



*Successful Partnerships are built on Honesty, Mutual Respect and a Willing Attitude*

#### HOMEOWNERSHIP PROGRAM REQUIREMENTS

We appreciate your interest in Habitat's homeownership program. Please review the information below and if you believe you meet the guidelines, please complete and submit the application and required paperwork to: Anne Plott 815 Court Street Charleston, WV 25301. Office hours are 10:00 am to 3:00 pm Monday through Friday, if it more convenient for you to bring it in. If you have any questions concerning the application process, please call Anne at 304-720-0141 ext. 12 or email [aplott@hfhkp.org](mailto:aplott@hfhkp.org).

\_\_\_\_ I/We meet the monthly income guidelines based on the number of people in the household.

# in Household	Minimum Monthly Income	Maximum Monthly Income
1	1250	2567
2	1250	2933
3	1250	3300
4	1375	3667
5	1488	3960
6	1596	4253
7	1708	4547
8+	1817	4840

\_\_\_\_ I/We have lived in Kanawha or Putnam County for at least 3 months prior to application date.

\_\_\_\_ I/We understand Sweat Equity requirements and am/are willing to partner with Habitat to complete a **minimum** of 250 hours for a single applicant or 500 hours for co-applicants. (Homeowner classes, working at the construction site or office work as needed) Dave Ramsey's Financial Peace University: This course is held Monday evenings from 5:30 pm to 7:30 pm for 9 weeks. Cost is \$85.00. These hours are credited to your Sweat Equity requirement.

\_\_\_\_ I/We have not filed bankruptcy in the past 2 years and are responsible about paying our bills.

\_\_\_\_ I/We understand there is a \$600 down payment. This can be paid in installments or a lump sum.

\_\_\_\_ I/We understand that I/We are applying for the Homeownership Program with Habitat. I/We understand the purpose of this program is to earn the opportunity to purchase a house at no profit to Habitat and 0% interest.

\_\_\_\_ I/We understand that this mortgage like other mortgages requires an on time monthly payment.



When a partnership is established between a homebuyer and Habitat for Humanity, close cooperation by both parties with rights and responsibilities on each side is a requirement. Successful partnerships are built on **Honesty, Mutual Respect** and a **Willing Attitude**. Below you will find the requirements of that partnership if you are approved during our selection process.

### Homebuyer Requirements

Completion of at least 250 hours of Sweat Equity for **each adult** that will be living in the house. The required Sweat Equity hours consist of:

- Complete Master Homeowner Education Program: This is designed to teach, inform and empower participants to become proud, property-owning members of their community. These classes give the future homeowner the knowledge and understanding required to maintain the house inside and out, keep it healthy and secure and how important good neighborhood relations are. Financial, legal and insurance needs and responsibilities are included in this program.
- Children that will be living in the house between the ages of 10 -16 must complete the Future Homeowners class.
- Complete Dave Ramsey's Financial Peace University: This is a 9 week course that is held in the evenings. The cost is \$85.00 for the course materials.
- Working on the construction site.
- Attend Homebuyer Orientation
- Down Payment: May be paid in lump sum or installments.

## Application for Housing

815 Court Street Charleston WV 25301 Ph: 304-720-0141 ext. 12 Fax: 304-720-4352

Dear Applicant: We need you complete this application to determine if you qualify for a Humanity home. Please complete this application as thoroughly and accurately as possible. All information you provide on this application will be kept confidential. Your application and all supporting documentation you provide will become the property of Habitat for Humanity of Kanawha and Putnam County, therefore we ask that you please provide us copies and not original documents.

### 1. Applicant Information

Last Name	First Name	M.I.	Social Security Number	Date of Birth	Home Phone	Cell Phone
Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/>			Drivers License Number:	Email:		
Are you a US Citizen? Yes No						
Present Address			City	State	Zip Code	
Rent <input type="checkbox"/> Own <input type="checkbox"/> How long have you lived at your present address? _____						
Previous Address			City	State	Zip Code	
Rent <input type="checkbox"/> Own <input type="checkbox"/> How long did you live at your previous address? _____ Please provide your housing info for the past five (5) years. If you require additional space, please record info on a separate piece of paper and attach to application.						

