

II. CO-APPLICANT

Name: _____ Birth Date: _____ SSN: _____

List any previous names: _____

Contact Information:

Street Address _____ Apt. # _____ P.O. Box # _____

City _____ State _____ Zip _____

Telephone: Home _____ Work _____ Email: _____

What is the best time (day of week, time) to reach you? _____

Circle one

Are you a U.S. citizen or a legal permanent resident? Yes No
Please attach a copy of one of the following: Colorado driver's license or ID card, a passport or green card.

Have you been a Teller County resident for at least the past 12 months? Yes No

If No, have you lived in an area contingent to Teller County and worked in Teller County, for at least the past 12 months? Yes No

Do you know anyone that is currently on the Habitat Board of Directors? Yes No
If Yes, who? _____

MARITAL STATUS: Please indicate your marital status:

Single____ Married____ Widowed ____ Separated____ Divorced (with final divorce settlement)____ Divorce In Process ____

If divorce is in process, please explain current proceedings _____

III. Others in Household:

Please indicate others living in the household (for example: children, relatives, friends)

Name	Birth Date	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



IV. FINANCIAL INFORMATION
INCOME

List all household gross monthly income from *Employment* and *Non-Employment* sources.

	<i>Applicant's Gross Monthly Income</i>	<i>Co-Applicant's Gross Monthly Income</i>	<i>Other Household Members' Gross Monthly Income</i>
<i>Employment Income</i>			
1P st Job			
2 nd Job			
3 rd Job			
<i>Indicate sources and amounts of non-Employment Income (Quest, AFDC, federal housing subsidies, child support, alimony, disability, social security, trust income, etc. Do not include unemployment.)</i>			

ASSETS

List all assets over \$300 that you own (not personal belongings such as clothing, furniture, etc.) and the value of each asset. For automobiles, include the make, model and year.

Asset	Current Value
<i>Cash</i>	
<i>Checking/Savings Accounts</i>	
<i>Certificates of Deposit</i>	
<i>Trust Funds</i>	
<i>Pension Funds/401(k)s, Retirement Savings</i>	
<i>Stock/Bond Certificates</i>	
<i>Real Estate/Land</i>	
<i>Other (Specify)</i>	
Cars, Trucks, Motorcycles, Snowmobiles, RVs, ATVs, Boats, Camping Trailers, Mobile Homes, Trailers, etc.	
Description	Make/Model
	Year
	Approximate Value

How will you pay the costs at closing, i.e. the first year's insurance payment, and any other expenses due at that time (approx. \$2,000)? _____

DEBTS AND MONTHLY EXPENSES

Debts/Expenses	Monthly Payment / Expense	Months Past Due (if any)	Current Balance Owed	Name of Creditor
<i>Rent or Mortgage</i>				
<i>Total of Vehicle Payments</i>				
<i>Child Support/Spousal Maintenance/Alimony</i>				
<i>Credit Card #1</i>				
<i>Credit Card #2</i>				
<i>Credit Card #3</i>				
<i>Credit Card #4</i>				
<i>Department Store Credit Cards</i>				
<i>Bank Loans</i>				
<i>Personal Loans</i>				
<i>Student Loans</i>				
<i>Judgments or Liens</i>				
<i>Back Income Taxes Owed (Fed & State)</i>				
<i>Other Debt - please specify on back of form</i>				
TOTALS				

Do you have any other debt or expenses not listed above? Yes No

Do you have any special or unusual financial circumstances (For example: debt owed to friends or relatives, use of a friend's or relative's credit card, etc.) Yes No

If the answer to either or both of these questions is yes, please elaborate below. Continue on the back of this form if you need more space.

Describe your debt	Amount Owed	Who is it owed to?	When will it be repaid?

Has either the applicant or co-applicant:	Yes or No?
Ever owned a home? If Yes, do you still own the home? Yes No If No, in what <i>month</i> and <i>year</i> did you cease to own the home? Month Year	
Had anything repossessed or foreclosed in the last three years?	
Filed for bankruptcy in the last two years? <i>If yes, is that bankruptcy final? Yes No</i>	
Had wages or bank accounts garnished, had a lien on a tax refund, or had a lien on your property because of a debt you owed? <i>If yes, please elaborate on the back of this form.</i>	
Been a party to a lawsuit? <i>If yes, describe the nature of the lawsuit on the back of this form.</i>	
Reason to believe their financial situation will improve or deteriorate within the next few years? <i>If yes, please describe why you believe this on the back of this form.</i>	
Been convicted of a crime, excluding minor traffic offenses? <i>If Yes, please explain.</i>	
Ever failed to file a tax return? <i>If Yes, please elaborate on the back of this form.</i>	
Or any member of your household been required to register as a sex offender or been restricted in where they live because of a criminal conviction? <i>If Yes, please describe conditions of registration and provide a copy of any judgment that restricts where you or the household member may live.</i>	

Answering “yes” to these questions does not automatically disqualify you.

