



Habitat for Humanity of Beaver County
 47 Bridge Street • Beaver Falls, PA 15010
 724.846.1630 • Fax: 724.847.2963
 info@BeaverCountyHabitat.org

Application

Habitat Homeownership Program



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.

Habitat for Humanity of Beaver County is funded in part by the PA Department of Community and Economic Development and material support is provided by the Beaver County Board of Commissioners.

NMLS #1196430

Dear Applicant: Please fill out this application completely and accurately. Please **PRINT** all information legibly and **DO NOT** leave any section blank. If the question does not apply to you, please print "N/A" or "Does Not Apply." All information you include on this application will be kept confidential. Applicants who falsify any information on this application will be immediately de-selected from the program. If additional space is needed for any item, please use a blank sheet of paper and mark your additional comments with "A" for Applicant or "C" for Co-Applicant.

Date: _____	Check the property location you are applying for: <input type="checkbox"/> corner of Le Goullon Ave & Boundary St, Monaca <input type="checkbox"/> 842 Grove Ave, New Brighton <input type="checkbox"/> 2003 5 th St, Patterson Twp.
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1. APPLICANT INFORMATION			
Applicant		Co-Applicant	
Applicant's Name:		Co-Applicant's Name:	
Social Security #:	Birth date:	Social Security #:	Birth Date:
Present address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent		Present address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent	
How long have you lived at this address: _____		How long have you lived at this address: _____	
Mailing address (if different from present address)		Mailing address (if different from present address)	
Phone:		Phone:	
Email:		Email:	
If living at present address for less than two (2) years, list your previous address			
Last address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent		Last address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent	
How long did you live at this address: _____		How long did you live at this address: _____	
Have you ever owned a home? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever owned a home? <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. WILLINGNESS TO PARTNER

To be considered for Habitat homeownership, homebuyers 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 helping with construction, yard work, painting, working in the Habitat Beaver County ReStore and/or the office, attending homeownership classes, and/or other approved activities. Please review our Sweat Equity policy. Habitat for Humanity of Beaver County is a volunteer organization, and in no event will you be paid for the "sweat equity" hours you contribute.

	Yes	No
I AM WILLING TO COMPLETE ALL REQUIRED ELEMENTS OF MY SWEAT EQUITY HOURS:	Applicant <input type="checkbox"/>	<input type="checkbox"/>
	Co-Applicant <input type="checkbox"/>	<input type="checkbox"/>

3. DEPENDANTS

List all dependants and others who live with you (***DO NOT*** list the applicant and/or co-applicant)

Applicant must include the names of persons who regularly live with the applicant and/or co-applicant and must include their income under Section 8 – Monthly Income.

Name	Age & Birth Date	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"/>

4. PRESENT HOUSING CONDITIONS

Number of bedrooms (please circle): 1 2 3 4 5

Other rooms in your current residence:

Kitchen Bathroom Living Room Dining Room Other (please describe): _____

Current landlord's contact information:

Name of landlord:	Phone / Email:
Address (street, city, state, zip code)	

In the space below, describe the condition of the house or apartment where you live AND why you need a Habitat home:

5. PROPERTY INFORMATION

If you own your residence, what is your monthly mortgage payment? \$_____ / month Unpaid balance \$_____

Do you own land? No Yes If yes, what is the monthly payment? \$_____ / month Unpaid balance \$_____

If you own land, please describe the property and the location: _____

6. EMPLOYMENT INFORMATION

6. EMPLOYMENT INFORMATION			
Applicant		Co-Applicant	
<i>Name of Current Employer:</i>		<i>Name of Current Employer:</i>	
<i>Business address (street, city, state, zip code)</i>		<i>Business address (street, city, state, zip code)</i>	
<i>Number of years at this job:</i>	<i>Dates:</i> _____ to _____	<i>Number of years at this job:</i>	<i>Dates:</i> _____ to _____
<i>Supervisor's Name:</i>		<i>Supervisor's Name:</i>	
<i>Business Phone:</i>		<i>Business Phone:</i>	
<i>Gross Monthly Income:</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		<i>Gross Monthly Income:</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
<i>Describe the type of business and your responsibilities:</i>		<i>Describe the type of business and your responsibilities:</i>	
<i>Is there possibility for advancement?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>Is there possibility for advancement?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

For any additional current jobs, please use a separate sheet of paper.

7. PRIOR EMPLOYMENT INFORMATION

On this page and the next, please provide the following information for all prior employers for the past three (3) years. Please use an additional separate sheet of paper if needed.