### 2. Co-Applicant Information

Last Name	First Name	M.I.	Social Security Number	Date of Birth	Home Phone	Cell Phone
Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/>			Drivers License Number:	Email:		
Are you a US Citizen? Yes No						
Present Address			City	State	Zip Code	
Rent <input type="checkbox"/> Own <input type="checkbox"/> How long have you lived at present address? _____						
Previous Address			City	State	Zip Code	
Rent <input type="checkbox"/> Own <input type="checkbox"/> How long did you live at your previous address? _____ Please provide your housing info for the past five (5) years. If you require additional space, please record info on a separate piece of paper and attach to application.						

### 3. Dependents of Applicant/Co-Applicant Who Will Reside in Family Home

Name of Dependents	Date of Birth	Male	Female
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

If you have additional dependants and you require additional space, please record your information on a separate piece of paper.

4. Applicant Employment Information			
Name and Address of Current Employer			Business Phone
Date of Hire	Hourly Wage / Hours per Week	Average Monthly Income	Type of Business
Job Title or Description:			
If you have been employed at your current job less than one year, please provide your previous employment information			
Name and Address of Previous Employer			Business Phone
Employed From: To:	Hourly Wage / Hours per Week	Average Monthly Income	Type of Business
Job Title or Description:			
5. Co-Applicant Employment Information			
Name and Address of Current Employer			Business Phone
Date of Hire	Hourly Wage / Hours per Week	Average Monthly Income	Type of Business
Job Title or Description:			
If you have been employed at your current job less than one year, please provide your previous employment information			
Name and Address of Previous Employer			Business Phone
Employed From: To:	Hourly Wage / Hours per Week	Average Monthly Income	Type of Business
Job Title or Description:			
6. Homebuyer Information			
Have you ever owned a home before? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, why do you no longer own it? _____			
_____			
_____			
Dates of Ownership: _____ to _____			
Do you own land? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe, include location: _____			
_____			
_____			
Land monthly loan payment: \$ _____ Total unpaid loan balance on land: \$ _____			
Have you ever applied for a Habitat Home before? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when? _____			
How did you hear about Habitat for Humanity? _____			

### 7. Present Housing Situation

Number of Bedrooms: \_\_\_\_\_ Number of Bathrooms: \_\_\_\_\_ Describe Laundry Facilities: \_\_\_\_\_

Other rooms in the home in which you are currently living:

☐ Kitchen    ☐ Bathroom    ☐ Living Room    ☐ Dining Room    ☐ Family Room    ☐ Finished Basement    ☐ Finished Attic☐ Other Rooms \_\_\_\_\_

If you rent your residence, what is your monthly rent payment? \_\_\_\_\_

Please provide the contact information for your *current landlord* in the space provided below:

Landlord Name	Address	Phone
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**If you have lived at your current address for less than one year, please provide the contact information for your previous landlord:**

Previous Landlord Name	Address	Phone
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In the space below, please describe your current housing situation and/or house condition. Why do you feel you need a Habitat Home?

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

## 8. Willingness to Partner

To be considered for a Habitat home, you and your family must be willing to be a long-term partner with Habitat for Humanity. Being a long term partner means completing all partner requirements during the construction of your home, being a good homeowner and neighbor once you move into your home, and continuing to support the Habitat for Humanity mission long after your home is built.

During the partner phase of your relationship with Habitat, you and your family must complete a mandatory number of “sweat-equity” hours. “Sweat equity” is earned by you when you help to build your home and the homes of others, and it may include clearing a lot, painting, helping with home construction, attending homeowner education courses, working in the Habitat ReStore or main office, helping with special events or other approved activities. (If you or a family member has a physical disability, Habitat will work with you to help you successfully complete your required “sweat equity” hours).

