



APPLICATION

FOR OFFICE USE ONLY	
Date Received:	_____
Date Reviewed:	_____



2930 W. 4th Street, Owensboro, KY 42301

Phone: (270) 926-6110 Option 1

APPLICATION for HABITAT HOMEOWNERSHIP PROGRAM

The information contained in this application will remain strictly confidential. It will be available only to members of the Homeowner Services Committee and Board of Directors of Habitat for Humanity of Owensboro-Daviess County. It will be used to determine eligibility for Habitat's homeownership program and will not be released to any other agency.

Applicant Name: _____ (Last, First Middle)		Co-Applicant Name: _____ (Last, First Middle)	
Marital Status: __ Married __ Unmarried __ Legally Separated		Marital Status: __ Married __ Unmarried __ Legally Separated	
Date of Birth:	Social Security #:	Date of Birth:	Social Security #:
Telephone Number: Can we text this number? __ Yes __ No		Telephone Number: Can we text this number? __ Yes __ No	
Email address:		Email address:	
Address (mailing address, including city, state, zip):		Address (mailing address, including city, state, zip):	
Do you live at the above address? __ Yes __ No If no: home address:		Do you live at the above address? __ Yes __ No If no: home address:	
How long have you lived at this address:		How long have you lived at this address:	
Are you a veteran? __ Yes __ No		Are you a veteran? __ Yes __ No	

In addition to your co-applicant, if selected, who else will live in the Habitat house? (Attach additional page to application if you do not have enough room here.)

Name:	Date of Birth:	Sex:	Relationship to you:

WILLINGNESS TO PARTNER:

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 (but is not limited to) clearing the lots, painting, helping with construction, working in the Habitat office, attending homeownership classes and/or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS :

Applicant: Yes No Co-Applicant: Yes No

Applicant Signature Date

Co-Applicant Signature Date

Please note, the following attachments must be turned in with the fully completed application. Please check off that you have attached:

Applicant's Credit Report (no older than 6 months before the application review date).

Co-Applicant's Credit Report (no older than 6 months before the application review date).

Applicant's New Criminal Background check (covering federal, state, and Daviess County).

Co-Applicant's New Criminal Background check (covering federal, state, and Daviess County).

Proof of all household income (include pay stubs, proof of child support, and/or disability/retirement benefits, 1099 Forms) for the last 3 months.

Most recent tax return/IRS 1040.

Statement signed by your landlord that you have paid rent on time consistently for the last six months.

EMPLOYMENT INFORMATION

Please provide all employment information from the last five (5) years for you and the co-applicant (attach additional page to application if you do not have enough room here):

Applicant: Current Employer: _____ Job Title: _____ Start Date: _____ Phone: _____ Address: _____ Supervisor: _____ Still employed: __Yes __No Years at this job: _____ Monthly (gross) wage: \$	Co-Applicant Current Employer: _____ Job Title: _____ Start Date: _____ Phone: _____ Address: _____ Supervisor: _____ Still employed: __Yes __No Years at this job: _____ Monthly (gross) wage: \$
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If current employment is less than one year, please provide your last employment (for at least one year) (Attach additional page to application if you do not have enough room here.):

Past Employer: _____ Job Title: _____ Start Date: End Date: _____ _____ Phone: _____ Address: _____ Supervisor: _____ Reason for leaving: _____ Years at this job: _____ Monthly (gross) wage: \$	Past Employer: _____ Job Title: _____ Start Date: End Date: _____ _____ Phone: _____ Address: _____ Supervisor: _____ Reason for leaving: _____ Years at this job: _____ Monthly (gross) wage: \$
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Are there other household members who are employed? Yes No (If "yes" explain)

Household member's employer (Name): _____

(Address) _____ (City) _____ (State) _____ (Zip) _____

FINANCIAL & BACKGROUND INFORMATION:

(Please note, "GROSS" means income before taxes and other deductions.)

Household Income: GROSS Weekly: \$ _____ GROSS Annual: \$ _____

Income by household individuals: (if more room is needed attach a page)

Monthly Income				
Income Source	Applicant	Co-Applicant	Other in House	Total:
Wages:	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Section 8 housing	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Totals:	\$	\$	\$	\$

Please note: Self-employed applicants may be required to provide additional documentation such as tax returns, 1099s, and other financial statements.

