

PO Box 764 Wilmington, Ohio 45177

Phone 937-655-9484/clintonhabitat.org

Partner family selection committee: Elizabeth Biggane ebiggane@yahoo.com or 937.725.8071

Dear Applicant:

Habitat for Humanity is a nonprofit, ecumenical Christian Housing ministry that seeks to eliminate substandard housing from the face of the earth by partnering with low-income families to build adequate, affordable housing that is sold to the family without profit. Familes are selected based on the following:

Need for adequate shelter

Substandard housing environment
Overcrowding
Temporary housing or homeless
Cost of housing (more than 50% of gross income on rent and utilities)

Ability to pay

Must fall within the income guidelines listed on attached sheet

Debt to income ratio does not exceed 39% of the family's monthly income

The family has demonstrated the ability to make regular monthly payments for rent, utilities and other credit obligations. The family has not declared bankruptcy in the last 18 months and has no liens or judgements that cannot be cleared prior to closing.

The family can make a deposit payment of \$500.00 before the closing on the home

The family can make the first years' home insurance payment before the closing on the home

Certifying the ability to pay

The following methods may be used to certify the ability to pay: Information provided on the homeowner application Employment paycheck stubs
Public assistance income documents
Bank references
Credit reports and credit references
IRS tax forms
Employment references
Records of liens and judgements
Background checks
Landlord references

Willingness to become a Habitat partner

Eager and willing to fulfill all application requirements Understands what Habitat is and is not Accepts Habitat's basic house design Performs 300/500 sweat equity hours Attends budget and homeownership classes Debt must not increase during partnership Commit to make monthly payment without default.

One (1) month overdue, a letter of notification is sent

Three (3) months overdue, a letter of foreclosure will be sent

The following methods will be used to certify willingness to partner:

- Information given on the application
- Acceptance of the down payment and closing cost requirements
- Acceptance of the affiliate's seat equity requirements
- Information gathered in the interview and home visit

If you have an interest in Habitat and believe you qualify, we encourage you to fill out the application as accurately and completely as you can. By completing this application, attaching photo copies of all personal information required as part of the application, and signing the information disclosure authorization form you are submitting to all inquiries. We hope that you understand that we need all of this information from you to best determine your eligibility for the Habitat program. All information is considered confidential and is to be used only for family selection.

Clinton County Habitat for Humanity screens all potential staff (whether paid or unpaid) board members and applicant families on the sexual offender registry. By completing this application, signing and returning this original letter you are submitting to such inquiry.

The preliminary review of all applications will take approximately 2 weeks. You will be notified whether or not you qualify for further processing. You may receive a letter application. The committee will contact employers, banks, land lords, loan companies etc. to further verify your qualification as an applicant. If you qualify, you will be scheduled for an interview with our committee. If you still qualify, a home visit with members of our committee will be scheduled. This whole process may take from two (2) to six (6) months.

Co-Applicant		
Applicant		
I/We have read and understand all details of this letter this	day of	20
Family selection committee Habitat for Humanity of Clinton County		
Sincerely,		

Dear Applicant:

The enclosed application must be entirely completed before being considered for a Habitat for Humanity house. Every section MUST show in some way that you have read and completed. You may need to write 'None" or some other indication that it does not apply to you when that is the situation. For example: if you are a single person, beside Co-Application name write the word 'none'.

You will need to include copies of the following information Please write your initials in the blank space provided following each item indicating you have enclosed the necessary documents. If the item does not apply to you write "N/A" in the blank. Any item not included may cause you to be disqualified as a partner-family.

RESPONSE	
 Credit report and credit score (see below)* Receipt of payment of last month's rent Copy of last month's electric bill Copy of las month's telephone (land or cell) bill(s) Copy of last month's gas bill Copy of last month's fuel oil bill Copy of last month's cable (or DirectTV, Dish, etc) bill Copy of all credit card payments Copy of any and all installments (car, appliance, etc) payments Copy of insurance payments with the last six months Proof of income (current payroll stub or copy of latest income tax return Proof of retirement, social security, disability income, other Signed letter enclosed with the application Signed information disclosure authorization (Be sure to check all items) 	
Please include this form and the above documents with your application and return all in the addressed envelope two weeks either in person or by mail to the Habitat for Humanity office	within
Sincerely,	
Family Selection Committee Habitat for Humanity of Clinton County	
Your signature and date	

*CREDIT SCORE INFORMATION--

You may get your credit report free at **www.freeannualcreditreport.com.** You will have a choice of three reports EQUIFAX, EXPERIAN and TRSNUNION. All three contain the necessary information we need. **If you need to enter your credit card number in order to receive this information along with your credit score, be very sure to cancel the contract within 10** days so you will not be charged the fee.

