



## **Enstriksyon Aplikasyon** **South Bay**

Mèsi pou enterè ou nan Pwogram Pwopriyetè Kay avec Habitat for Humanity Greater Palm Beach County. Nou ap aksepte **Aplikasyon yo pral evalye sou yon baz premye soumèt, premye kalifye, premye sèvi.**

Tanpri konplete etap sa yo pou kontinye ak aplikasyon ou.

Revize feyè 'Kalifikasyon pou Pwopriyetè Kay' nan paj 2 nan pake sa a pou detèmine si ou kalifye:

1. è kalifikasyon yo epi si ou enterese aplike.
2. Konplete fòm 'Seleksyon Lote' nan paj 3 pou konfime ke ou te vizite te'a epi ou ta renmen aplike pou lote vid kote Habitat pral bati kay la.
3. Fè kopi tout dokiman ki nan lis Dokiman' nan paj 4.
4. Konplete tout seksyon aplikasyon papye a nan paj 5-12.
5. Soumèt aplikasyon an ak dokiman yo nan yon anvlòp anvan **Aplikasyon yo pral evalye sou yon baz premye soumèt, premye kalifye, premye sèvi.**

### **Kijan pou soumèt aplikasyon ou:**

Pa lapòs oswa, depoze nan bwat denavnan office la apare 5pm Lendi jiska Varandredi.

Adrès: Habitat for Humanity Greater PBC  
6758 N Military Trail # 301 Riviera Beach, FL 33407

Si ou gen nenpòt kesyon, tanpri kontakte Sèvis Met Kay nan 561-819-6070 ext 977

oswa [homeownerservices@habitatgreaterpbc.org](mailto:homeownerservices@habitatgreaterpbc.org)

**Nou p'ap aksepte aplikasyon pa imèl.**

Téléfono: 561-819-6070 ext:977

[www.habitatgpb.org](http://www.habitatgpb.org)

# Reyalize Rèv la! Pwopriyetè kay

Habitat for Humanity Greater Palm Beach County kolabore ak premye fwa pwopriyetè kay pou konstwi kay ki an sekirite, desan, ak abòdab. Kay yo konstwi ansanm lè yo itilize travay volontè, kontraktè pwofesyonèl, ak materyèl ki donnen oswa achte lokalman.

Pwopriyetè kay nan lavni yo oblije envesti yon minimòm de 300 èdtan patenarya nan travay pwòp yo nan konstriksyon kay yo anvan yo kalifye pou achte kay yo lè yo itilize yon prè san enterè pou 30 ane.

Kijan ou ka Kalifye pou Pwopriyetè Kay? Pou kalifye pou vin yon met kay avec Habitat for Humanity ou dwe satisfè twa kondisyon prensipal yo:

## Bezwen pou Abri:

- Dwe yon premye fwa achte kay (pa gen kay nan 3 dènye ane yo).
- Ap viv nan kondisyon twòp moun, substandard, tanporè, oswa lojman piblik; oswa ap peye yon pri ki pa abòdab pou lwaye.
- Kounye a ap peye plis pase 30% nan salè yo pou lwaye.
- Aplikant/Kon-aplikant dwe montre yon bezwen pou abri.
- Pa kapab jwenn lojman adekwa nan mache prive a.

## Kapasite pou Peye:

- Mete yon kont ekonomi.
- Aplikant/Kon-aplikant dwe gen yon istwa kredi akseptab.
- Aplikant/Kon-aplikant dwe montre yon kapasite pou remèt yon prè ipotekè san enterè pou 30 ane.
- Fwaye yo dwe tonbe nan 30% a 80% nan revni mwayèn zòn lan jan HUD detèmine chak ane. HUD detèmine chak ane (\*pou kalifye, chak zòn kay Habitat PBC ka gen yon kondisyon revni espesifik).