If you've worked at your current job for three (3) years or more, you do not need to complete this section. Mark "N/A" or "Not Applicable" below.

Applicant		Co-Applicant	
<i>Name of Prior Employer:</i>		<i>Name of Prior Employer:</i>	
<i>Business address (street, city, state, zip code)</i>		<i>Business address (street, city, state, zip code)</i>	
<i>Number of years at this job:</i>	<i>Dates:</i> _____ to _____	<i>Number of years at this job:</i>	<i>Dates:</i> _____ to _____
<i>Supervisor's Name:</i>		<i>Supervisor's Name:</i>	
<i>Business Phone:</i>		<i>Business Phone:</i>	
<i>Gross Monthly Income:</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		<i>Gross Monthly Income:</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
<i>Describe the type of business and your responsibilities:</i>		<i>Describe the type of business and your responsibilities:</i>	
<i>Reason for leaving this position:</i>		<i>Reason for leaving this position:</i>	

7. PRIOR EMPLOYMENT INFORMATION (CONTINUED)

Please provide the following information for all prior employers for the past three (3) years.
Please use an additional separate sheet of paper if needed.

If you've worked at your current job for three (3) years or more, you do not need to complete this section. Mark "N/A" or "Not Applicable" below.

Applicant		Co-Applicant	
Name of Prior Employer:		Name of Prior Employer:	
Business address (street, city, state, zip code)		Business address (street, city, state, zip code)	
Number of years at this job:	Dates: _____ to _____	Number of years at this job:	Dates: _____ to _____
Supervisor's Name:		Supervisor's Name:	
Business Phone:		Business Phone:	
Gross Monthly Income: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Gross Monthly Income: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
Describe the type of business and your responsibilities:		Describe the type of business and your responsibilities:	
Reason for leaving this position:		Reason for leaving this position:	

8. MONTHLY INCOME

Please provide the MONTHLY GROSS (before taxes) AMOUNT you receive from the following applicable sources.

**ATTACH COPIES OF PROOF OF INCOME FOR TWO (2) MOST RECENT MONTHS
FOR ALL CURRENT INCOME SOURCES.**

(Examples of Proof of Income: paystubs, disbursement letters, bank statements, etc.)

Self-employed applicants may be required to provide additional documentation such as tax returns and financial statements.

Alimony, child support, or separate maintenance income does not need to be revealed if you do not choose to have it considered for repaying this loan. However, if you choose to have it listed as income, it is at the discretion of Habitat Beaver County to determine if it is applicable as part of your total income to qualify for housing.

Income Source	Applicant	Co-Applicant	Others in Household	TOTAL
Employment Wages	\$	\$	\$	\$
Employment Wages	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI/Disability	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Military Allotment	\$	\$	\$	\$
Pension/Retirement	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

9. ASSETS

Please indicate which, if any, of the following assets you currently own:

- Boat
 Mobile Home
 Motorcycle
 RV
 ATV
 Trailer

Car - Make & Model: _____ Year: _____

Car - Make & Model: _____ Year: _____

9. ASSETS (CONTINUED)

List below all Bank, Savings & Loan, and/or Credit Union Checking & Savings accounts for the applicant, co-applicant, and dependants over 18 who plan to live in the house.

Please use a separate sheet of paper if necessary.

Applicant	Co-Applicant	Others in Household
<i>Name of Bank, Credit Union, etc:</i>	<i>Name of Bank, Credit Union, etc:</i>	<i>Name of Bank, Credit Union, etc:</i>
<i>Name on the account:</i>	<i>Name on the account:</i>	<i>Name on the account:</i>
<i>Address (street, city, state, zip code):</i>	<i>Address (street, city, state, zip code):</i>	<i>Address (street, city, state, zip code):</i>
<i>Phone:</i>	<i>Phone:</i>	<i>Phone:</i>
<i>Account Number:</i>	<i>Account Number:</i>	<i>Account Number:</i>
<i>Current Balance:</i> \$	<i>Current Balance:</i> \$	<i>Current Balance:</i> \$
Applicant	Co-Applicant	Others in Household
<i>Name of Bank, Credit Union, etc:</i>	<i>Name of Bank, Credit Union, etc:</i>	<i>Name of Bank, Credit Union, etc:</i>
<i>Name on the account:</i>	<i>Name on the account:</i>	<i>Name on the account:</i>
<i>Address (street, city, state, zip code):</i>	<i>Address (street, city, state, zip code):</i>	<i>Address (street, city, state, zip code):</i>
<i>Phone:</i>	<i>Phone:</i>	<i>Phone:</i>
<i>Account Number:</i>	<i>Account Number:</i>	<i>Account Number:</i>
<i>Current Balance:</i> \$	<i>Current Balance:</i> \$	<i>Current Balance:</i> \$

