



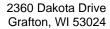
Application

Dear Applicant: We need you to complete this application to determine if you qualify to purchase a Habitat for Humanity home. Please fill out the application as completely as possible. All information you include on this application will be kept confidential. **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.



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.

1. Applicant Informa	tion							
Applicant			Co-Applicant					
Full name with middle initial:			Full name wi	ith midd	lle initial:			
Social Security Number			Social Securi	ty Numl	ber			
Home Phone Number			Home Phone	Numbe	er			
Cell Phone Number			Cell Phone N	lumber				
Email			Email					
Birth Date			Birth Date					
Circle one of the following:			Circle one of	the foll	owing:			
Married Separated Ur	nmarried (incl. single, div	vorced, widowed)	idowed) Married Separated Unmarried (incl. single, divorced, widowed)			ridowed)		
Dependents and others who v (not listed by Co-Applicant)	vill live with you		Dependents (not listed by			ill live witl	n you	
Full name with middle init	ial Birth Date		Full name with middle initial			Male or Female		
Present Address (street, city, state,	zip code)		Present Add	ress (str	eet, city, state, z	ip code)		
Circle One: Own Rent	Number of Yea	rs:	Circle One: Own Rent Number of Years:					
If you have been living at the present address for less than two years, please complete the following:								
Previous Address (street, city, state	e, zip code)		Previous Add	dress (st	treet, city, state,	zip code)		
Circle One: Own Rent	Number of Year	rs:	Circle One:	Own	Rent	Number	of Years:	





2. Willingness to Partner

To be considered for a Habitat home you and your family must be willing to complete 250 hours of work per adult (not to exceed 500 hours). Your help in building your home and the homes of others is called "sweat equity", and may include cleaning the lot, painting, helping with construction, working in the Habitat office or ReStore, attending homeownership classes or other approved activities. Half of sweat equity hours can be contributed by friends and family.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS (please initial below):								
Applicant					Co-Applicant			
3. Cur	rent Living Situa	ation						
If you rent your present residence, what is your monthly-rent payment			\$	/month	- copy of your led	Please attach one of the following: copy of your lease copy of a money order receipt for rent cancelled rent check		
Name, address	, and phone numb	ber of	your curi	ent landlord				
Please check if	you have any of t	he fol	lowing ro	oms in your cu	rrent residence. I	nclude quantity if	f applicable (ex.	Bedrooms 3).
Kitchen			Room		Bedroom(s)	· · · · · · · · · · · · · · · · · · ·	Laundry Room	
Bathroom(s)		Dining	Room		Other (please describe)	'		
In the space below describe the condition of the house or apartment where you currently live. Why do you need a Habitat home?								
4. Pro	perty / Owners	hip In	formati	on				
	r present residend onthly mortgage	ce,	\$	/month	Unpaid Balan	nce	\$	
Do you own la	nd? (Please circle one)		Yes	No	If yes, please describe the land property and location. Use space below.			ocation. Use
•	nortgage on the la onthly mortgage	nd,	\$	/month				
Unpaid Balance	e		\$					



5. Employmen	5. Employment Information									
		Ap	plicant	1			Co-	Applica	nt	
Name and Address of current employer										
Type of Business Business Phone										
Years on this Job										
Gross Pay Rate (before taxes are withheld)	\$	per	hour	<i>(circle on</i> week	<i>e)</i> month	\$	per	hour	circle or week	ne) month
Hours Worked per Week										
Please attach copies of	the last thr	ee pay stubs	for eac	ch applic	ant.					

6. Monthly Income		
Gross Monthly Income	Applicant	Co-Applicant
Base Employment Income	\$	\$
TANF (Temporary Assistance for Needy Families)	\$	\$
Food Stamps	\$	\$
Social Security	\$	\$
SSI (Supplemental Security Income)	\$	\$
Disability	\$	\$
Alimony	\$	\$
Child Support	\$	\$
Other	\$	\$
Total:	\$	\$

	Name	Age	Monthly Income
List any additional household members over 18 who receive income			\$
			\$
			\$

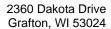
Self-employed applicant(s) may be required to provide additional documentation such as tax returns and financial statements.



7. Combined Monthly I	Bills	Write "I	Included" for	any items that are inc	luded in r	ent.
Monthly Bill Monthly Amount		/ Amount	N	Nonthly Bill	Month	ly Amount
Rent or Mortgage Payment	\$	\$		ne Bill	\$	
Home or Renters Insurance	\$		Cell Phone	Bills	\$	
Car Payments	\$		Internet / 0	Cable TV	\$	
Car Insurance	\$		Health Insu	irance	\$	
Credit Cards (average)	\$		Student Lo	ans	\$	
Electric Bill	\$		Child Care		\$	
Gas Bill	\$		School Lun	ch	\$	
Water Bill	\$		Alimony / 0	Child Support	\$	
Please attach copies of	last month's bil	lls.	Tot	tal for both columns:	\$	
8. Assets		Add a	ny additiona	l items on a separate :	sheet of p	aper.
		Savings, IRA,	401(k), 403(b) Accounts		
Name and Address of Bank, Saving Credit Union, or other Financial In		Accour	nt Number	Owner	Balance	
redit Officia, of Other Financial III	Stitution					
					\$	
					\$	
					٦	
					\$	
					\$	
					, T	
					1.	
					\$	
f you own an automobile (car, ti	uck, SUV. etc.)	please				
provide the year, make, and mod			Do you owi	n any of the following?	Please circ	cle Yes or No
/ehicle 1			Boat		Yes	No
			Mobile Hon	ne	Yes	No
/ehicle 2			Motorcycle		Yes	No
			Washer		Yes	No
/ehicle 3			ll .			



