



2015 Application for Homeownership

Have you Applied Before? Yes No

1. APPLICANT INFORMATION					
Applicant			Co-Applicant		
Applicant's Full Name			Co-Applicant's Full Name		
Social Security Number: _____			Social Security Number: _____		
Home Phone () _____			Home Phone () _____		
Cell Phone () _____			Cell Phone () _____		
Email Address: _____			Email Address: _____		
Age: _____			Age: _____		
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried			Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried		
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you currently in school? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you currently in school? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If "yes", when will you graduate?			If "yes", when will you graduate?		
Current Address (street, city, state, ZIP code)			Current Address (street, city, state, ZIP code)		
Number of years at this address: _____			Number of years at this address: _____		
Do you own this residence? <input type="checkbox"/> yes <input type="checkbox"/> no			Do you own this residence? <input type="checkbox"/> yes <input type="checkbox"/> no		
Are you paying rent? <input type="checkbox"/> yes <input type="checkbox"/> no			Are you paying rent? <input type="checkbox"/> yes <input type="checkbox"/> no		
Are you living in Section 8 housing? <input type="checkbox"/> yes <input type="checkbox"/> no			Are you living in Section 8 housing? <input type="checkbox"/> yes <input type="checkbox"/> no		
Previous Address (street, city, state, ZIP code)			Previous Address (street, city, state, ZIP code)		
Number of years at this address: _____			Number of years at this address: _____		
Did you own this residence? <input type="checkbox"/> yes <input type="checkbox"/> no			Did you own this residence? <input type="checkbox"/> yes <input type="checkbox"/> no		
Were you living in Section 8 housing? <input type="checkbox"/> yes <input type="checkbox"/> no			Were you living in Section 8 housing? <input type="checkbox"/> yes <input type="checkbox"/> no		
Please list all dependents/other people who will be living with you.					
Name	Social Security #	Age	Gender	Relationship to Applicant	Employed?
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> yes <input type="checkbox"/> no
FOR OFFICE USE ONLY - Do Not Write in This Space					
Date Received:			Application Received By:		

4. CURRENT EMPLOYMENT INFORMATION

Applicant's Employment Information

Name of Company _____
 Job Title/Job Description _____
 Address _____
 Date Started _____
 Supervisor's Name _____ Phone Number (_____)
 How are you paid? Hourly Salary Other (please explain) _____
 Base Pay: \$ _____
 How often do you get paid? Weekly Every 2 Weeks Twice a Month Monthly
 Other (please explain) _____
 Please specify any additional income you earn above your base pay _____

 How many hours a week do you work? _____
 Do you work year-round? yes no (please explain) _____

Please list any other jobs you have held in the past 12 months.

Employer	Position	# of Years Worked	Reason for Leaving (if no longer working there)	Monthly Pre-Tax Pay
				\$
				\$
				\$
				\$
				\$

Co-Applicant's Employment Information

Name of Company _____
 Job Title/Job Description _____
 Address _____
 Date Started _____
 Supervisor's Name _____ Phone Number (_____)
 How are you paid? Hourly Salary Other (please explain) _____
 Base Pay: \$ _____
 How often do you get paid? Weekly Every 2 Weeks Twice a Month Monthly
 Other (please explain) _____
 Please specify any additional income you earn above your base pay _____

 How many hours a week do you work? _____
 Do you work year-round? yes no (please explain) _____

Please list any other jobs you have held in the past 12 months.

Employer	Position	# of Years Worked	Reason for Leaving (if no longer working there)	Monthly Pre-Tax Pay
				\$
				\$
				\$
				\$
				\$

Employment Information for Other Family Members

If there are any other working persons over the age of 18 who will be living with you, please list their employment information below.

Name	Employer	Position	Date Started	Monthly Pre-Tax Pay
				\$
				\$
				\$
				\$
				\$

5. INCOME OTHER THAN EMPLOYMENT

Please list any additional income your family receives. If more than one person in your home earns the same type of benefit, add up the total amount received by all family members.

Type of Income	Person(s) Receiving the Benefit	Total Amount Received Per Month
Food Stamps		\$ <i>per month</i>
Disabilty (SSDI)		\$ <i>per month</i>
SSI		\$ <i>per month</i>
Social Security		\$ <i>per month</i>
Pension		\$ <i>per month</i>
Child Support (optional)		\$ <i>per month</i>
Other(specify):		\$ <i>per month</i>
Other(specify):		\$ <i>per month</i>

6. ASSETS AND LIABILITIES

Bank Account Information

Name of Bank/Credit Union	Owner of Account	Account Number	Type of Account	Balance
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Assets and Property

Please list any additional assets you own including any real estate, pensions, 401K/IRA accounts, stocks/bonds or other investments.

Asset Name	Owner of Asset	Asset's Current Value	Additional Information (if needed)
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Vehicles: Please list all vehicles in use, whether you own them or not.