Family Size	Minimum Income	Maximum Income
1	\$24,550	\$65,450
2	\$28,050	\$74,800
3	\$31,550	\$84,150
4	\$35,050	\$93,500
5	\$37,900	\$101,000
6	\$43,150	\$108,500
7	\$48,650	\$115,950
8	\$54,150	\$123,450

Limit Revni HUD soti nan mwa Mas, 2025

## Volonte pou Patenarya:

- Pou kesyon konsènan kalifikasyon pou pwopriyetè kay, tanpri kontakte:
- Tout manm fwaye yo dwe sitwayen ameriken oswa rezidan pèmanan.
- Envesti yon minimòm de 300 "èdtan patenarya" (travay volontè).
- Asiste reyinyon chak mwa, klas edikatif sou pwopriyetè kay, ak sesyon konsèy sou bidjè ak kredi
- Aplikant/Kon-aplikant dwe vle antre nan yon patenarya 30 ane ak Habitat Greater PBC,
  - ap viv nan zòn kote nou ap bati kounye a.



**Habitat  
for Humanity®**  
Greater Palm Beach County



Pou nenpòt kesyon  
sou kalifikasyon pou  
vin pwopriyetè kay,  
tanpri kontakte:  
561-819-6070 ext  
977

## FÒM SELEKSYON LOTE

**Enstriksyon:** Nou gen yon sèl tè vid kounye. Ki disponib pou achte nan kote Habitat pral bati kay la. Adrès la nan lis anba a. Anvan ou soumèt yon aplikasyon, tanpri vizite sit kay la an pèsòn.

**Ou DWE vizite tè a si ou enterese anvan ou soumèt fòm sa.**

Check Mark	Address	City	Zip Code	Bedroom/Bath	Type of Home
	145 NW 10 <sup>th</sup> Ave	South Bay	33493	3 bed / 2 bath	New Construction

\_\_\_\_\_ Mwen enterese viv nan kote ki nan lis anwo a.

\_\_\_\_\_ Mwen pa enterese viv nan kote ki nan lis anwo a epi mwen konprann ke mwen pa ka aksepte nan Pwogram Pwopriyetè Kay la.

Rekonesans:

Lè mwen siyen anba a, mwen konprann ke aplikasyon sa a pou Pwopriyetè Kay se SÈLMAN! pou lote ki nan lis anwo a. Mwen te vizite sit kay la fizikman epi mwen ta renmen aplike pou achte kay sa a.

\_\_\_\_\_  
(Siyati Aplikan an)

\_\_\_\_\_  
(Ekri non ou)

\_\_\_\_\_  
(Dat)

\_\_\_\_\_  
(Siyati Ko-Aplikan an)

\_\_\_\_\_  
(Ekri non ou)

\_\_\_\_\_  
(Dat)

## LIS DOKIMAN POU APLIKASYON PWOGRAM ACHE KAY

Dokiman ki anba yo nesèsè pou kontinye nan pwosesis aplikasyon pou Pwogram Achte Kay avec Habitat for Humanity Greater Palm Beach County. Tanpri soumèt dokiman sa yo ak rès Pake Kalifikasyon Inisyal ou.

### Aplikant Ko-Aplikant

\_\_\_\_\_ Kopi lisans chofè pou chak Aplikant/Ko-Aplikant ak adrès aktyèl

Tout manm fwaye yo dwe sitwayen ameriken oswa rezidan pèmanan.

Prèk sitwayèn ameriken oswa rezidans pou chak Aplikant/Ko-Aplikant ak nenpòt lòt moun ki pral viv nan kay la.

- Sitwayen: Prèk akseptab se yon kopi sètifika nesans ki gen yon sele ofisyèl, Sètifika Sitwayèn Ameriken/Fòm N-550 oswa N-561, Sètifika Natiralizasyon/Fòm N-550 oswa N-570, kopi paspò ameriken.
- Rezidan: Si ou pa yon sitwayen ameriken, prèk akseptab se kopi Kat Rezidan Pèmanan oswa Kat Resi Enskripsyon Etranje.

