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## HOMEBUYER PROGRAM PRE-APPLICATION

Please fill out this form as completely and accurately as possible. **Be sure to include your \$25 pre-application fee.** Accepted forms of payment include personal or cashier checks or money orders. Cash and credit card payments are not accepted by Habitat. Failure to do so may result in the delay or denial of your application.  
 All information provided will be kept confidential.  
**If you have questions or concerns, or if you would like help in completing your application, please call 920-967-8887.**

**HOUSEHOLD INFORMATION – All heads of household must co-apply.**

**Applicant's Full Legal Name**

**Co-Applicant's Full Legal Name**

\_\_\_\_\_  
 First                      Middle                      Last

\_\_\_\_\_  
 First                      Middle                      Last

\_\_\_\_\_  
 Other Names Used

\_\_\_\_\_  
 Other Names Used

\_\_\_\_\_  
 Social Security Number                      Date of Birth

\_\_\_\_\_  
 Social Security Number                      Date of Birth

Circle one: Married    Separated    Unmarried

Circle one: Married    Separated    Unmarried

**Contact Information**

\_\_\_\_\_  
 Applicant's Phone Number

\_\_\_\_\_  
 Co-Applicant's Phone Number

\_\_\_\_\_  
 Email Address

\_\_\_\_\_  
 Email Address

**OTHER HOUSEHOLD MEMBERS - ALL people who will be living with you**  
**\*Everyone over 18 will also need to sign a General Release form authorizing a background check**

\_\_\_\_\_  
 Name                      Date of Birth                      Social Security Number                      Relationship

\_\_\_\_\_  
 Name                      Date of Birth                      Social Security Number                      Relationship

\_\_\_\_\_  
 Name                      Date of Birth                      Social Security Number                      Relationship

\_\_\_\_\_  
 Name                      Date of Birth                      Social Security Number                      Relationship

\_\_\_\_\_  
 Name                      Date of Birth                      Social Security Number                      Relationship

**RESIDENCY HISTORY – Provide for past 2 years. (If you need more room, please use the back of this form.)**

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

\_\_\_\_\_  
Previous Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
County of Residence

\_\_\_\_\_  
County of Residence

\_\_\_\_\_  
Dates of Occupancy (from \_\_\_ to present)

\_\_\_\_\_  
Dates of Occupancy (from \_\_\_ to \_\_\_)

\_\_\_\_\_  
Monthly Rent Payment \$\_\_\_\_\_

\_\_\_\_\_  
Monthly Rent Payment \$\_\_\_\_\_

\_\_\_\_\_  
Is rent subsidized? YES or NO

\_\_\_\_\_  
Was rent subsidized? YES or NO

\_\_\_\_\_  
Current Landlord's Name

\_\_\_\_\_  
Previous Landlord's Name

\_\_\_\_\_  
Street Address City, State, Zip Code

\_\_\_\_\_  
Street Address City, State, Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

**WILLINGNESS TO PARTNER – Acknowledging "Sweat Equity" Program Requirement**

To be considered for Habitat homeownership, you and your family must be willing to complete a certain number of "sweat equity" hours. Your help in building your home and the homes of others is called "sweat equity," and may include lot maintenance, helping with home construction, working at the Habitat ReStore, or other approved activities. You will also need to participate in homeowner education programs offered by Habitat for Humanity. A two adult household is required to perform a minimum of 500 hours; and a single adult family is required to complete 300 hours.

**Please indicate if you are willing to complete the required sweat equity hours and sign below.**

**APPLICANT:** YES \_\_\_ NO \_\_\_

**CO-APPLICANT:** YES \_\_\_ NO \_\_\_

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant

\_\_\_\_\_  
Date

# DECLARATIONS

Please answer the following questions:

	APPLICANT		CO-APPLICANT	
	YES	NO	YES	NO
<p>A. Have you filed bankruptcy in the last seven years?                      (Satisfaction date must be at least 6 months from application)                      Please provide date of bankruptcy satisfaction? _____</p>	—	—	—	—
<p>B. Have you had property foreclosed on in the last seven years?                      (Satisfaction date must be at least 6 months from application)                      Please provide date of bankruptcy satisfaction? _____</p>	—	—	—	—
<p>C. Do you have any debt because of collections?                       If yes, please explain: _____                       _____</p>	—	—	—	—
<p>D. Do you have any debt because of judgments/liens against you?                      (All judgments must be paid in full prior to application)</p>	—	—	—	—
<p>E. Are you or any household member currently involved in a lawsuit or                      have a conviction?                      If yes, please explain: _____                       _____</p>	—	—	—	—
<p>F. Are you a U.S. citizen or permanent resident?</p>	—	—	—	—
<p>G. Is anyone in the household a Veteran or Active in the US military?</p>	Please list: _____  _____			
<p>H. Have you lived in or worked in Outagamie, Calumet, or northern                      Winnebago County or the City of Waupaca for at least 6 months?</p>	—	—	—	—
<p>I. The 3 main criteria needed to become a Habitat for Humanity partner                      family are listed below, do you feel you meet all three of these?                      *Need for adequate housing                      *Ability to repay the interest-free mortgage with a manageable                      amount of debt                      *Willingness to Partner (sweat equity, etc...)</p>	—	—	—	—
<p>J. To the best of your knowledge, what is your annual household income?                      *If you need help calculating your income, please refer to the income                      calculation worksheet or call our Family Services Manager to set up an                      appointment for assistance.</p>	\$ _____			



