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| Color Verticle Logo.JPGfair Housing logo.jpg816-461-6551 [www.trumanhabitat.org](http://www.trumanhabitat.org)Weatherization andHome Repairs |  | We are pledged to the letter and spirit of US 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:** Completing this application will assist in determining if you qualify for a home loan through the Neighborhood Revitalization Initiative. It is important that all blanks be completed with accurate information. You will also be asked for documentation to verify information contained in this document. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act.

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| **Interviewer Please Check when Verified** | **Applicant Information** |
|  | **Applicant’s Legal First, Middle and Last Name:** |
|  | **List any other names by which you are or have been known, or any other names under which credit was previously received (First, Middle, Last, Suffix):** |
|  | **Applicant’s Social Security Number:** | **Applicant’s Date of Birth:** | **Citizenship:****□ U.S. Citizen****□ Permanent Resident Alien****□ Non-Permanent Resident Alien** |
|  | **Applicant’s Marital Status:****□ Married****□ Separated****□ Unmarried (includes single, divorced, widowed)** | **Are you a veteran?****□ Yes □ No** |
|  | **Telephone number(s) where you can be reached:** | **Driver’s License Number:****E-Mail Address:** |
|  | **Home Address: (street, city, state, zip code)**  |
|  | **Name, Address, and Phone Number of Current Employer:****Job Title or Description:** | **How long have you worked with this employer?** |
| **Hourly Wage/ Hours per Week:****Average Monthly Income:** |
|  | **If you have worked less than two years with your current employer, please provide the following information about your previous employer.** |
|  | **Name, Address and Phone Number of Previous Employer:****Job Title or Description:** | **How long did you work with this employer?** |
| **Monthly Gross Wages:** |

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| **Interviewer Please Check when Verified** | **Co-Applicant Information** |
|  | **Co-Applicant’s Legal Name (First, Middle, Last, Suffix):** |
|  | **List any other names by which you are or have been known, or any other names under which credit was previously received (First, Middle, Last, Suffix):** |
|  | **Co-Applicant’s Social Security Number:** | **Co-Applicant’s Date of Birth:** | **Citizenship:****□ U.S. Citizen****□ Permanent Resident Alien****□ Non-Permanent Resident Alien** |
|  | **Co-Applicant’s Marital Status:****□ Married****□ Separated****□ Unmarried (includes single, divorced, widowed)** | **Are you a veteran?****□ Yes □ No** |
|  | **Telephone number(s) where you can be reached:** | **Driver’s License Number:****E-Mail Address:** |
|  | **Home Address: (street, city, state, zip code)**  |
|  | **Name, Address, and Phone Number of Current Employer:****Job Title or Description:** | **How long have you worked with this employer?** |
| **Hourly Wage/ Hours per Week:****Average Monthly Income:** |
|  | **If you have worked less than two years with your current employer, please provide the following information about your previous employer.** |
|  | **Name, Address and Phone Number of Previous Employer:****Job Title or Description:** | **How long did you work with this employer?** |
| **Monthly Gross Wages:** |
|  | **Dependents and/or others living in the home with you (Not including Co-Applicant)** |
|  | First, Middle and Last Name | Relationship | Date of Birth |
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|  | **Willingness to Partner** |
|  | To be considered for a Habitat program, you and your family must be willing to complete sweat equity. Sweat equity provides an opportunity for families to increase their personal investment in their home. Examples of activities include working at the construction site, ReStore, Habitat office, providing lunch for the volunteers and building crews, participating in home-owner educational classes and volunteering to assist in other activities that support Habitat for Humanity’s mission. The sweat equity requirement is a minimum of 10 hours for a home repair project, depending on the project cost. All hours must be completed prior to the scheduling of the service. |
|  | **I am willing to complete the required sweat equity hours****Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Applicant: □ Yes □ No****Co-Applicant: □ Yes □ No** |
| **Repair Work Requested To Be Done** |
| **Please refer to the following lists of repair work needed. If multiple items are needed, please rank, with “1” being the most important.**  |
| **Critical**  | **Non-Critical** |
| \_\_\_\_\_ Roof Replacement | \_\_\_\_\_ Exterior Painting |
| \_\_\_\_\_ Plumbing | \_\_\_\_\_ Exterior Repairs |
| \_\_\_\_\_ Code Violation | \_\_\_\_\_ Weatherization |
| \_\_\_\_\_ Dangerous Tree Removal | \_\_\_\_\_ Aesthetic Improvements |
| \_\_\_\_\_ Health/Safety Concern (List Below)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_ Roof Repair\_\_\_\_\_ OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Interviewer Please Check when Verified** | **Combined Household Income** |
|  | **Source of Income** | **Applicant** | **Co-Applicant** | **Person(s) Age 18 or older who are living in the home** |
|  | Gross Monthly Wage(s) | $ | $ | $ |
|  | Gross Monthly Wage(s) | $ | $ | $ |
|  | Social Security | $ | $ | $ |
|  | Disability | $ | $ | $ |
|  | Child Support | $ | $ | $ |
|  | Other | $ | $ | $ |
|  | Other | $ | $ | $ |
|  | **Income Totals** | $ | $ | $ |

