

Application Habitat Homeownership Program



Rutherford County Habitat for Humanity 269 W Main St, Forest City, NC 28043 PO Box 1534, Rutherfordton, NC 28139 828-248-3178 scain@rutherfordhfh.org

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.

APPLICANT INFORMATION							
APPLICA	ANT			CO-APPLICA	ANT		
Applicant name Middle		Last	Co-Applicant name	Middle		La	st
Social Security number Home	phone	DOB	Social Security number	Home p	hone		DOB
□ Married □ Separated □ Unmarr	ied		☐ Married ☐ Separated	□ Unmarried	i		
Email address			Email address				
Dependents and others who will li (not listed by co-applicant)	ve with you	ı	Dependents and others (not listed by co-application)		with you	I	
Name	DOB	Male Female	Name		DOB	Male F	emale
		0 0					
						□	
						□	
☐ If you have additional deper	ndents, ch	eck here and	☐ If you have additio	nal depend	ents, ch	eck here	and
list them on the back of this pa	age with tl	heir DOB and	list them on the back	of this pag	e with tl	neir DOB	and
gender.			gender.				
Present address (street, city, state	, ZIP code)	□ Own □ Rent	Present address (street,	city, state, Z	IP code)	□ Own □	□ Rent
If your mailing address is different	, list that he	ere	If your mailing address i	s different, li	st that he	ere	
Number of years			Number of years				
If you have live	ed at your p	resent address for I	ess than two years, comple	te the follow	ing:		
Previous address (street, city, stat	e, ZIP code)) 🗆 Own 🗆 Rent	Previous address (street	, city, state, 2	ZIP code)	□ Own □	Rent

PRESENT HOUSING CONDITIONS

Number of Bedrooms:	
Other rooms in the place where you are living:	
KitchenBathroomLiving RoomDining Room Other (plea	se describe)
Please describe the condition of the house or apartment where you live and v	why you need a Habitat home?
If you own your residence, what is your monthly mortgage payment? \$	Unpaid Balance\$
Do you own land? If so, what is your monthly payment \$	Unpaid Balance\$
WILLINGNESS TO F	
WILLINGNESS TO F	TARTNER
We, at Habitat, look at your involvement with us as a partnership. We work whomeownership, you and your family must be willing to complete a series of "sweat equity" hours. Your help in building your home and the homes of oth the lot, painting, helping with construction, keeping the construction site clear working in the Habitat ReStore and office.	Homeowner Education Workshops and a number of ers is called "sweat equity" and may include clearing
Do you foresee this being a problem for your family?	
If so, why:	

INCOME

Alimony, child support or separate maintenance income does not need to be revealed if the applicant or co-applicant does not choose to have it considered for repaying this loan.

Please provide the monthly income for **everyone** in the household.

Income Source	Applicant	Co-Applicant	Others in household	Total
Wages:				
Wages:				
Wages:				
TANF				
Alimony				
Child Support				
Social Security				
SSI				
Disability				
Section 8 Housing				
Other:				

EMPLOYMENT INFORMATION

APPLICANT		CO-APPLICANT		
Name and address of Current Employer(s)	Years on the job	Name and address of Current Employer(s)	Years on the job	

If working at current job **less** than one year, list your most recent previous employer below:

APPLICANT		CO-APPLICANT		
Name and address of Previous Employer	Years on the job	Name and address of Previous Employer	Years on the job	

	ASSI	_ 10	,
Name of Bank		Type of Account	Current Balance
Real or Personal Property	Description		Appraised Value
			based on Property
			Tax Bill
Car			
S	OURCE OF D	OWN PAYME	INT
You will be required to pay a \$500 down Where will you get the money to make th	payment on your house no	later than 90 days after	you sign a Partnership Agreement.
You will be required to pay a \$500 down Where will you get the money to make th	payment on your house no	later than 90 days after	you sign a Partnership Agreement.
You will be required to pay a \$500 down Where will you get the money to make th	payment on your house no ne down payment? If you b	later than 90 days after	you sign a Partnership Agreement.
You will be required to pay a \$500 down Where will you get the money to make th you pay it back? Account	payment on your house no	later than 90 days after orrow the money, who	you sign a Partnership Agreement. m will you borrow it from and how wi
You will be required to pay a \$500 down Where will you get the money to make th you pay it back?	payment on your house no	later than 90 days after orrow the money, who	you sign a Partnership Agreement. m will you borrow it from and how wi
You will be required to pay a \$500 down Where will you get the money to make th you pay it back? Account Rent Utilities (Gas, Electricity, Water, Sewage)	payment on your house no	later than 90 days after orrow the money, who	you sign a Partnership Agreement. m will you borrow it from and how wi
You will be required to pay a \$500 down Where will you get the money to make th you pay it back?	payment on your house no	later than 90 days after orrow the money, who	you sign a Partnership Agreement. m will you borrow it from and how wi

Furniture, Appliance, Television (includes

rent to own)

Credit card

DECLARATIONS

	Applicant	Co-Applicant
A) Do you have any outstanding judgments because of a court decision against you?	Yes No	Yes No
B) Have you declared bankruptcy within the past seven years?	Yes No	Yes No
C) Have you had property foreclosed on in the past seven years?	Yes No	Yes No
D) Are you currently involved in a lawsuit?	Yes No	Yes No
E) Are you paying alimony or child support?	Yes No	Yes No
F) Are you a U.S. citizen or permanent resident?	Yes No	Yes No

If you answered yes to any question A through E, or no to question F, please explain.

