

Application

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



We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout 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.

1. Applicant Information					
Applicant			Co-Applicant		
Full name with middle initial:			Full name with middle initial:		
Social Security Number			Social Security Number		
Home Phone Number			Home Phone Number		
Cell Phone Number			Cell Phone Number		
Email			Email		
Birth Date			Birth Date		
Circle one of the following: Married Separated Unmarried (incl. single, divorced, widowed)			Circle one of the following: Married Separated Unmarried (incl. single, divorced, widowed)		
Dependents and others who will live with you (not listed by Co-Applicant)			Dependents and others who will live with you (not listed by Applicant)		
Full name with middle initial	Birth Date	Male or Female	Full name with middle initial	Birth Date	Male or Female
Present Address (street, city, state, zip code)			Present Address (street, city, state, zip code)		
Circle One: Own Rent	Number of Years:		Circle One: Own Rent	Number of Years:	
If you have been living at the present address for less than two years, please complete the following:					
Previous Address (street, city, state, zip code)			Previous Address (street, city, state, zip code)		
Circle One: Own Rent	Number of Years:		Circle One: Own Rent	Number of Years:	

2. Willingness to Partner

To be considered for a Habitat home you and your family must be willing to complete 250 hours of work per adult (not to exceed 500 hours). Your help in building your home and the homes of others is called "sweat equity", and may include cleaning the lot, painting, helping with construction, working in the Habitat office or ReStore, attending homeownership classes or other approved activities. Half of sweat equity hours can be contributed by friends and family.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS (please initial below):

Applicant		Co-Applicant	
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3. Current Living Situation

If you rent your present residence, what is your monthly-rent payment	\$ /month	<i>Please attach one of the following:</i> - copy of your lease - copy of a money order receipt for rent - cancelled rent check
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Name, address, and phone number of your current landlord

Please check if you have any of the following rooms in your current residence. Include quantity if applicable (ex. Bedrooms 3).

Kitchen		Living Room		Bedroom(s)		Laundry Room	
Bathroom(s)		Dining Room		Other (please describe)			

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

4. Property / Ownership Information

If you own your present residence, what is your monthly mortgage payment?	\$ /month	Unpaid Balance	\$
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Do you own land? <small>(Please circle one)</small>	Yes No	If yes, please describe the land property and location. Use space below.
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If you have a mortgage on the land, what is your monthly mortgage payment?	\$ /month	
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Unpaid Balance	\$	
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5. Employment Information		
	Applicant	Co-Applicant
Name and Address of current employer		
Type of Business		
Business Phone		
Years on this Job		
Gross Pay Rate (before taxes are withheld)	\$ _____ (circle one) per hour week month	\$ _____ (circle one) per hour week month
Hours Worked per Week		
<i>Please attach copies of the last three pay stubs for each applicant.</i>		

6. Monthly Income			
Gross Monthly Income	Applicant	Co-Applicant	
Base Employment Income	\$ _____	\$ _____	
TANF (Temporary Assistance for Needy Families)	\$ _____	\$ _____	
Food Stamps	\$ _____	\$ _____	
Social Security	\$ _____	\$ _____	
SSI (Supplemental Security Income)	\$ _____	\$ _____	
Disability	\$ _____	\$ _____	
Alimony	\$ _____	\$ _____	
Child Support	\$ _____	\$ _____	
Other	\$ _____	\$ _____	
Total:	\$ _____	\$ _____	
List any additional household members over 18 who receive income	Name	Age	Monthly Income
			\$ _____
			\$ _____
Self-employed applicant(s) may be required to provide additional documentation such as tax returns and financial statements.			

7. Combined Monthly Bills *Write "Included" for any items that are included in rent.*

Monthly Bill	Monthly Amount	Monthly Bill	Monthly Amount
Rent or Mortgage Payment	\$	Home Phone Bill	\$
Home or Renters Insurance	\$	Cell Phone Bills	\$
Car Payments	\$	Internet / Cable TV	\$
Car Insurance	\$	Health Insurance	\$
Credit Cards (average)	\$	Student Loans	\$
Electric Bill	\$	Child Care	\$
Gas Bill	\$	School Lunch	\$
Water Bill	\$	Alimony / Child Support	\$

Please attach copies of last month's bills.