Household members whose income is listed above			
Name	Income Source	Monthly Income	Date of Birth

Household Income by other household members other than applicant or co-applicant:

Name: _____ GROSS Weekly: \$ _____ GROSS Annual: \$ _____

Name: _____ GROSS Weekly: \$ _____ GROSS Annual: \$ _____

(If more room is needed attach a page)

Source of Down Payment & Closing Costs

Where will you get the money to make the down payment or pay for closing costs (for example: savings or parents)? If you borrow the money, whom will you borrow it from, and how will you pay it back?

Banking & Assets (What you own):

Name of Bank/savings and loan/credit union, etc.: _____

Address/City/State/Zip: _____

Account Number: _____ Current Balance: _____

Name on account: _____

Name of Bank/savings and loan/credit union, etc.: _____

Address/City/State/Zip: _____

Account Number: _____ Current Balance: _____

Name on account: _____

(Continue on additional page if more accounts)

Do you own:

Land: No Yes If yes, describe _____

Car: No Yes If yes, describe _____

House: No Yes If yes, describe _____

Mobile Home: No Yes If yes, describe _____

DEBT: (indicate if you or co-applicant)

Loans, liens, debts and credit purchase (home furnishings, appliances, automobiles, school loans, doctor bills, clothing, etc.)

Item:	Name of Lien Holder:	Monthly Payment	Total Amount Borrowed	Balance
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Car				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Phone				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Medical liens/outstanding balance				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Student Loans				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Furniture/appliances/TV (Includes rent to own)				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Alimony				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Child Support				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Credit Cards				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Credit Cards				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Credit Cards				
<input type="checkbox"/> Applicant <input type="checkbox"/> Co-applicant Other Loans				

Monthly Expenses:

Accounts paid monthly	Applicant	Co-Applicant	Total
Rent	\$	\$	\$
Utilities	\$	\$	\$
Car Insurance	\$	\$	\$
Medical Insurance	\$	\$	\$
Child Care	\$	\$	\$
Internet Service	\$	\$	\$
Cell Phone	\$	\$	\$
Land Line	\$	\$	\$
Business Expenses	\$	\$	\$
Union Dues	\$	\$	\$
Food	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Total:	\$	\$	\$

DECLARATIONS:

Please circle the word that best answers the following questions for you and the co-applicant:

	Applicant		Co-Applicant	
a. Do you have any outstanding judgments because of a court decision against you?	Yes	No	Yes	No
b. Have you been declared bankrupt within the past seven years?	Yes	No	Yes	No
c. Have you had property foreclosed on or deed in lieu of foreclosure in the past seven years?	Yes	No	Yes	No
d. Are you currently involved in a lawsuit?	Yes	No	Yes	No
e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?	Yes	No	Yes	No
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage, financial obligation, or loan guarantee?	Yes	No	Yes	No

g. Are you paying alimony or child support or separate maintenance?	Yes	No	Yes	No
h. Are you a co-signer or endorser on any loan?	Yes	No	Yes	No
i. Are you on the sex offender's registry?	Yes	No	Yes	No
j. Are you a U.S. citizen or permanent resident?	Yes	No	Yes	No
If you answered "yes" to any questions a through i or "no" to question j, please explain on the sheet attached and labeled "Declarations explained".				

PRESENT HOUSING SITUATION

Own Rent Section 8 Other (explain): _____

Landlord (Name of Agency): _____

 (Address) (City) (State) (Zip)

Telephone: (____) _____ Monthly Rent: \$ _____

Number of bedrooms: _____ Number of bathrooms: _____

Condition of current housing: _____

Condition of Present Housing:

(Please check one box in each line and give brief description.)

	Good	Fair	Poor	Comments:
Roof				
Walls				
Insulation				
Floor				
Heating				
Wiring				
Plumbing				

Are you overcrowded in your present housing? Yes No

If yes, please explain: _____

REFERENCES (List three non-family members):

Reference 1.

Name:

Relationship to Applicant(s):

Address:

Phone:

City, State, Zip:

Email:

Reference 2.

Name:

Relationship to Applicant(s):

Address:

Phone:

City, State, Zip:

Email:

Reference 3.

Name:

Relationship to Applicant(s):

Address:

Phone:

City, State, Zip:

Email:

RELEASE FORM

I/we understand that by filing this application, I/we, the undersigned, understand and authorize Habitat for Humanity of Owensboro-Daviess County to perform an in-depth study to determine my/our actual need for the Habitat homeownership program, my ability to repay the affordable loan and other expenses of homeownership, and my willingness to be a partner through sweat equity, and reputation.