Please sign below indicating that you and your family are willing to partner with Habitat for Humanity of a County while your home is being built and after construction, for as long as you own your Habitat home. By signing below you are also indicating that you are willing to complete all "sweat equity" requirements.

Applicant Signature

Date \_\_\_\_\_

Co-Applicant Signature

Date \_\_\_\_\_

### 9. Combined Monthly Expenses and Debt

Monthly Expenses	Name of Creditor	Monthly Payment	Current Balance	Past Due?
<b>Misc. Household Expenses</b>				
House Rent				
Gas / Electric				
Trash / Water / Sewer				
Cable / Satellite TV / Internet				
Telephone				
Furniture				
Groceries				
<b>Loans</b>				
Auto _____ months remaining				
Student _____ months remaining				
Personal _____ months remaining				
<b>Medical / Dental</b>				
Doctor				
Hospital				
Dental				
Prescriptions				
<b>Insurance</b>				
Renter's				
Auto				
Medical / Health				
Dental				
Life				
<b>Misc. Personal Care</b>				
Cell Phones				
Hair Care / Salon Services				
Clothing				
Entertainment				
<b>Ex-Family Expenses</b>				
Child Support				
Alimony				
<b>Other Expenses</b>				
Car Repair				
Car Gas				
Credit Card:				
Credit Card:				
Children's School Expenses				
Childcare				
Other:				
<b>Total Monthly Expenses</b>	\$			

### 10. Monthly Income—Applicant/Co-Applicant

Monthly Income Source	Applicant Income	Co-Applicant Income	Others in Household Income
Base Employment Income			
Second Job Income			
AFDC / TANF			
Food Stamps			
Social Security (SSA)			
Social Security (SSI)			
Disability			
Alimony			
Child Support			
Other:			
Other:			
		<b>Combined Monthly Income</b>	<b>\$</b>

Are either you the Applicant or the Co-applicant self-employed? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are there additional members of your household over the age of 18 who are earning income? \_\_\_\_\_ If yes, please list below:

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____

### 11. Assets

**Please list all Checking and Savings Accounts below:**

Name and Address of Bank, Savings & Loan or Credit Union	Name and Address of Bank, Savings & Loan or Credit Union
Account Number: _____ Balance: \$ _____	Account Number: _____ Balance: \$ _____
Name and Address of Bank, Savings & Loan or Credit Union	Name and Address of Bank, Savings & Loan or Credit Union
Account Number: _____ Balance: \$ _____	Account Number: _____ Balance: \$ _____

**Please list all other monetary assets below, including Money Market Accounts, CD's, Stocks, Savings Bonds, etc.:**

Source	Value	Source	Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## 12. Source of Down Payment and Closing Costs

If you are approved for a Habitat home, how will you get the money to pay for these costs? If you plan on borrowing the money to pay these costs, from who will you borrow this money? How and when do you plan to pay the money back?

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## 13. Declarations

	Applicant	Co-Applicant
a. Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Do you have debt because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Are you presently delinquent or in default on any federal debt or any other loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you a co-signer on another note?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Are there any outstanding judgments against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Have you declared bankruptcy in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Have you had any property foreclosed upon in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Have you had anything repossessed within the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. Have any of your accounts been placed into collections in the past three years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
j. Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
k. Are you paying alimony or child support?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered yes to any questions "a" thru "k", please provide a detailed explanation below:

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## 14. Affirmation Statement

I understand that by filing this application, I am authorizing Habitat for Humanity of Kanawha and Putnam County to evaluate my actual need for a Habitat home, my ability to repay a no-interest loan and other expenses of homeownership and my willingness to be a homebuyer. 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 along with all of the supporting documentation I have submitted along with this application.

I also understand that Habitat 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 a criminal background check.