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 the no-interest 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, criminal background check, sex offender registry check and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered all 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. I also understand that Habitat for Humanity screens all applicant families on the sex offender registry. By completing this application, I am submitting myself to such inquiries.

Applicant Signature/Date	Co-Applicant Signature/Date
•	cations more efficiently, and to improve communications, we would like to be able t nformation and signing this form, you are giving us permission to do so.
Email address	Email address
Cell phone	Cell phone

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 homes, 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 the 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 ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the first box below.

CO-APPLICANT

APPLICANT

☐ I do not wish to furnish this information.	☐ I do not wish to furnish this information.		
Race (may select more than one racial designation):	Race (may select more than one racial designation):		
American Indian or Alaska Native	American Indian or Alaska Native		
☐ Native Hawaiian or other Pacific Islander	☐ Native Hawaiian or other Pacific Islander		
☐ Black/African-American	☐ Black/African-American		
White	☐ White		
Asian	Asian		
Ethnicity:	Ethnicity:		
☐ Hispanic or Latino ☐ Non-Hispanic or Latino	☐ Hispanic or Latino ☐ Non-Hispanic or Latino		
Sex:	Sex:		
Female Male	☐ Female ☐ Male		
Date of Birth: / /	Date of Birth: / /		
Marital Status:	Marital Status:		
Married			
Separated	Separated		
Unmarried (Single, divorced, widowed)	Unmarried (Single, divorced, widowed)		

AML INFORMATION FORM

In compliance with the requirements of the Bank Secrecy Act, the USA PATRIOT Act, and FinCEN's Anti-Money Laundering Program and Suspicious Activity Report Filing Requirements for Residential Mortgage Lenders and Originators, Rutherford County Habitat for Humanity requires all applicants to complete this form.

INSTRUCTIONS: Everyone over the age of 18 years who will reside in the house must complete one of these forms. Please make copies of this form as necessary or you can pick up extra copies at the Habitat office.

List all names you have used in the past five years.
Employment for the past five years (list name of company or person, and the city in which you worked)
List all financial transactions over \$5,000 you have made in the past five years (items you purchased or sold).
Include names of persons or companies involved.
List all significant social or business contacts with foreign nationals (persons from other countries/persons who are not citizens of the US) for the past five years.

EMPLOYMENT VERIFICATION

This form can only be filled out by your current employer. Applicant: Date of Request: Co-Applicant: _____ The above named person(s) have applied for housing through the Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions as an employment reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you for your assistance. Sincerely, **Family Services Committee** Company name: _____ Type of business: _____ Company address: _____ City, state, ZIP: _____ 1. Date of employment: 2. Present position: 3. Current base pay: Amount: \$ _____ Annually _____ Per hour Scheduled hours per week: 4. Earnings: \$ _____ calendar year to date \$ _____ last calendar year 5. Does this person regularly receive overtime or bonuses? _____ Yes _____ No If yes, average number of overtime hours per month: _____ If yes, bonus type and average amount: 6. Additional comments: Phone: Company/Business:

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form may be returned to applicant or transmitted directly to:

LANDLORD REFERENCE

This form can only be filled out by your current landlord and must be included with your application. Applicant: Date of Request: Co-Applicant: _____ The above named person(s) have applied for housing through the Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions as a landlord reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you for your assistance. Sincerely, **Family Services Committee** Applicant's payment history (circle one): Excellent Satisfactory Unsatisfactory Rental period (give dates): From ______ to _____ Amount of monthly rent: \$_____ Would you rent to this person/family again? _____ Any further comments: _____ Phone: _____ Company/Business:

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form may be returned to applicant or transmitted directly to:

CREDIT REFERENCE #1

This form can only be filled out by a current or recent creditor and must be included with your application. Date of Request: Applicant: Co-Applicant: The above named person(s) have applied for housing through the Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions as a credit reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you for your assistance. Sincerely, **Family Services Committee** 1. How long have you done business with this person/family? _____ 2. Are payments made regularly according to your agreement? _____ Yes ___ No 3. If unable to make a payment, did the family make satisfactory arrangements? _____ Yes _____ No 4. Would you consider this family a good credit risk? _____ Yes _____ No 5. Highest balance \$ _____ Present balance \$ _____ Monthly payment \$ _____ Signature: _____ Date: _____ Name: _____ Phone: Company/Business: ______

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form may be returned to applicant or transmitted directly to:

