



PO Box 764
Wilmington, Ohio 45177
Phone 937-655-9484
info@clintonhabitat.org

Partner family selection committee: Mitzi Dennis 513-601-4664

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. Families 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.

Sincerely,

Family selection committee
Habitat for Humanity of Clinton County

I/We have read and understand all details of this letter this _____ day of _____ 20_____

Applicant_____

Co-Applicant_____

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

- 1. Credit report and credit score (see below)* _____
- 2. Receipt of payment of last month's rent _____
- 3. Copy of last month's electric bill _____
- 4. Copy of las month's telephone (land or cell) bill(s) _____
- 5. Copy of last month's gas bill _____
- 6. Copy of last month's fuel oil bill _____
- 7. Copy of last month's cable (or DirectTV, Dish, etc) bill _____
- 8. Copy of all credit card payments _____
- 9. Copy of any and all installments (car, appliance, etc) payments _____
- 10. Copy of insurance payments with the last six months _____
- 11. Proof of income (current payroll stub or copy of latest income tax return) _____
- 12. Proof of retirement, social security, disability income, other _____
- 13. Signed letter enclosed with the application _____
- 14. 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 within two weeks either in person or by mail to the Habitat for Humanity office

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 you have in your present home? Circle the ones you have----

Kitchen Dining Room Living Room Family Room Basement Other

Number of bedrooms_____

Number of bathrooms_____

Do you have central heat? YES NO

Central air YES NO

Do you heat with: electricity gas heating oil wood stove other

Do you have running water YES NO

Do you have indoor plumbing? YES NO

How long have you lived in your present home?_____

Do you rent own What is your monthly payment \$_____

What is your average monthly utility bill \$_____

What is your monthly bill for heat?_If not included in your utility bill \$_____

If renting, give the name and address of your landlord:

If you own your home, give the name and address of your lender or bank that holds your mortgage:

FINANCIAL INFORMATION

For each working member of your household:

NAME OF Worker	Employer	Address	Length of Employment	Monthly Gross Wages

Do you have medical coverage? YES NO

List any other employers and their addresses that you have had during the past five years:



APPLICATION FOR HABITAT HOUSING

Applicant name			
Social Security Number		Age:	Birthdate:
Address (street and PO)			
City, State Zip Code			
Email			
Home phone:		Cell phone:	Work phone:
Marital status:	Married	Separated	Unmarried, including single, divorced, widowed
Relationship to applicant			

GENERAL INFORMATION

Dependents and others that will be living in your home over 50% of the time

Name	Relationship	Age	Male	Female	Social Security number

Do you expect any change in any of the above situation?

Do any of the people living with you need a wheelchair ramp or have any other special need? If so, what is the need?

List information about checking accounts and savings accounts			
Bank	Address	Account number	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:
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	
	YES	NO	YES	NO
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
- 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.

Your prompt reply will help this real estate transaction.

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
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
<input type="checkbox"/> Race/National Origin:	<input type="checkbox"/> Race/National Origin:
<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Native Hawaiian or other Pacific Islander
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Black/African American
<input type="checkbox"/> Caucasian	<input type="checkbox"/> Caucasian
<input type="checkbox"/> Asian	<input type="checkbox"/> Asian
<input type="checkbox"/> American Indian or Alaskan Native and CAUCASIAN	<input type="checkbox"/> American Indian or Alaskan Native and CAUCASIAN
<input type="checkbox"/> Asian AND Caucasian	<input type="checkbox"/> Asian AND Caucasian
<input type="checkbox"/> Black/African American AND Caucasian	<input type="checkbox"/> Black/African American AND Caucasian
<input type="checkbox"/> American Indian or Alaskan Native AND Black/African American	<input type="checkbox"/> American Indian or Alaskan Native AND Black/African American
<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Other (specify)
Ethnicity	
<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
Birthdate ____/____/____	Birthdate ____/____/____
Sex:	Sex:
Female Male	Female Male
<input type="checkbox"/> Marital Status:	<input type="checkbox"/> Marital Status:
<input type="checkbox"/> Married	<input type="checkbox"/> Married
<input type="checkbox"/> Separated	<input type="checkbox"/> Separated
<input type="checkbox"/> Unmarried (incl. single, divorced, widowed)	<input type="checkbox"/> Unmarried (incl. 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	INTERVIEWER'S NAME (Print or Type)
<input type="checkbox"/> By Mail	INTERVIEWER'S SIGNATURE DATE
<input type="checkbox"/> By Telephone	INTERVIEWER'S PHONE NUMBER

