



of Tompkins and Cortland Counties

MAILING ADDRESS: PO Box 4683 Ithaca NY 14852

(607) 844-3529 info@tchabitat.com (office location: 95 Brown Road, Suite 221, Ithaca, NY 14850)

<u>Dear Applicant:</u> We need you to complete this application to determine if you may qualify for the Habitat for Humanity homeownership program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

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, religion, sex, handicap, familiar status or national origin.

Applicant Name:			Co-Applicant Name:				
Phone Number:			Phone Number:				
Email:			Email:				
Age:				Age:			
○ Married			○ Married				
○ Separated				○ Separated			
Unmarried (Single, Divorced, W	idowed)			Unmarried (Single, Divorced, Widowed)			
Address: (street, city, state, zip) Own Rent			Address: (street, city	, state, zip)		Own Rent	
Number of years at current address			Number of years at current address				
Last address if living at current address for under 2 yrs			Last address if living at current address for under 2 yrs				
Address: (street, city, state, z	zip)		○ Own	Address: (street, city	, state, zip)		Own
			○ Rent				○ Rent
_							
Number of years				Number of years			
				s who will live with you			
Name	Age	Male	Female	Name	Age	Male	Female
			\bigcirc				\bigcirc
Name	Age	Male	Female	Name	Age	Male	Female
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Name	Age	Male	Female	Name	Age	Male	Female
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Name	Age	Male	Female	Name	Age	Male	Female
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Willingness to partner: To be considered for a Habitat home, 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 clearing the lot, helping with construction, working on various Habitat projects or fundraisers, attending homeownership classes and other approved activities.					
Tunuraisers, attenuing nom	eownership classes and o	ther approved ac	tivities.	YES	NO
			Annlicant	TES	_
I AM WILLING TO COMPLE	TE THE DECLUDED SWEAT	- FOLLITY HOLIDS	Applicant Co-Applicant		\circ
TAIVI WILLING TO CONFEE	IL THE REQUIRED SWEAT	-LQUITT HOURS	Со-Аррисанс		
	Droconi	. Housing Conditi			
	present	Housing Conditi	<u>ons</u>		
# of Bedrooms	# of Bathrooms		Current Rent/Mortgage Pe	r Month \$_	
In the space below, describe the condition of where you live and explain why you need a Habitat home (attach another page if needed)					
	INCOME A	ND CREDIT EVAL	JATION		
I understand that to comple	<u></u>			am. I must	complete
I understand that to complete my application for the Habitat for Humanity homeownership program, I must complete a financial and credit evaluation with a mortgage lending professional or a HUD-certified homeownership					
counselor. I understand that my application is <u>NOT COMPLETE</u> until this evaluation is done.					
I will authorize Habitat for Humanity of Tompkins and Cortland Counties (TCHFH) to communicate directly with the					
mortgage lending professional or homeownership counselor about my application, income information, and					
information contained in a tri-merged consumer credit report. I will sign a specific release for information to be shared					
between the two agencies.					
Documents that will be required to complete the income and credit evaluation include, but are not limited to: 4 most					
recent pay stubs, most recent 2 years federal tax returns with W-2s, 1099s and all schedules, current credit report,					
proof of any other income (pension statement, social security statement, child support agreement with proof of					
receipt of payments, Section 8 or public assistance statement, etc.), proof of your assets including 2 months bank					
statements from all accounts, proof of any other assets.					
Applicant Signature	Date	Co- Applicant Si	gnature [Date	



Authorization & Release

I understand that by filing this application, I am authorizing Habitat for Humanity of Tompkins and Cortland Counties (TCHFH) to evaluate my actual need for a Habitat home, my initial ability to repay a mortgage loan and other homeowner expenses, and my willingness to be a homebuyer family. I understand that the evaluation may include interviews, employment verification, landlord references, and future credit checks. 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. The original or a copy of this application will be retained by TCHFH even if the application is not approved. I understand that this application is the initial step in becoming a homebuyer family, and that further information and documentation will be required if I move along through the process.

I also understand that TCHFH screens all potential staff, 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 listed on the first page of this application to a criminal background check.

Applicant Signature	Date	Co- Applicant Signature	Date

INFORMATION FOR GOVERNMENT MONITORING PURPOSES			
APPLICANT:	CO-APPLICANT:		
☐ I do not wish to furnish this information	☐ I do not wish to furnish this information		
Race/National Origin:	Race/National Origin:		
☐ 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 Indian or Alaskan Native AND Black/African		
American	American		
Other (specify)	Other (specify)		
Ethnicity:	Ethnicity:		
☐ Hispanic	☐ Hispanic		
□ Non-Hispanic	□ Non-Hispanic		
Sex:	Sex:		
□ Male	□ Male		
☐ Female	□ Female		
Date of Birth/	Date of Birth/		
Marital Status:	Marital Status:		
□ Married	☐ Married		
□ Separated	☐ Separated		
☐ Unmarried (includes single, divorced, widowed)	☐ Unmarried (includes single, divorced, widowed)		

DATE APPLICATION RECEIVED____/____