Applicant Signature

Date

Co-Applicant Signature

Date

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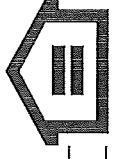
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# DOCUMENT CHECKLIST FOR HABITAT HOMEOWNER APPLICATION 11-2015



EQUAL HOUSING  
OPPORTUNITY

Yes/No	Drivers License or Photo ID for Applicant & Co-Applicant		
		DMV: 304-558-3900 or 1-800-642-9066	
		Soc Security Office 500 Quarrier St. Suite 300 Charleston, WV 25301 304-347-5217 or 1-800-772-1213	
	Social Security Cards for all family members		
		12 stubs if you are paid every week. 6 stubs if you are paid every two weeks. 3 stubs if you are paid once a month.	Your Human Resources Department can provide these for you.
	Paystubs for last 3 months		
	Award Letter for Social Security/SSI/Disability	1-800-772-1213	
	Award Letter for Family Assistance, Food Stamps	Kanawha County DHHR 4190 Washington St. Chas., WV 25313 304-746-2360 or 1-800-642-2360	Putnam County DHHR 3405 Winfield Rd. Winfield, WV 25213 304-586-1520 or 1-800-642-8589
	Statement showing child support that you receive or must pay (divorce decree or court papers)	DHHR Child Support 231 Capitol St. Village Place Suite 111 Chas., WV 25301 304-347-8688 or 1-800-249-3778	
	Divorce Decree	Kanawha County Court House 407 Virginia St. Chas., WV 25301 304-357-0100	Putnam County Court House 3389 Winfield Rd. Winfield, WV 25213 304-586-0203
	Last 2 month's bank statements	Checking and/or Savings	Your local branch can print these for you.
	Statement of Day Care Costs	States how much & when you pay	Ask your provider for copies.
	Rent Payment History	3 months of paid receipts	Ask your landlord if you don't have receipts.
	Utility Payment History	Ask for a 3 or 12 month history. Can be faxed to us: 304-720-4352.	Call provider& they will mail the statement to you or they can fax to us 304-720-4352.
	Cable/Dish/Satellite/Cell Phone/Land Line		
	Insurance (car, rent, home)		
	Credit Card(s)		
	Loans: Rent-to-Own, Personal		
	Student Loans		
	W-2		
	Most Recent Tax Return	IRS: 1-800-829-4477	Contact your tax preparer



Habitat for Humanity Kanawha and Putnam  
815 Court Street  
Charleston, WV 25301  
(304) 720-0141

PRIVACY POLICY AND PRACTICES

We at Habitat for Humanity Kanawha and Putnam. (HFHKP) value your trust and are committed to the responsible management, use and protection of personal information. This notice describes our policy regarding the collection and disclosure of non-public personal information. When you do business with HFHKP, you're asked to provide a variety of personal information. This information is important because it helps HFHKP get a better picture of your needs, provide better service, and complete your transaction more effectively.

Non-public personal information, as used in this notice, means information that identifies an individual personally and is not otherwise publicly available information. This includes personal financial information such as credit history from a credit reporting agency, income, employment history, financial assets, bank account information and financial debts. It also includes your Social Security number and other information that you have provided to HFHKP on any applications or forms that you have completed.

Non-public personal information does not include information that is available from public sources, such as government records, telephone directories, or real estate records. If we receive Non-public personal information from a nonaffiliated third party, we may disclose and use information in the ordinary course of business to carry out the purpose for which received.

HFHKP takes every measure to safeguard the information you give us or we receive. HFHKP values the customer relationship that we have with you. We have no intention of selling that personal information to third-party businesses.

Information HFHKP collects:

- Information that we receive from you on loan applications and other forms;
- Information about your transactions with us, our member organizations, or others;
- Information we receive from a consumer reporting agency

Information HFHKP shares with our member organizations about existing and former customers:

We may disclose the following information to companies that perform housing counseling and loan origination services on our behalf:

- Information we receive from you on applications or other forms, such as your name, address, social security number, assets and income; and
- Information about your transactions with us such as your account balance and payment history
- HFHKP may disclose personal information about you to nonaffiliated third parties as permitted by law. Prior to sharing personal information with unaffiliated third parties, except as described in this policy, HFHKP will give you an opportunity to direct that such information not be disclosed. See the Privacy Choices Form included with this notice.