10. SOURCE OF ESCROW

An escrow start-up account of \$2,000 is a requirement once accepted into the Homeownership program and is used to pay taxes and insurance on the house. The full amount must be in your escrow account before closing on the house. In the space below, explain where you will get the money to start your escrow account (for example: savings, family, friends). If you will borrow the money, explain from whom and how you will pay it back:

11. DEBT

To whom do you and the co-applicant owe money?

Account	Applicant		Co-Applicant	
	Monthly Payment	Unpaid Balance	Monthly Payment	Unpaid Balance
Car Payment	\$	\$	\$	\$
Car Payment	\$	\$	\$	\$
Other Vehicle (<i>boat, motorcycle, etc.</i>)	\$	\$	\$	\$
Furniture, appliances, TVs (<i>includes rent to own</i>)	\$	\$	\$	\$
Credit Card: _____	\$	\$	\$	\$
Credit Card: _____	\$	\$	\$	\$
Total Medical / Healthcare	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
School Loans	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

Monthly Expenses

Account	Applicant	Co-Applicant	TOTAL
Rent	\$	\$	\$
Utilities (<i>gas, electric, oil</i>)	\$	\$	\$
Car Insurance	\$	\$	\$
Health Insurance	\$	\$	\$
Child Care	\$	\$	\$
Internet & Cable Service	\$	\$	\$
Cell Phone	\$	\$	\$
Landline Phone	\$	\$	\$
Business / Job Expenses	\$	\$	\$
Union Dues	\$	\$	\$
Other: _____	\$	\$	\$
Other: _____	\$	\$	\$
TOTAL	\$	\$	\$

12. DECLARATIONS

	Applicant	Co-Applicant
A. Do you have any outstanding judgments because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Have you declared bankruptcy within the past seven (7) years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
C. Have you had property foreclosed on in the past seven (7) years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
D. Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
E. Are you paying alimony or child support?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
F. Are you a U.S. citizen or permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered "yes" to any question A through E, and/or "no" to question F, please provide details on a separate sheet of paper.

The Fair Housing Act does not require that housing be made available to individuals whose tenancy would constitute a direct threat to the health or safety of other individuals or that would result in substantial physical damage to the property of other individuals. Nor are individuals who have been convicted of the illegal manufacture or distribution of a controlled substance protected under this law. However, a criminal record will not automatically disqualify you for a home with Habitat for Humanity of Beaver County.

Please answer the following questions for the applicant, co-applicant, dependants, and/or other adults who will live in the house. Please provide the name of the individual/s and their relation to the applicant and/or co-applicant.

- Has any household member abused the use of alcohol and/or drugs within the last three (3) years, resulting in an alcohol/drug related arrest or traffic violation? Yes No

Details: _____

- Has any household member ever been arrested and/or convicted? Yes No

Details: _____

- Is any household member subject to a lifetime registration under a state sex offender law? Yes No

Details: _____

- Has any household member violated a condition of probation, parole, or “fleeing to avoid prosecution or confinement” after conviction for a felony or misdemeanor? Yes No

Details: _____

- Has any member of the household been arrested for or convicted of manufacturing or producing Methamphetamine and/or any other illegal substance? Yes No

Details: _____

13. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity of Beaver County to evaluate my actual need for the Habitat homeownership program, my ability to repay the no-interest loan and other expenses of homeownership, and my willingness to be a partner through sweat equity and otherwise according to Habitat Beaver County policy.

I understand that the evaluation will include a credit check, employment verification, and personal visits. I also understand that Habitat for Humanity of Beaver County screens all applicants on the sex offender registry. By completing this application, I am submitting myself, the co-applicant, and all household persons 18 and over residing in the home to such an inquiry, as well as a criminal background check.

I have answered all the questions on this application truthfully and accurately, and if any of the information provided changes after submitting this application, I will supplement this application as applicable. I understand that if I have not answered the questions truthfully, accurately, or completely, or fail to supplement this application as necessary to maintain its accuracy and completeness, 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 and forfeit any rights or claims to a Habitat home.

The original or a copy of this application will be retained by Habitat for Humanity of Beaver County for the required length of time as established by federal and state record retention laws even if the application is not approved.