Make/Brand	Year	Owner(s) of Vehicle	Are you making payments? (Y/N)
			<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> yes <input type="checkbox"/> no
			<input type="checkbox"/> yes <input type="checkbox"/> no

Debt

Please list ALL your debt, including car payments, credit cards, mortgages, loans, hospital/medical bills, child support, student loans and any business or store accounts (Macy's, JC Penny, Best Buy, etc.). Include debt you are not making payments on. Be as honest as possible; All past and present debt will be listed on your credit report, which we will have for each application. If you are unsure of your outstanding balance, please contact the lender for your total outstanding debt.

Company Name	Type of Debt	Min. Monthly Payment	Balance Owed	Months Left to Pay
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

Have you ever worked with a credit counseling agency? yes no
 If yes, what organization did you work with? _____ What year(s) did you work with them? _____

7. HOUSING EXPENSE INFORMATION

Please estimate your expenses as closely as you can. All approved Habitat families will need to create a budget. The below list will help to identify your spending habits and help us understand how much of a mortgage you can afford.

Expense	Monthly Payment	Comments (if needed)
Rent or Mortgage:	\$	
Gas/Heating	\$	
Electricity	\$	
Water and Sewage	\$	
Groceries	\$	
Cable	\$	
Internet	\$	
Telephone (land line)	\$	
Cellular Phone(s)	\$	
Clothing	\$	
School Expenses	\$	
Eating out	\$	
Entertainment	\$	
Child Care	\$	
Personal Care (Hair, Nails, etc)	\$	
Health Insurance	\$	
Medical (copay, medicine, etc)	\$	
Pet Care	\$	
Laundry	\$	
Car maintenance/gasoline	\$	
Auto Insurance	\$	
Life Insurance	\$	
Other:	\$	
Other:	\$	

Total Monthly Expenses: \$ _____

8. PERSONAL DECLARATIONS

	Applicant	Co-Applicant
1. Have you ever owned a home before, in the US or elsewhere?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you have debt because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you declared bankruptcy in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are you in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you ever had a loan foreclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. In the past 12 months, have you had any loans or credit cards over 60 days past due?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Have you ever had a car, furniture or home repossessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Have you ever been evicted from a rental property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Are you a co-signer on a loan for a person not listed on this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Do you have to pay alimony, child support or spousal support?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Are you a United States Citizen or permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Answering "yes" to these questions does not automatically disqualify you. If you answered "yes" to any question 1 through 11 however, please use the below space to explain. Attach a separate piece of paper if necessary.

9. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to be a partner family. I understand that the evaluation will include, without limitation, personal visits, a credit check, criminal background and sexual offender checks and employer & personal verification. I have answered all the questions on this application truthfully. I understand that if I have not answered all the questions truthfully, my application may be denied and that even if I have already been selected to purchase a Habitat home, I may be disqualified from the program at Habitat for Humanity's sole discretion. The original copy of this application will be retained by Habitat for Humanity, even if the application is not approved.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

10. CHECKLIST

The following is a list of information which must be received to complete your application for homeownership with Habitat for Humanity of Greater Pittsburgh. There is a \$15.00 processing fee due at the time of application. We can not process an application unless we receive ALL of the information listed below. Incomplete applications will be rejected. Please do not give us originals of your personal documents, as we may not be able to return them to you. If you need assistance in completing your application, please contact our office and we'll be happy to answer any questions.

Application Attachments: Check box when attached

Attach a \$15 money order or cashier's check to cover credit inquiry and processing

Please make cashier's check or money order payable to "Habitat for Humanity of Greater Pittsburgh."

- If you rent your residence, attach a copy of your lease and a copy of your money order or cancelled check for last month's rent.
- Attach proof of ALL income brought in by members of your household (Wages, Food Stamps, Social Security, SSI, Disability, Pension, Alimony, Child Support or any other income).
- Attach copies of your most recent utility bills (gas, electric, water & sewage).

For each family member over the age of 18, please attach the following information:

- Attach three current, consecutive pay stubs, for any job you currently work.
- Attach copies of previous two year's tax returns. We need Form 1040, 1040EZ or an official tax transcript from the IRS; W2s are NOT acceptable. If you do not have a copy of your tax return, you can request a free copy of your transcript by calling the IRS at 1 (800) 908-9946.
- Attach the last two months of bank statements for each account open in your name.

HOW DO I TURN IN MY APPLICATION?

1. Make sure that you have all the required documents. WE CANNOT PROCESS INCOMPLETE APPLICATIONS. Call Habitat if you have any questions.
2. Please do not give us originals of your personal documents. We may not be able to return them to you.
3. **Call Habitat at 412-351-0512 x10 for an appointment to turn in your documents and complete your application**
4. Application intake will be held at the offices of Habitat for Humanity of Greater Pittsburgh.
5. Your application for homeownership will be reviewed by a committee of volunteers to determine your eligibility for the program. If your application appears to fall within our guidelines, Habitat's Family Services Department will contact you to schedule your home visit.
6. If your application is approved, you will meet with Habitat for Humanity of Greater Pittsburgh to discuss the next steps.

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.

