



Habitat for Humanity of Douglas County, MN
 1211 N. Nokomis NE
 Alexandria, MN 56308
 320-762-4255

Application

Habitat Homeownership Program



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.

Dear Applicant: Please complete this application to determine if you qualify for the Habitat for Humanity homeownership program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act.

1. APPLICANT INFORMATION

Applicant				Co-applicant					
Applicant's name				Co-applicant's name					
Social Security number				Social Security number					
Home phone				Home phone					
Birthdate		Age		Birthdate		Age			
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes: single, divorced, widowed)				<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes: 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 co-applicant)					
Name		Age	Birthdate	M/F	Name		Age	Birthdate	M/F
Present address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent				Present address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent					
Number of years:				Number of years:					
If you have lived at your present address for less than two years, complete the following:									
Last address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent				Last address (street, city, state, ZIP) <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:	Date of selection committee approval:
Date of notice of incomplete application:	Date of board approval:
Date of adverse action letter:	Date of partnership agreement:

6. EMPLOYER INFORMATION

Applicant		Co-applicant	
Name and address of CURRENT employer	Years on job	Name and address of CURRENT employer	Years on 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 LAST employer	Years on job	Name and address of LAST employer	Years on job
	Monthly (gross) wages		Monthly (gross) wages
	\$		\$
Type of business	Business phone	Type of business	Business phone

7. MONTHLY INCOME

Income Source	Applicant	Co-applicant	Others in household	Total
Wages	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

<p>PLEASE NOTE: Self-employed applicants may be required to provide additional documentation such as tax returns and financial statements.</p>	HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE	
	Name	Monthly Income

8. SOURCE OF CLOSING COSTS

Where will you get the money to pay for closing costs (for example, savings or parents)? If you borrow the money, whom will you borrow it from, and how will you pay it back? [Homeowners are encouraged to save approximately \$1,000]

9. ASSETS

Name of bank, savings, credit union, etc.	City, State	Current balance
		\$
		\$
		\$
		\$
		\$
		\$
		\$

10. DEBT

To whom do you and the Co-applicant(s) owe money?

Account	APPLICANT			CO-APPLICANT		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Motor vehicle	\$	\$		\$	\$	
Boat	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Total medical	\$	\$		\$	\$	
Alimony	\$	\$		\$	\$	
Other:	\$	\$		\$	\$	
Other:	\$	\$		\$	\$	
Other:	\$	\$		\$	\$	
TOTAL	\$	\$		\$	\$	

MONTHLY EXPENSES			
	Applicant	Co-applicant	TOTAL
Rent	\$	\$	\$
Utilities	\$	\$	\$
Insurance	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$
Land line	\$	\$	\$
Other:	\$	\$	\$
Other:	\$	\$	\$
Other:	\$	\$	\$
Other:	\$	\$	\$
TOTAL	\$	\$	\$

11. DECLARATIONS

Please check the box beside the word that best answers the following questions for you and the co-applicant.

	Applicant	Co-applicant
a. Do you have any outstanding judgments 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 seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had property foreclosed on or deed in lieu of foreclosure in the past seven 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. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure or judgment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Are you paying alimony or child support or separate maintenance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Are you a co-signer or endorser on any loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. 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

If you answered "yes" to any question a through h, or "no" to question i, please explain below. Use additional paper if needed.

12. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat homeownership program, my ability to repay an affordable loan and other expenses of homeownership, and my willingness to be a partner through sweat equity.

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 and forfeit any rights or claims to a Habitat home. 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 applicants on the sex offender registry. BY completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

I understand that the evaluation will include public assistance verification including TANF/MFIP, Medical, Child Care Allowance, SSI and Child Support, income and assets, residences and rental activity, student status and financial aid and/or grants. Verification may be obtained from any source named in this application.

I also understand that previous or current information regarding my household may be needed. Verifications and inquiries that may be requested include the items above and below, but are not limited to:

- Credit report
- Credit reference
- Landlord reference
- Criminal Background Check
- Sex Offender Registry Check
- Verification of deposits
- OFAC (Office of Foreign Assets Control) Check

You are hereby authorized to disclose to Habitat for Humanity of Douglas County any and all information requested. A photocopy of this authorization shall have the same effect as an original. This information will be kept in a secure place and will not be shared with unauthorized parties.

x

Applicant signature Date

x

Co-applicant signature Date

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. RIGHT TO RECEIVE COPY OF APPRAISAL

This is to notify you that we may order an appraisal in connection with your loan and we may charge you for this appraisal. Upon completion of this appraisal, we will promptly provide a copy to you, even if the loan does not close.

x

Applicant signature Date

x

Co-applicant signature Date

HOW DID YOU FIND OUT ABOUT HABITAT?

Please help us reach more potential applicants by sharing how you learned about Habitat for Humanity. Thank you!

14. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation or surname.

Applicant	Co-applicant
<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)	<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)

To be completed only by the person conducting the interview

This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone	Interviewer's name:
	Interviewer's signature:
	Date:



Application Checklist

Please submit the following documentation with your application for the Applicant and Co-Applicant:

- Completed application and any notes of explanation you wish to include
- Completed authorization and release forms (Sections 12 and 13)
- Nonrefundable Credit Report fee payable to Habitat for Humanity of Douglas County:
 - \$22.00 for a single applicant
 - \$35.00 for applications with two applicants listed
- Original document to be presented to Habitat staff (we will copy):
 - Birth certificate or other proof of legal residence in the United States
 - Driver's license
- Tax returns or W2s from previous two years
- Paystubs from past two months
- Two most recent utility bills for two utilities (ex: electric, phone, water, etc)
- Two most recent rent receipts (if applicable)
- Child care payments for the past two months (if applicable)
- Divorce decree or legal separation agreement (if applicable)
- Student loan deferment papers stating the date until the loan payments are deferred. (if applicable)

Next step:

Please contact your financial institution and request a home mortgage loan for \$135,000. Based on past experience at Habitat, the bank will most likely not be able to approve the mortgage and would issue you a letter of denial. The local Habitat office needs a copy of the denial letter for your file.

Need help or have questions?

Please complete this application to the best of your ability. Use additional paper if needed. If information is missing, you will be contacted to provide the needed information.

Contact our staff at 320-762-4255

