years _____			

2. FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date Received: _____
 More Information Requested? Yes No → Date Information Sent: _____
 Date Application Completed: _____ Date of Home Visit: _____
 Accepted Denied Date Letter Sent: _____



We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity through the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin.

3. WILLINGNESS TO PARTNER

To be considered for a Habitat home, you and your family must be willing to complete a certain number of "sweat equity" hours. Your help in building your home and the homes of others is called "sweat equity", and may include clearing the lot, painting, helping with construction, working in the Habitat office, or other approved activities.

Yes No

I AM WILLING TO COMPLETE THE REQUIRED SWEAT EQUITY HOURS:

Applicant:

Co-Applicant

4. PRESENT HOUSING CONDITIONS

Number of bedrooms (please circle) 1 2 3 4 5

Other rooms in the place where you are currently living:

Kitchen Bathroom Living Room Dining Room Other (please describe)

If you rent your residence, what is your monthly rent payment? \$ _____/month

(Please supply a copy of your lease or a copy of a money order receipt or cancelled rent check.)

Name, address and ph. number of current landlord: _____

Name, address and ph. number of previous landlord: _____

Name, address and ph. number of previous landlord: _____

In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat home?

5. PROPERTY INFORMATION

If you own your residence, what is your monthly mortgage payment \$ _____/month Unpaid Balance \$ _____

Do you own land? No Yes (If yes, please describe, including location) _____

Is there a mortgage on the land? No Yes If yes: Monthly Payment \$ _____ Unpaid Balance \$ _____

If you are approved for a Habitat home, how should your name(s) appear on the legal documents?

6. EMPLOYMENT INFORMATION

Applicant		Co-Applicant	
Name and Address of <u>Current</u> Employer	Years on this job	Name and Address of <u>Current</u> Employer	Years on this job
	Monthly Gross Wages		Monthly Gross Wages
Type of Business	Business Phone	Type of Business	Business Phone
If Working At Current Job Less Than One Year, Complete The Following Information			
Name and Address of <u>Last</u> Employer	Years on this job	Name and Address of <u>Last</u> Employer	Years on this job
	Monthly Gross Wages		Monthly Gross Wages
Type of Business	Business Phone	Type of Business	Business Phone

7. MONTHLY INCOME AND COMBINED MONTHLY BILLS

Gross Monthly Income	Applicant	Co-applicant	² Others in Household	³ Monthly Bills	Monthly amount
Gross Employment income (before taxes)				Rent	
TANF				Utilities	
Food Stamps				Car Payments	
Social Security				Insurance	
SSI				Child care	
Disability				Groceries/eating out	
Alimony				Average Credit Card or other loan payment	
Child Support				Student Loans	
Other				Alimony/Child support	
Total				Total	

¹ Self-employed applicant(s) may be required to provide additional documentation such as tax returns and financial statements.

³ Please attach copies of last month's bills.

² List additional household members over 18 who receive income:

<u>Name:</u> _____	<u>Age</u> _____
Monthly wages \$ _____	
<u>Name:</u> _____	<u>Age</u> _____
Monthly wages \$ _____	
<u>Name:</u> _____	<u>Age</u> _____
Monthly wages \$ _____	

8. SOURCE OF DOWNPAYMENT AND CLOSING COSTS

Where will you be getting the money to pay the down payment and closing costs (for example: savings, parents)? If you are borrowing money to pay these costs, explain how and from whom.

9. ASSETS

ASSET CHECK LIST

I, _____, hereby certify that my household, including any minors, has or does not have the following assets:

Check all that apply, and underneath each listing, please list name and address of institution and current balance.

YES	NO	_____ checking account, cash in a safe deposit box
_____	_____	_____ savings account and/or Christmas club

_____ certificate of deposit

_____ stocks, mutual funds, and/or bonds

_____ life insurance policy which accumulates a cash value

_____ house and/or property (own or co-own)

_____ trust fund (note revocable or nonrevocable)

_____ treasury bills and/or market funds

_____ retirement or pension funds (i.e. Ira, 401k)

_____ personal property you hold as an investment (such as coin or stamp collections, etc.)

_____ any other assets not mentioned on this list.

Explain: _____

_____ disposed of any assets for less than fair market value of the asset (gave money to a family member, etc.)

If so, explain: _____

The information provided is true and complete to the best of my knowledge and belief. I consent to the disclosure of income and financial information from my financial references for purposes of asset verification related to my application for housing with Habitat for Humanity.

