

Application Hanover Habitat Home Repair Program



Note: The applicant must have been a resident of Hanover County for at least 1 year and earn less than 50% of the Area Median Income. Applicant must live in and hold clear title to his/her home. Taxes and mortgage must be paid up to date. Approved applicants must pay for repairs (cost to be determined) before work can begin.

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.

1. APPLICANT INFORMATION

Applicant		Co-applicant			
Applicants Name: _____		Co-applicant's Name: _____			
Social Security Number: _____		Social Security Number: _____			
Phone: _____ Birthdate: ____/____/____		Phone: _____ Birthdate: ____/____/____			
Email: _____		Email: _____			
Present Address: _____		Number of years _____			
Street _____		Suite/Apt # _____			
City _____		State _____		Zip _____	
Others in the household:	Name	Age	Male	Female	Student (Fulltime)
	_____	_____	<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"/>
Did you or anyone in your household serve or is serving in the military?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is the homeowner, or anyone in the home, disabled?		<input type="checkbox"/> Yes <input type="checkbox"/> No			

2. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation or surname.

Applicant		Co-applicant		
<input type="checkbox"/> I do not wish to furnish this information		<input type="checkbox"/> I do not wish to furnish this information		
Race: (applicant may select more than one racial designation)		Race: (applicant may select more than one racial designation)		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian		<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian		
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino		Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino		
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male		Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male		

3. WILLINGNESS TO PARTNER

Are you or a relative willing to complete "sweat equity" hours? "Sweat equity" is the hours the applicant family contributes to assist Habitat to perform repairs on their home.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date Received: _____	Verified Annual Income: _____ % AMI: _____
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4. GROSS MONTHLY INCOME

Income Source	Applicant	Co-Applicant	Others in Household	Total
Wages	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
Total	\$	\$	\$	\$

5. DEBT

Account	Applicant			Co-Applicant		
	Monthly Payment	Unpaid Balance	Months Left to Pay	Monthly Payment	Unpaid Balance	Months Left to Pay
Mortgage	\$	\$		\$	\$	
Auto Loan	\$	\$		\$	\$	
Credit Card: _____ <small>(Type of card: Visa, MasterCard, etc.)</small>	\$	\$		\$	\$	
Medical	\$	\$		\$	\$	
Other: _____	\$	\$		\$	\$	
Total	\$	\$		\$	\$	

6. DESCRIPTION OF PROJECT

Description of project (if multiple tasks, list in order of importance):

Have you ever attempted to get a loan for these home repairs Yes No

If yes, what was the result? _____

Is there a church or other organization that may be willing to help with your repairs? Which one(s)? _____

7. REQUIRED DOCUMENTS TO BE COLLECTED

- Proof mortgage payments are up to date
- Proof real estate taxes are paid
- Proof of insurance
- Two most recent bank statements
- Two most recent pay/income stubs
- Two most recent tax returns

Max income limits – 50% of HUD Area Median Income

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person
\$29,120	\$33,280	\$37,440	\$41,600	\$44,920	\$48,250

8. AUTHORIZATION AND RELEASE

I hereby affirm that all information provided on this application is true and accurate. I authorize Hanover Habitat to conduct a sex offender and criminal background check on all adults in the home. I further understand that by completing this application, I am submitting myself to a credit check.

Applicant's Signature _____

Date _____

Co-applicant's Signature _____

Date _____

Include \$25 for EACH applicant in the household so that each adult's credit report can be obtained as part of the pre-qualification process. We can accept money orders or checks payable to Hanover Habitat for Humanity.

DISCLAIMER

Hanover Habitat for Humanity cannot perform repairs on homes where hazardous materials are present (i.e. Asbestos, lead, mold and radon).