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| **Interviewer Please Check when Verified** | **Combined Household Assets** |
|  | **Name of Bank, Savings & Loan, or Credit Union:** | **Balance: $** |
|  | **Name of Bank, Savings & Loan, or Credit Union:** | **Balance: $** |
|  | **Additional Assets:** | **Balance: $** |
| **Interviewer Please Check when Verified** | **Combined Household Debt** |
|  | **Mortgage:** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Vehicle:** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Credit Card(s):** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Student Loans:** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Alimony/Child Support:** | **Monthly Payment** |  |  |
|  | **Other:** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Other:** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Other:** | **Monthly Payment** | **Balance** | **Payoff Date** |
|  | **Totals:** | **$** | **$** |  |

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| **For Office Use Only** |
| Date Received: | □ Application Accepted | □ Application Declined |
| If more information is needed, please list specific documents needed: | Date Letter Sent:Date of Home Visit: |
| Date Application Completed: | Date Letter Sent: |

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| **Interviewer Please Check to Verify Each Box is Checked** | **Declarations****Please respond to the following statements.** |
|  |  | **Applicant** | **Co-Applicant** |
|  | a. Do you have any debt because of a court decision against you? | □ Yes | □ No | □ Yes | □ No |
|  | b. Have you been declared bankrupt within the past 12 months? | □ Yes | □ No | □ Yes | □ No |
|  | c. Have you had property foreclosed in the past 12 months? | □ 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 |
| **Authorization and Release** |
| I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for repair work to my home, my ability to repay the no-interest loan (if applicable), other expenses of homeownership and my willingness to partner. I understand that the evaluation will include a personal visit(s), a credit check (if applicable) and income 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 for the NRI program, I may be disqualified from the program. The original 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 application to such an inquiry.  |
| Applicant Signature Date  | Co-Applicant Signature Date |
| X | X |

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| **Information for Government Monitoring Purposes** |

**Please Read This Statement Before Completing the Box Below:** The following information is requested by the federal government, 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 this information, 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 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.)

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| **Applicant** | **Co-Applicant** |
| □ I do not wish to furnish this information. | □ I do not wish to furnish this information. |
| **Race/National Origin (Check one or more):** | **Race/National Origin (Check one or more:** |
| □ 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 |
| □ White/Caucasian | □ White/Caucasian |
| □ Asian | □ Asian |
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| **Ethnicity:** | **Ethnicity:** |
| □ Hispanic or Latino | □ Not Hispanic or Latino | □ Hispanic or Latino | □ Not Hispanic or Latino |
|  |  |  |  |
| **Sex:** |  | **Sex:** |  |
| □ Female | □ Male | □ Female | □ Male |

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| **To Be Completed by the Person Conducting the Interview** |
| This application was taken by:□ Face-to-Face Interview□ Mail□ Telephone | Interviewer’s Name (print or type) |
| Interviewer’s Signature Date |
| Interviewer’s Telephone Number: Truman Heritage Habitat for Humanity 816.461.6551 |

**\*\*\*This application will not be reviewed and processed until ALL required documents are received.**