_____ Date

_____ Applicant signature

_____ Date

_____ Co-applicant signature

Do you own a: Stove	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Do you own a: Car (#1)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	Make and year _____		
Washer	<input type="checkbox"/>	<input type="checkbox"/>	Car (#2)	<input type="checkbox"/>	<input type="checkbox"/>
Dryer	<input type="checkbox"/>	<input type="checkbox"/>	Make and year _____		

10. DEBT

To Whom Do You and the Co-Applicant Owe Money?

Name and address of company	Monthly payment \$ _____ Unpaid balance \$ _____ Months left to pay: _____	Name and address of company	Monthly payment \$ _____ Unpaid balance \$ _____ Months left to pay: _____
Name and address of company	Monthly payment \$ _____ Unpaid balance \$ _____ Months left to pay: _____	Name and address of company	Monthly payment \$ _____ Unpaid balance \$ _____ Months left to pay: _____
Name and address of company	Monthly payment \$ _____ Unpaid balance \$ _____ Months left to pay: _____	Alimony/Child Support	
		Job-Related Expenses (Child Care, Union Dues, etc.)	
		Other	
Name and address of company	Monthly payment \$ _____ Unpaid balance \$ _____ Months left to pay: _____	Column 2: Subtotal of Payments	
		Column 1: Subtotal of Payments	
		Total Monthly Expenses	

11. DECLARATIONS

Please Check the Box That Best Answers the Following Questions For You and the Co-Applicant.

	Applicant	Co-Applicant
a. Do you have any debt because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Have you been declared bankrupt within the past 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had property foreclosed on in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Are you paying alimony or child support?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you a U.S. citizen or permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Answering "yes" to these questions does not automatically disqualify you. If you answered "yes" to any question a through e, however, please explain on a separate sheet of paper.

12. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to be a partner family. I understand that the verifications and inquiries that may be requested include but are not limited to, identity and marital status, custody of minors, previous landlords, employment, income, assets, residences and rental payment history, credit activity, home visits, and utility payments. A photocopy of this authorization may be used for the purposes stated above. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to receive a Habitat home, I may be disqualified from the program. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

Applicant signature	Date	Co-Applicant Signature	Date
X _____		X _____	

Please note: if more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application. PLEASE MARK YOUR ADDITIONAL COMMENTS WITH "A" FOR APPLICANT OR "C" FOR CO-APPLICANT.

13. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

Please read this Statement Before Completing the Box Below: The following information is requested by the federal government for loans related to the purchase of home, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.)

Applicant	Co-Applicant
<p>Applicant's name _____</p> <p><input type="checkbox"/> I do not want to furnish this information</p> <p>Race/National Origin:</p> <p><input type="checkbox"/> American Indian or Alaskan Native</p> <p><input type="checkbox"/> Asian or Pacific Islander</p> <p><input type="checkbox"/> White, not of Hispanic origin</p> <p><input type="checkbox"/> Black, not of Hispanic origin</p> <p><input type="checkbox"/> Hispanic</p> <p><input type="checkbox"/> Other (specify)</p> <p>Sex</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Birth date: ____/____/____</p> <p>Marital Status:</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)</p>	<p>Co-Applicant's name _____</p> <p><input type="checkbox"/> I do not want to furnish this information</p> <p>Race/National Origin:</p> <p><input type="checkbox"/> American Indian or Alaskan Native</p> <p><input type="checkbox"/> Asian or Pacific Islander</p> <p><input type="checkbox"/> White, not of Hispanic origin</p> <p><input type="checkbox"/> Black, not of Hispanic origin</p> <p><input type="checkbox"/> Hispanic</p> <p><input type="checkbox"/> Other (specify)</p> <p>Sex</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Birth date: ____/____/____</p> <p>Marital Status:</p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)</p>

To Be Completed Only By The Person Conducting The Interview

<p>This application was taken by:</p> <p><input type="checkbox"/> Face-to-face interview</p> <p><input type="checkbox"/> By Mail</p> <p><input type="checkbox"/> By Telephone</p>	<p>Interviewer's Name (print or type)</p> <hr/> <p>Interviewer's Signature Date</p> <hr/> <p>Interviewer's Phone Number</p>
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