9. Debt	9. Debt					
	s that Applicant and Co-	• •				
If there are multiple payments (for example, in Loans and Past Due Bills	Monthly Payment	Unpaid Balance	Months Left to Pay			
Vehicle 1	\$	\$	Widitiis Left to Pay			
Vehicle 2	\$	\$				
Vehicle 3	\$	\$				
Furniture, Appliances, Televisions	\$	\$				
Medical Bills	\$	\$				
Cell Phone Contracts	\$					
	\$	\$				
Student Loans Cradit Cords Fator Book / Store Name	Ş	۶				
Credit Cards – Enter Bank / Store Name	A		I			
	\$	\$				
	\$	\$				
	\$					
	\$	\$				
	\$	\$				
	\$	\$				
Other Required Payments						
Alimony / Child Support	\$	\$				
Union Dues / Job Related Expenses	\$	\$				
Child Care	\$	\$				
Wage Garnishment (Money Taken from Pay)	\$	\$				
Other Loans or Debt – Please Describe						
	\$	\$				
	\$	\$				
	\$	\$				
	\$	\$				
	\$	\$				
Total:	\$	\$				
10. Media and Publicity						
	☐ Television	☐ Radio ☐ News	paper \square Flyer			
How did you learn about Habitat for Humanity?	☐ Relative or Friend	·	nborhood Organization			
•	☐ Internet	☐ Other (describe):				
If Habitat for Humanity - Ozaukee selects you for a home, pictures of you and your home may be taken. In addition we may want to generate interest in Habitat for Humanity by letting others know about your home.						





11. Information Needed for Approval					
If you are approved for the Habitat home, how would you like your name(s) to appear on the legal documents? Please print.					
If you are approved for the Habitat home, where will you get the money to make the down payment (for example: savings or parents)? If you borrow the money, who will you borrow it from, and how will you pay it back?					
12. Declarations					
Please check the box that best answers the following questions for you and your co-applicant.	Appl	icant	Co-Ap	plicant	
· · · · · · · · · · · · · · · · · · ·	Yes	No	Yes	No	
A. Do you have any debt because of a court decisions against you?					
B. Have you been declared bankrupt within the past seven years?					
C. Have you had property foreclosed on in the past seven years?					
D. Are you currently involved in a lawsuit?					
E. Are you paying alimony or child support?					
F. Are you a U.S. Citizen or permanent resident					
If you answered "Yes" to any questions A through E , or "No" to question I	F, please exp	lain on a sep	arate piece c	of paper.	
13. Authorization and Release					
I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to be a partner family. 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. 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 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 first page of the application to such an inquiry. I further understand that by completing this application, I am submitting					
myself and all persons on the first page of the application to a criminal background check.					
Applicant Signature:	Date:				
Co-Applicant Signature:	Date:				



Information for Government Monitoring Purposes				
Applicants Name	Co-Applicant's Name			

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 finish 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 note race and sex on the basis of visual observation 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 loan application for.)

	Applicant	Co-Applicant		
Please check this column for all that apply.	, pp. cent	Please check this column for all that apply.	об тррпошто	
	I do not wish to furnish this information.		I do not wish to furnish this information.	
Race / National O	rigin	Race / National Or	rigin	
	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	
	Caucasian		Caucasian	
	Asian		Asian	
	American Indian or Alaskan Native AND Caucasian		American Indian or Alaskan Native AND Caucasian	
	Asian AND Caucasian		Asian AND Caucasian	
	Black/African American AND Caucasian		Black/African American AND Caucasian	
	American Indian or Alaskan Native AND Black/African American		American Indian or Alaskan Native AND Black/African American	
	Other (specify)		Other (specify)	
Ethnicity		Ethnicity		
	Hispanic		Hispanic	
	Non-Hispanic		Non-Hispanic	
Sex		Sex		
	Female		Female	
	Male		Male	
Marital Status		Marital Status		
	Married		Married	
	Separated		Separated	
	Unmarried (incl. single, divorced, widowed)		Unmarried (incl. single, divorced, widowed)	



For office use only – DO NOT write in this section						
Date Received						
More Information Request (circle one)	Yes	No	Date Letter Sent			
Date Application Completed			Date of Home Visit			
Application Verdict (circle one)	Accepted	Denied	Date Letter Sent			
		Inter	view			
This application was taken by (circle one)	Face to	Face Interview	By Mail (email or	r postal)	By Telephone	
Interviewer's Name (print)						
Interviewer's Signature						
Interviewer's Phone Number						
Date of Interview						
		Additional (Office Notes			