Applicant Signature	Co-Applicant Signature
Date	Date

Please 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.

14. 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 and/or grants 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 provide this information but are encouraged to do so. The law provides that a lender may not discriminate on the basis of this information nor on whether you choose to provide it or not. However, if you choose not to provide it, under federal regulations this lender is required to note ethnicity, race, and sex on the basis of visual observation or surname. The law also provides that a lender may not discriminate on the basis of age or marital status information provided in this application. If you do not wish to provide the information, please check the box below.

Lender must review the material to ensure that the disclosures satisfy all requirements to which the lender is subject under applicable state and federal laws.

Applicant	Co-Applicant
<input type="checkbox"/> I do not wish to provide any of the following information	<input type="checkbox"/> I do not wish to provide any of the following information
Race / National Origin (<i>you may select more than one</i>):	Race / National Origin (<i>you may select more than one</i>):
<input type="checkbox"/> American Indian or Alaska Native <i>Name of enrolled or principal tribe:</i> _____	<input type="checkbox"/> American Indian or Alaska Native <i>Name of enrolled or principal tribe:</i> _____
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander – <i>race:</i> _____ <i>For example: Fijian, Tongan, etc.</i>	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander – <i>race:</i> _____ <i>For example: Fijian, Tongan, etc.</i>
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Black or African American
<input type="checkbox"/> White	<input type="checkbox"/> White
<input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian – <i>race:</i> _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, etc.</i>	<input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian – <i>race:</i> _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, etc.</i>
<input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> I do not wish to provide this information
Ethnicity (<i>you may select more than one</i>):	Ethnicity (<i>you may select more than one</i>):
<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino – <i>Origin:</i> _____ <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino – <i>Origin:</i> _____ <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information
Sex:	Sex:
<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information
Marital Status:	Marital Status:
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (<i>incl. single, divorced, widowed</i>)	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (<i>incl. single, divorced, widowed</i>)



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Applicant / Homebuyer Signature Authorization

Date:

Applicant(s) / Homebuyer Name(s) <i>(Please print clearly)</i>	Applicant / Homebuyer Mailing Address

Applicant / Homebuyer Authorization				
<p>I hereby authorize Habitat for Humanity of Beaver County to verify my past and present employment and earnings records, bank accounts, mortgage loans, stock holdings, public assistance, and other asset balances that are needed to process my mortgage loan application. I further authorize Habitat Beaver County to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. (Subsequent consumer credit reports may be requested or used in connection with any update, renewal, or extension of the credit requested by this application. You will be informed whether any consumer credit report was requested, and if so, the name and address of the consumer-reporting agency which furnished the report.) It is understood that a copy of this form will also serve as an authorization. I also authorize that all or part of my application information may be re-verified and a consumer credit report requested as a final audit before my loan closes.</p> <p>The information Habitat Beaver County obtains is only to be used in the processing of my mortgage application and/or final audit of my mortgage loan.</p> <table data-bbox="129 1407 1461 1638" style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> _____ Applicant / Homebuyer Signature </td> <td style="width: 50%; border: none;"> _____ Date </td> </tr> <tr> <td style="border: none;"> _____ Co-Applicant / Homebuyer Signature </td> <td style="border: none;"> _____ Date </td> </tr> </table>	_____ Applicant / Homebuyer Signature	_____ Date	_____ Co-Applicant / Homebuyer Signature	_____ Date
_____ Applicant / Homebuyer Signature	_____ Date			
_____ Co-Applicant / Homebuyer Signature	_____ Date			

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will be kept confidential and not disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not, your application for approval as a prospective mortgagor or borrower may be delayed or rejected.





HOMEOWNERSHIP PROGRAM Survey

(This survey is optional and is not a requirement for the application)

How did you find out about the Habitat for Humanity of Beaver County homeownership program?

- Social Media (Facebook, Twitter, etc.)
- Habitat for Humanity of Beaver County website
- Churches – Name of Church: _____
- The Habitat Beaver County ReStore
- Schools – Which school: _____
- Housing Authority
- Community event – Which one: _____
- 211
- Daycare – Which one: _____
- Friends, Family, Word of Mouth
- Other – Please specify: _____

Were the Eligibility Guidelines and Requirements listed on our website and/or in the Application Information Packet (*i.e. income grid, application process, homeowner expectations, sweat equity policy, privacy policy*) clear and understandable?

- Yes
- No

If NO, please explain why: _____