Total for both columns: \$

8. Assets *Add any additional items on a separate sheet of paper.*

Checking, Savings, IRA, 401(k), 403(b) Accounts

Name and Address of Bank, Savings & Loan, Credit Union, or other Financial Institution	Account Number	Owner	Balance
			\$
			\$
			\$
			\$
			\$

If you own an automobile (car, truck, SUV, etc.) please provide the year, make, and model below.

Do you own any of the following? Please circle Yes or No.

Vehicle 1	Boat	Yes	No
	Mobile Home	Yes	No
Vehicle 2	Motorcycle	Yes	No
	Washer	Yes	No
Vehicle 3	Dryer	Yes	No

9. Debt

*Include all amounts that Applicant and Co-Applicant owe.
If there are multiple payments (for example, multiple student loans) enter total payments and unpaid balance.*

Loans and Past Due Bills	Monthly Payment	Unpaid Balance	Months Left to Pay
Vehicle 1	\$	\$	
Vehicle 2	\$	\$	
Vehicle 3	\$	\$	
Furniture, Appliances, Televisions	\$	\$	
Medical Bills	\$	\$	
Cell Phone Contracts	\$	\$	
Student Loans	\$	\$	
Credit Cards – Enter Bank / Store Name			
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
Other Required Payments			
Alimony / Child Support	\$	\$	
Union Dues / Job Related Expenses	\$	\$	
Child Care	\$	\$	
Wage Garnishment (Money Taken from Pay)	\$	\$	
Other Loans or Debt – Please Describe			
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
Total:	\$	\$	

10. Media and Publicity

How did you learn about Habitat for Humanity?

Television Radio Newspaper Flyer
 Relative or Friend Church Neighborhood Organization
 Internet Other (describe):

If Habitat for Humanity - Ozaukee selects you for a home, pictures of you and your home may be taken. In addition we may want to generate interest in Habitat for Humanity by letting others know about your home.

11. Information Needed for Approval

If you are approved for the Habitat home, how would you like your name(s) to appear on the legal documents? Please print.	
If you are approved for the Habitat home, where will you get the money to make the down payment (for example: savings or parents)? If you borrow the money, who will you borrow it from, and how will you pay it back?	

12. Declarations

Please check the box that best answers the following questions for you and your co-applicant.	Applicant		Co-Applicant	
	Yes	No	Yes	No
A. Do you have any debt because of a court decisions against you?				
B. Have you been declared bankrupt within the past seven years?				
C. Have you had property foreclosed on in the past seven years?				
D. Are you currently involved in a lawsuit?				
E. Are you paying alimony or child support?				
F. Are you a U.S. Citizen or permanent resident				

If you answered "Yes" to any questions A through E, or "No" to question F, please explain on a separate piece of paper.

13. 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 evaluation will include personal visits, a credit check, and employment verification. 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.

I also understand that Habitat for Humanity screens all potential staff (whether paid or unpaid), board members, and applicant families on the sex offender registry, and that by completing this application, I am submitting myself and all persons listed on the first page of the application to such an inquiry. I further understand that by completing this application, I am submitting myself and all persons on the first page of the application to a criminal background check.

Applicant Signature:	Date:
Co-Applicant Signature:	Date:

Information for Government Monitoring Purposes

Applicants Name

Co-Applicant's Name

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 homes, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to finish 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 loan application for.)

Applicant		Co-Applicant	
<i>Please check this column for all that apply.</i>		<i>Please check this column for all that apply.</i>	
	I do not wish to furnish this information.		I do not wish to furnish this information.
Race / National Origin		Race / National Origin	
	American Indian or Alaskan Native		American Indian or Alaskan Native
	Native Hawaiian or Other Pacific Islander		Native Hawaiian or Other Pacific Islander
	Black/African American		Black/African American
	Caucasian		Caucasian
	Asian		Asian
	American Indian or Alaskan Native AND Caucasian		American Indian or Alaskan Native AND Caucasian
	Asian AND Caucasian		Asian AND Caucasian
	Black/African American AND Caucasian		Black/African American AND Caucasian
	American Indian or Alaskan Native AND Black/African American		American Indian or Alaskan Native AND Black/African American
	Other (specify)		Other (specify)
Ethnicity		Ethnicity	
	Hispanic		Hispanic
	Non-Hispanic		Non-Hispanic
Sex		Sex	
	Female		Female
	Male		Male
Marital Status		Marital Status	
	Married		Married
	Separated		Separated
	Unmarried (incl. single, divorced, widowed)		Unmarried (incl. single, divorced, widowed)