Information HFHKP shares with our funders:

- Information we receive from you on applications or other forms, such as income, demographics, property information, financing and counseling information
- HFHKP may disclose personal information about you to nonaffiliated third parties as permitted by law. Prior to sharing personal information with unaffiliated third parties, except as described in this policy, HFHKP will give you an opportunity to direct that such information not be disclosed. See the Privacy Choices Form included with this notice.

Confidentiality and Security

HFHKP restricts access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs, including underwriting and servicing of loans and making loan decisions. We maintain physical, electronic and procedural safeguards to protect the confidentiality of personal information in our possession and to guard against unauthorized access. We use locked files, user authentication software to protect your information. Our safeguards comply with federal standards to guard your non-public personal information. We do not share account numbers or similar account access numbers for marketing purposes.

PRIVACY CHOICES FORM

Borrower:

Borrower:

Address:

City, State, Zip Code:

If you prefer that HFHKP not disclose personal information about you to unaffiliated third parties, you may opt out of those disclosures, that is, you may direct HFHKP not to disclose such information (except as permitted by law).

If you want to opt out, that is, direct HFHKP not to make disclosures about your non-public personal information (other than disclosures permitted by law) as described in this notice, check the appropriate statement below:

1. ☐ I direct HFHKP not to share non-public personal information about me with nonaffiliated third parties, except as provided in this Privacy Policy.
2. ☐ I direct HFHKP not to share non-public personal information about me with its Affiliates, except as provided in this Privacy Policy.

\_\_\_\_\_  
Borrower:

\_\_\_\_\_  
Social Security Number:

\_\_\_\_\_  
Borrower:

\_\_\_\_\_  
Social Security Number:

\_\_\_\_\_  
Current Street Address:

\_\_\_\_\_  
City/State/Zip Code:

\_\_\_\_\_  
Home Telephone Number:

If you have checked any one of the two options above, please mail this form in a stamped envelope to:

Habitat for Humanity Kanawha and Putnam

815 Court Street

Charleston, WV 25301

(304) 720-0141

Please allow approximately 30 days from HFHKP's receipt of your Privacy Choices Form for it to become effective. Your privacy instructions and any previous privacy instruction will remain in effect until you request a written change. HFHKP will allow up to 30 days for you to exercise your right to opt out before we can share your information with nonaffiliated third parties.

# Home Affordable Modification Program Government Monitoring Data Form

## Information for Government Monitoring Purposes

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. **You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it.** If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

BORROWER		CO-BORROWER	
<input type="checkbox"/> I do not wish to furnish this information		<input type="checkbox"/> I do not wish to furnish this information	
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	
<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White		<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	
<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male		<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	
To be completed by Servicers			Name/Address of Interviewer's Employer
<i>This request was taken by:</i> <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet		<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>Servicer/Interviewer's Name (print or type) &amp; ID Number</b>   <b>Servicer/Interviewer's Signature</b>   <b>Servicer/Interviewer's Phone Number (include area code)</b>            304-720-0141         </div> <div style="width: 35%;">           Habitat for Humanity of Kanawha &amp; Putnam             815 Court Street             Charleston, WV 25301         </div> </div>	
<b>Loan Number:</b> _____		<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>Servicer/Interviewer's Fax Number (include area code)</b>            304-720-4352         </div> <div style="width: 35%;"> <b>Servicer/Interviewer's email address</b> </div> </div>	

### EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices for the East Central Region 1111 Superior Ave. Suite 200 Cleveland, OH 44114-2507 or the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete, and we will be unable to invite you to participate in the Habitat program.

Applicant(s):

X \_\_\_\_\_

X \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_