I/we understand the investigation will include personal visits, a credit check, employment verification, references contacted, and criminal background check. I/we have answered all the questions on this application truthfully. I/we understand that if I/we have not answered truthfully, this application may be denied, and that even if I/we have already been selected to receive a Habitat home, I/we may be disqualified from the program and forfeit any rights or claims to a Habitat home. I/We understand that if I/we give false information, withhold information, or fail to report any changes promptly, I/we will forfeit the right to participate in the homeownership program operated by Habitat for Humanity of Owensboro-Daviess County.

The original or a copy of this application will be retained by Habitat for Humanity Owensboro-Daviess County even if the application is not approved.

I/we also understand that Habitat for Humanity Owensboro-Daviess County screens all applicants on the sex offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

Applicant Signature

Date

Co-Applicant Signature

Date

If there is any other information or any special circumstances that could help us in considering this application, please explain below:

Additional Information:

(Please indicate which section this information is answering, example: "Financial Information Page 5")

Declarations explained:

If you need to include additional information:



**EQUAL HOUSING
OPPORTUNITY**

**We Do Business in Accordance With the Federal Fair
Housing Law**

(The Fair Housing Amendments Act of 1988)

**It is Illegal to Discriminate Against Any Person
Because of Race, Color, Religion, Sex,
Handicap, Familial Status, or National Origin**

- In the sale or rental of housing or residential lots
- In advertising the sale or rental of housing
- In the financing of housing
- In the provision of real estate brokerage services
- In the appraisal of housing
- Blockbusting is also illegal

Anyone who feels he or she has been
Discriminated against may file a complaint of
housing discrimination:

1-800-669-9777 (Toll Free)

1-800-927-9275 (TTY)

www.hud.gov/fairhousing

U.S. Department of Housing and
Urban Development
Assistant Secretary for Fair Housing and
Equal Opportunity
Washington, D.C. 20410

Please sign below acknowledging that you have read and understand the Federal Fair Housing Law shown above.

X _____

Date: _____



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Owensboro, KY 42301
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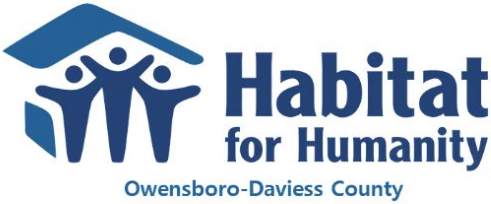
Habitat for Humanity of Owensboro Daviess County, Inc Privacy Statement

At Habitat for Humanity of Owensboro Daviess County, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, tenant, and homeowner data – such as tax returns, pay stubs, credit reports, employment verification, and payment history – internal controls are maintained throughout the process to ensure security and confidentiality. We collect nonpublic personal information about you from the following sources:

- Information we receive from you on application and other forms;
- Information about your transactions with us, our affiliates, or others; and
- Information we receive from a consumer-reporting agency.

Habitat for Humanity of Owensboro Daviess County employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. Habitat for Humanity has no affiliates or marketing experts with whom we share personal information.



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2023 Basic Eligibility Checklist To Apply for The Habitat Homeownership Program

Eligibility at glance:

- Have you lived in Daviess County, Kentucky for at least 12 months?
Applicant: yes ___no Co-Applicant: yes ___no
- Are you a U.S. Citizen or do you have proof of permanent residence?
Applicant: yes ___no Co-Applicant: yes ___no

Explain any “no” answers:

- Do you own a house, mobile home, or land?
Applicant: yes ___no Co-Applicant: yes ___no
- Do you have any large outstanding debt?
Applicant: yes ___no Co-Applicant: yes ___no
- Have you been in jail or rehab in the past two years?
Applicant: yes ___no Co-Applicant: yes ___no
- Do you have any felonies or drug charges on your record?
Applicant: yes ___no Co-Applicant: yes ___no
- Have you declared bankruptcy in the past two years?
Applicant: yes ___no Co-Applicant: yes ___no

Explain any “yes” answers:

Also, are you __single, __ married, __ legally divorced, or __ legally separated?

Are you a military veteran? Applicant: yes ___no Co-Applicant: yes ___no

Applicant Signature

Date

Co-Applicant Signature

Date