CREDIT REFERENCE #2

This form can only be filled out by a current or recent creditor and must be included with your application. Applicant: Date of Request: Co-Applicant: The above named person(s) have applied for housing through the Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions as a credit reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you for your assistance. Sincerely, **Family Services Committee** 1. How long have you done business with this person/family? _____ 2. Are payments made regularly according to your agreement? Yes No 3. If unable to make a payment, did the family make satisfactory arrangements? _____ Yes _____ No 4. Would you consider this family a good credit risk? Yes No 5. Highest balance \$ _____ Present balance \$ _____ Monthly payment \$ _____ Signature: _____ Date: _____ Phone: _____ Name: _____ Company/Business:

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form may be returned to applicant or transmitted directly to:

VERIFICATION OF PUBLIC ASSISTANCE

This form can <u>only</u> be filled out by the Department of Social Services and must be included with your application.

application.				
Applicant:		Date of Request: _		
Co-Applicant:				
appreciate your help in answ	have applied for housing through the ering the following questions as a la -Leach-Bliley Act. Your prompt retu	ndlord reference. All i	nformation will be ke	ept confidential in
Thank you for your assistance	e.			
Sincerely, Family Services Committee				
Please complete for any bene	efits received by the individuals liste	d above:		
Has the family faithfully repro	esented its income to you since it be	egan receiving benefits	? Yes	No
Benefit Type	Name	Benefit Start Date	Monthly Benefit Amount	Next Review Date
ANF				
SI				
ocial Security				
Child Support				
affect these benefits?	e receives a house from Habitat for H Yes No No lien by the state of North Carolina?			nis asset (the house)
Signature:	Da	te:		
Name:	Ph	one:		
Title:		_		
	ormation you have furnished will be pleted form may be returned to applic	· · · · · · · · · · · · · · · · · · ·		formation is required
Rutherford County Habitat for 269 W Main St, Forest City, N PO Box 1534, Rutherfordton, 828-248-3178 (voice)	IC 28043			

scain@rutherfordhfh.org

PREVIOUS EMPLOYMENT VERIFICATION

This form can only be filled out by your previous employer and must be included with your application. Date of Request: ____ Applicant: Co-Applicant: _____ The above named person(s) have applied for housing through the Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions as a landlord reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you for your assistance. Sincerely, Family Services Committee Company name: _____ Type of business: _____ _____ City, state, ZIP: ______ Company address: **EMPLOYMENT INFORMATION:** End Date: Start Date: _____ Start Position: _____ End Position: Ending Pay Rate: Starting Pay Rate: Total gross earning last calendar year of employment: Reason for leaving: Voluntary termination or involuntary termination: Eligible for rehire: _____ Yes _____ No Additional comments: Signature: Phone: Name: _____ Company/Business:

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form may be returned to applicant or transmitted directly to:

PREVIOUS LANDLORD REFERENCE

This form can only filled out by your previous landlord and must be included with your application. Applicant: Date of Request: Co-Applicant: _____ The above named person(s) have applied for housing through the Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions as a landlord reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you for your assistance. Sincerely, **Family Services Committee** Applicant's payment history (circle one): Excellent Satisfactory Unsatisfactory Rental period (give dates): From ______ to _____ Amount of monthly rent: \$_____ Would you rent to this person/family again? _____ Any further comments: Phone: ______ Company/Business:

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form may be returned to applicant or transmitted directly to:

ADDITIONAL INFORMATION

- You must provide 3 credit references. One can be your landlord reference and the others must be your credit references. If you do not have a landlord, 3 credit references will be required.
 Examples of credit references include a bank or finance company that you have a loan with, utility company, mobile phone/internet/cable company, insurance company, etc.
- Two **Credit Reference** forms have been provided. If you need additional forms, you can pick them up at the Habitat office.
- A Landlord Reference form is included for you to have completed. If you have been living at your
 current residence for less than one year, you must have the Previous Landlord Reference form
 completed also.
- If you are employed, have the **Employer Verification** form completed. If you have been employed by the same company for less than one year, have the **Previous Employer Verification** form completed.
- If you are receiving SSI, Social Security, Child Support or any other form of assistance, have the **Verification of Public Assistance** form completed.
- Enclose your most recent tax return along with copies of the W-2's or 1099's that accompanied the tax return.
- You will need to provide your pay stubs for the last two months.
- You will need to provide a copy of the social security cards for everyone who will be living in the house.
- You will need to provide a copy of the driver's license for the applicant and co-applicant.
- If you are divorced, you will need to provide a Divorce Decree.
- If you are separated, you will need to provide the Binding Separation Agreement duly recorded in the local registry providing for release or waiver of the spouse's marital interest in any property acquired after the recording of the separation agreement.
- If you are a separated or divorced single parent of children, you will need to provide the legal and binding custody papers.
- If you are self-employed, you will need to provide copies of your Federal Tax Returns for the last two years and a current financial statement.

All reference and verification forms MUST be completed by the appropriate authority. You CANNOT complete these forms yourself. Falsifying this information will result in your application being denied.

Note: Please bring original documentation only. We will make copies for you when you turn in your application.