**GENERAL RELEASE**

I/We certify that all the information on this application and accompanying documentation is true and correct to the best of our knowledge. I/we understand that false or misleading information may be grounds for rejection of the application. Furthermore, it is understood that the completion of this application does not guarantee that I/we will receive housing through the Greater Fox Cities Area Habitat for Humanity. I give permission to the Greater Fox Cities Area Habitat for Humanity to check any and all information, including but not limited to previous housing history, employment, and credit/payment history included herein. I give permission to Greater Fox Cities Area Habitat for Humanity to check my credit rating, criminal record, and sexual offender registry. I understand that by completing this application, I am submitting to all such inquiries.

To my creditor:

I/We authorize you to provide Habitat for Humanity any and all information and documentation they request. Such documentation may include, but is not limited to, the following types of information:

1. Employment history
2. Credit history and reports
3. Balances on savings accounts, checking accounts, etc.
4. Payment history and delinquencies
5. Amounts owed on accounts
6. Cash values on life insurance policies and other investment or retirement savings
7. Security agreements and pledges for purpose of security
8. Loan amounts, terms, payment schedules, etc.
9. Copies of tax returns or W2 forms
10. Criminal background check (PACER, CCAP, etc...)
11. National Sexual Offender Registry check (NSOPW)
12. Social security awards, residency verification and child support if applicable
13. Any other documents pertaining to my financial, credit and liability circumstances

\_\_\_\_\_  
Applicant's Name

\_\_\_\_\_  
Last 4 digits Soc Sec #

\_\_\_\_\_  
Co-applicant's Name

\_\_\_\_\_  
Last 4 digits Soc Sec #

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant's Signature

\_\_\_\_\_  
Date

Within the limits of the law, Greater Fox Cities Area Habitat for Humanity will do its best to keep the information in this pre-application confidential.



We are pledged to the letter and spirit of the U.S. policy for the achievement of equal housing opportunity through 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, family status or national origin.

**INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

**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 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 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.

Applicant	Co-Applicant
<p><input type="checkbox"/> I do not wish to furnish this information</p> <p><b>Race/National Origin:</b></p> <p><input type="checkbox"/> American Indian or Alaskan Native</p> <p><input type="checkbox"/> Native Hawaiian or other Pacific Islander</p> <p><input type="checkbox"/> Black/African American</p> <p><input type="checkbox"/> Caucasian</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian or Alaskan Native AND Caucasian</p> <p><input type="checkbox"/> Asian AND Caucasian</p> <p><input type="checkbox"/> Black/African American AND Caucasian</p> <p><input type="checkbox"/> American Indian or Alaskan Native AND Black/African American</p> <p><input type="checkbox"/> Other (specify) _____</p> <p><b>Ethnicity:</b></p> <p><input type="checkbox"/> Hispanic</p> <p><input type="checkbox"/> Non-Hispanic</p> <p><b>Sex:</b></p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p><b>Birth date:</b> ____/____/____</p> <p><b>Marital Status:</b></p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Unmarried (includes single, divorced, widowed)</p>	<p><input type="checkbox"/> I do not wish to furnish this information</p> <p><b>Race/National Origin:</b></p> <p><input type="checkbox"/> American Indian or Alaskan Native</p> <p><input type="checkbox"/> Native Hawaiian or other Pacific Islander</p> <p><input type="checkbox"/> Black/African American</p> <p><input type="checkbox"/> Caucasian</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian or Alaskan Native AND Caucasian</p> <p><input type="checkbox"/> Asian AND Caucasian</p> <p><input type="checkbox"/> Black/African American AND Caucasian</p> <p><input type="checkbox"/> American Indian or Alaskan Native AND Black/African American</p> <p><input type="checkbox"/> Other (specify) _____</p> <p><b>Ethnicity:</b></p> <p><input type="checkbox"/> Hispanic</p> <p><input type="checkbox"/> Non-Hispanic</p> <p><b>Sex:</b></p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Male</p> <p><b>Birth date:</b> ____/____/____</p> <p><b>Marital Status:</b></p> <p><input type="checkbox"/> Married</p> <p><input type="checkbox"/> Separated</p> <p><input type="checkbox"/> Unmarried (includes single, divorced, widowed)</p>