V. PARTNERSHIP

To be considered for a Habitat home, you and your family must be willing to complete a minimum of 300 hours of “sweat equity”. Your help in building your home and the homes of others is called “sweat equity,” and may include helping with construction, painting, cleaning the lot, working at Habitat support functions, or other approved activities.

Please sign below if you are willing to complete the required “sweat equity hours.

Applicant Signature

Co-Applicant signature

General Authorization and Release:

I understand 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 for homeownership and my willingness to be a partner family. I understand that the evaluation will include personal visits, a credit check, personal reference checks, criminal background checks, employment and landlord verification and verification of any other pertinent information presented in this application and in any additional application materials required by Habitat for Humanity. I have answered all the questions on this Application truthfully. I understand that if I have not answered the questions truthfully, my application will be denied. The original or a 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

VI. Applicant's Employment History (Last three years)

Please list your employers' names, addresses and phone numbers. An employment verification form may be mailed to them from our office. This information is required to complete your application. By listing these names, you authorize Habitat for Humanity to contact these individuals for employment verification.

(Most recent employment first)

1.	Beginning Date	Ending Date	Employer	Job Title		
	Employer's Street Address		City	State	Zip	
	Supervisor's Name		Supervisor's Telephone #	May we contact this employer?	Yes	No
2.	Beginning Date	Ending Date	Employer	Job Title		
	Employer's Street Address		City	State	Zip	
	Supervisor's Name		Supervisor's Telephone #	May we contact this employer?	Yes	No
3.	Beginning Date	Ending Date	Employer	Job Title		
	Employer's Street Address		City	State	Zip	
	Supervisor's Name		Supervisor's Telephone #	May we contact this employer?	Yes	No
4.	Beginning Date	Ending Date	Employer	Job Title		
	Employer's Street Address		City	State	Zip	
	Supervisor's Name		Supervisor's Telephone #	May we contact this employer?	Yes	No
5.	Beginning Date	Ending Date	Employer	Job Title		
	Employer's Street Address		City	State	Zip	
	Supervisor's Name		Supervisor's Telephone #	May we contact this employer?	Yes	No

 Applicant's Signature

 Date

VII. CO-Applicant's Employment History (Last three years)

Please list your employers' names, addresses and phone numbers. An employment verification form may be mailed to them from our office. This information is required to complete your application. By listing these names, you authorize Habitat for Humanity to contact these individuals for employment verification.

(Most recent employment first)

1. _____
 Beginning Date Ending Date Employer Job Title

 Employer's Street Address City State Zip

 Supervisor's Name Supervisor's Telephone # May we contact this employer? Yes No

2. _____
 Beginning Date Ending Date Employer Job Title

 Employer's Street Address City State Zip

 Supervisor's Name Supervisor's Telephone # May we contact this employer? Yes No

3. _____
 Beginning Date Ending Date Employer Job Title

 Employer's Street Address City State Zip

 Supervisor's Name Supervisor's Telephone # May we contact this employer? Yes No

4. _____
 Beginning Date Ending Date Employer Job Title

 Employer's Street Address City State Zip

 Supervisor's Name Supervisor's Telephone # May we contact this employer? Yes No

5. _____
 Beginning Date Ending Date Employer Job Title

 Employer's Street Address City State Zip

 Supervisor's Name Supervisor's Telephone # May we contact this employer? Yes No

 Co-Applicant's Signature Date



X. SUPPORTING DUCUMENTATION

If your application passes the initial screening you will be required to submit the following additional documentation.

1. Tax returns for the last three years.
2. As applicable, 3 months of:
 - a. pay stubs or a letter from your employer verifying your income.
 - b. bank statements for each checking and savings account you or members of your household have.
 - c. gas, propane, electric, water and sewer bills (unless included in your rent payment).
 - d. telephone bills, cell phone bills and pager bills.
 - e. statements for each credit card you have.
3. A copy of your lease and 6 months of rent receipts or a letter from your landlord stating your rent payment history.
4. Doctor and hospital bills for the past 12 months.
5. Copies of any divorce decree or child support requirements payable to or payable by you or a household member.
6. Copies of any court orders, liens or legal requirements to pay restitution or a judgment against you or a household member.
7. Copies of any bankruptcy decree for you or a household member.