PRESENT HOUSING SITUATION

Please circle the appropriate words or give numbers

What rooms do yo	ou have in your prese	nt home? Circle t	the ones you h	nave			
Kitchen Dining Ro	oom Living Room	Family Room	Basement	Other			
Number of bedroo	oms			Num	ber of bathroo	ms	
Do you have centr	al heat? YES	NO	Cent	ral air	YES NO		
Do you heat with:	electricity	gas	heating oil		wood stove	e of	her
Do you have runn	ing water YES NO						
Do you have indoo	or plumping? YES	NO					
How long have yo	u lived in your preser	nt home?					
Do you rent ov	wn What is your	monthly paymer	nt \$		_		
What is your avera	age monthly utility bi	II \$					
What is your mon	thly bill for heat?_If r	not included in yo	our utility bill	\$			
If renting, give the	name and address o	f your landlord:					
If you own your ho	ome, give the name a	nd address of yo	ur lender or b	ank that	holds your mo	ortgage:	
FINANCIAL INFOR	MATION						
For each working	member of your hous	sehold:					
NAME OF Worker	Employer	Addre	SS			Length of Employment	Monthly Gross Wages
Do you have medi	cal coverage? YES N	0					
	ployers and their add		ave had durin	g the na	st five vears:		
List any other emp	noyers and their add	- Cooco that you h	ave naa aann	8 the pu			

List any other income (include food stamps, AFDC, SSI, disability, alimony, child support, saving accounts)

Source of income	Amount per month

MISCELLANEOUS

Which of the following could you or member of your family do to help in the building of your home and accumulating your

500/300 sweat equity hours? Place an X next to any that you feel comfortable making a commitment:

Help in construction	Plumbing	Electrical work
Babysit for volunteers	Painting	Landscaping
Fix food for volunteers	Planting grass	Office work, phone calls
Help with golf outing, fund raising events	Other:	

How did you hear about Habitat for Humanity?	
--	--

AUTHORIZATION AND RELEASE

I/We understand that by filing this application, I/we are authorizing Habitat for Humanity of Clinton County to evaluate my/our actual need for a Habitat home, my/our ability to repay the no-interest loan and other expenses of homeownership and my/our willingness to be a partner family. I/we understand that the evaluation will include person interviews and home visits, a credit check and employment verification. I/we have answered all the questions on this application truthfully. I/we understand that if I/we have already been selected to receive a Habitat home, I/we may be disqualified from the program. The original or copy of this application will be retained by Habitat for Humanity of Clinton County for a period of two (2) years even if the application is not approved.

Applicant's signature	Date	Co-applicant's 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 to this application. Please mark your additional comments with "A" for Applicant or "C" for Co-applicant.



APPLICATION FOR HABITAT HOUSING

A	_							
Applicant name						Α		Diate data
Social Security						Age: Birth		Birthdate:
Address (street								
City, State Zip	Loae							
Email			6.11			144	1 . 1	
Home phone:		84	Cell	phone:	11		k phone:	at a condition of
Marital status:	!! !	Married		Separated	Unmarried	a, inciu	laing single,	divorced, widowed
Relationship to		NIED AL INIE	2014	ATION				
Dependents ar		NERAL INFo		n your home over	50% of the t	ime		
Name	Relationsh	ip Age		Male	Female		Social Secu	ırity number
Do you expect	any change	in any of th	e aho	ove cituation?				
Do you expect	arry criarige	in any or th	e abt	ove situation:				
								10.15
Do any of the p	people living	with you n	eed a	a wheelchair ramp	or have any	othei	r special need	d? If so, what is the need?
List informatio	n about che	cking accou	nts a	nd savings accour	nts			
Bank	Add	dress			Account no	umber	-	Balance

List other	assets	such	as	cars,	appliances,	and	their
value							

Asset	Value

To whom does your family owe money (Include credit cards, medical bills, loan companies etc)? Mark with an 'A' for applicant or 'C' for co-applicant

Company/Individual and Address	What for?	Payment	Balance due

List your monthly bills and amounts		
Gas:	Electric:	Phone:
		1.1.01.01
Cell phone:	Cable:	Water/Sewer
Rent:	Car payment:	Insurance:
Child care:	Alimony:	Child support:
Average credit card payment(s)	Other:	

DECLARATIONS

Please check the box that best answers the following questions for you and the co-applicant. Answering YES to these questions does not automatically disqualify you. If you answered YES to any question a-e, however, please explain on a separate sheet of paper.

QUESTION	Applicant		Co Applicant	
Do you have any debt because of a court decision against you?	YES	NO	YES	NO
Have you had property foreclosed on in the past 7 years?	YES	NO	YES	NO
Have you declared bankrupt in the past 7 years?	YES	NO	YES	NO
Are you currently involved in a lawsuit?	YES	NO	YES	NO
Are you paying alimony or child support?	YES	NO	YES	NO
Are you a U.S. citizen or permanent resident?	YES	NO	YES	NO



INFORMATION DISCLOSURE AUTHORIZATION

To whom it may concern:

I/we hereby authorize you to release for verification purpose, information concerning:

- Employment history, dates, title, income, hours worked, etc.
- Checking and savings accounts of record

Your prompt reply will help this real estate transaction.

- Loan rating (opening date, high credit, payment account loan balance and payment record).
- Rental history
- Any information deemed necessary in connection with a consumer report for a real estate transaction
- This information is for the confidential use of Habitat for Humanity in compiling a mortgage loan credit report.

A PHOTOGRAPHIC OR CARBON COPY OF THIS AUTHORIZATION (BEING PHOTOGRAPHIC OR CARBON COPY OF THE SIGNATURE(S) OF THE UNDERSIGNED) MAY BE DEEMED TO BE THE EQUIVALENT OF THE ORIGINAL AND MAY BE USED A DUPLICATE ORIGINAL.

SIGNATURE	Social Security Number
SIGNATURE	Social Security Number
SIGNATURE	Social Security Number

PLEASE READ THIS STATEMENT Before COMPLETING THE BOX BELOW: The following information is requested by the federal government for and 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 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 not discriminate by race and sex on the basis of visual observations 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
☐ 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	☐ Native Hawaiian or other Pacific Islander
☐ Black/African American	☐ Black/African American
☐ Caucasian	☐ Caucasian
☐ Asian	☐ Asian
☐ American Indian or Alaskan Native and	☐ American Indian or Alaskan Native and
CAUCASIAN	CAUCASIAN
☐ Asian AND Caucasian	☐ Asian AND Caucasian
☐ Black/African American AND Caucasian	☐ Black/African American AND Caucasian
 American Indian or Alaskan Native AND 	☐ American Indian or Alaskan Native AND
Black/African American	Black/African American
☐ Other (specify)	☐ Other (specify)
Ethnicity	
☐ Hispanic Non-HIspanic	☐ Hispanic Non-Hispanic
Birthdate/	Birthdate/
Sex:	Sex:
Female Male	Female Male
☐ Marital Status:	☐ Marital Status:
☐ Married	☐ Married
□ Separated	☐ Separated
☐ Unmarried (incl. single, divorced, widowed)	☐ Unmarried (incl. single, divorced, widowed)
To Be Completed Only By the Person Conducting the Inte	rview
, , , , , , , , , , , , , , , , , , ,	
	1
This application was taken by:	
☐ Face to Face Interview	INTERVIEWER'S NAME (Print or Type)
	INTERVIEWER'S SIGNATURE
□ By Mail	INTERVIEWER'S SIGNATURE DATE
□ By Tolonhono	INTERVIEWER'S PHONE NUMBER
□ By Telephone	IIN I EK NIEWEK 2 HUONE INOINIREK