\_\_\_\_\_ Kopi Kat Sosyal Sekirite pou nenpòt Aplikant/Ko-Aplikant

\_\_\_\_\_ Kopi dènye 30 jou fich peye pou tout travay pou aplikant/ko-aplikant ak tout manm granmoun k ap travay nan kay la

\_\_\_\_\_ Prèk tout lòt revni: lèt prim, sipò pou timoun, ak revni sekirite sosyal pou tout manm kay la

\_\_\_\_\_ Dènye 3 mwa deklarasyon la bank pou tout moin ki gen kont, a tout paj pou Aplikant/Ko-Aplikant

\_\_\_\_\_ Kopi kontra lwaye aktyèl (si sa aplikab) pou Aplikant/Ko-Aplikant

\_\_\_\_\_ Kopi dènye deklarasyon sèvis piblik (elektrik, dlo ak/oswa egou) pou Aplikant/Ko-Aplikant

\_\_\_\_\_ Kopi deklarasyon taks 2023 ak 2024 pou Aplikant/Ko-Aplikant

\_\_\_\_\_ Kopi W2s/1099 2023 ak 2024 pou Aplikant/Ko-Aplikant

\_\_\_\_\_ Chèk oswa lòd lajan pou frè chèk kredi. Lajan kach pa akseptè. \$75 pou yon sèl aplikant. \$150 pou aplikant/ko-aplikant. Fè chèk/ money order'a peyab a Habitat for Humanity Greater Palm Beach County. Sou chèk/money order an ekri non konplè, siyati ak adrès aktyèl Aplikant/Ko-Aplikant

### Rekonesans

Aplikasyon ou pral konsidere kòm enkonplè si ou pa soumèt tout dokiman ki nesèsè sou lis ki anwo a. Ou dwe fè kopi dokiman ou anvan ou soumèt aplikasyon ou, Habitat pa kapab bay kopi.

Mwen konprann ke aplikasyon mwen an p ap konsidere kòm konplè jiskaske tout dokiman ki nesèsè yo soumèt.

Siyati Aplikan an \_\_\_\_\_ Dat \_\_\_\_\_

Siyati Ko-Aplikan an \_\_\_\_\_ Dat \_\_\_\_\_



**2025 South Bay**  
**Applications will be evaluated on first**  
**submitted, first qualified, first served basis**

# 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.

**Dear Applicant:** Please complete this application for the Habitat for Humanity homeownership program truthfully, completely and accurately. All information you include on this application will be maintained in accordance with our privacy policy.

- Type of credit**
- ☐ I am applying for **individual credit**.
- ☐ I am applying for **joint credit**. Total number of borrowers: \_\_\_\_\_
- ☐ Each borrower intends to apply for joint credit. **Your initials:** \_\_\_\_\_

### 1. APPLICANT INFORMATION

Applicant	Co-applicant																																																
<b>Applicant's name:</b> _____	<b>Co-applicant's name:</b> _____																																																
<b>Alternative and former names:</b> _____	<b>Alternative and former names:</b> _____																																																
<b>Email:</b> _____	_____																																																
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Age _____ Date of birth (mm/dd/yyyy) _____	Age _____ Date of birth (mm/dd/yyyy) _____																																																
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<b>Dependents and others who will live with you:</b>	<b>Dependents and others who will live with you (not listed by co-applicant):</b>																																																
<table border="1"><thead><tr><th>Name</th><th>Age</th><th>Male</th><th>Female</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>	Name	Age	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"/>	<table border="1"><thead><tr><th>Name</th><th>Age</th><th>Male</th><th>Female</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>	Name	Age	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"/>
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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																																																
_____	_____																																																
Number of years: _____	Number of years: _____																																																
<b>If you have lived at your present address for less than two years, complete the following, for all addresses during the past two years:</b>																																																	
Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent	Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent																																																
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Date received: _____	Date of selection committee approval: _____																																																
Date of notice of incomplete application letter: _____	Date of board approval: _____																																																
Date of adverse action letter: _____	Date of partnership agreement: _____																																																

### 1B. MILITARY SERVICE

Did you (or your deceased spouse) serve, or are you currently serving, in the United States Armed Forces?

(Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, Reserve or National Guard) ☐ Yes ☐ No

If yes, check all that apply:

- ☐ Currently serving on active duty with projected expiration date of service/tour \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mm/dd/yyyy)
- ☐ Currently retired, discharged, or separated from service
- ☐ Only period of service was as a non-activated member of the Reserve or National Guard
- ☐ Surviving spouse

Is anyone else in your household serving, or did they serve, in the United States Armed Forces? ☐ Yes ☐ No

If yes, check all that apply:

- ☐ Currently serving on active duty with projected expiration date of service/tour \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (mm/dd/yyyy)
- ☐ Currently retired, discharged, or separated from service
- ☐ Only period of service was as a non-activated member of the Reserve or National Guard

### 2. WILLINGNESS TO PARTNER

To be considered for the Habitat homeownership program, you and your household members must be willing to complete a certain number of partnership hours, which may include hours spent helping to build your home and the homes of others, attending homeownership classes, and/or other approved activities.

#### I AM WILLING TO COMPLETE THE REQUIRED PARTNERSHIP HOURS:

	Yes	No
Applicant	<input type="checkbox"/>	<input type="checkbox"/>
Co-applicant	<input type="checkbox"/>	<input type="checkbox"/>

### 3. PRESENT HOUSING CONDITIONS

Currently, are you: ☐ Renting ☐ Rent-free ☐ Own

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

Other rooms in the place where you are currently living: ☐ Kitchen ☐ Bathroom ☐ Living room ☐ Diningroom

Other (please describe): \_\_\_\_\_

In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat home?

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**If you rent your current residence, please supply a copy of your lease and a copy of the most recent money order receipt, bank statement or canceled rent check to evidence rent payment.**

Name, address and phone number of current landlord:

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### 4. PROPERTY INFORMATION

☐ I do not own any real estate (move to Section 5).

If you own your residence, what is your monthly mortgage payment (including taxes, insurance, etc.)?

\$ \_\_\_\_\_ /month Unpaid balance \$ \_\_\_\_\_

Do you own land other than your residence? ☐ No ☐ Yes  
Monthly payment (including taxes, insurance, etc.)

\$ \_\_\_\_\_

If you wish your property to be considered for building your Habitat home, please attach the deed, any existing appraisal and information about any liens.  
**Note:** A separate approval process will apply with respect to any such requests, as each parcel of land is unique and may not be suitable for building on through the Habitat program.

### 5. EMPLOYMENT INFORMATION

Applicant		Co-applicant	
<input type="checkbox"/> Does not apply.		<input type="checkbox"/> Does not apply.	
Name and address of <b>CURRENT</b> employer:	Start date (mm/dd/yyyy):	Name and address of <b>CURRENT</b> employer:	Start date (mm/dd/yyyy):
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
If working at current job less than one year, complete the following information.			
Name and address of <b>PREVIOUS</b> employer:	Years on this job:	Name and address of <b>PREVIOUS</b> employer:	Years on this job:
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
<input type="checkbox"/> Check if you are the business owner or are self-employed. <input type="checkbox"/> I have an ownership share of less than 25%. <input type="checkbox"/> I have an ownership share of 25% or more. Monthly income (or loss) \$_____			<b>PLEASE NOTE:</b> Self-employed applicants will be required to provide additional documents such as tax returns and financial statements.

### 6. MONTHLY INCOME

Income source	Applicant	Co-applicant	Others in household	Total
Salary/wages (gross)	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Housing voucher (e.g., Section 8)	\$	\$	\$	\$
Unemployment benefits	\$	\$	\$	\$
VA compensation	\$	\$	\$	\$
Retirement (e.g., pension)	\$	\$	\$	\$
Military entitlements	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

### HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE

Name	Income source	Monthly income	Date of birth

## 7. SOURCE OF DOWN PAYMENT AND CLOSING COSTS

Where will you get the money to make the down payment or pay for closing costs (for example, savings or gifts from family member or others; any grants for which you have or intend to apply)? If you borrow the money, whom will you borrow it from, and how will you pay it back?


## 8. ASSETS

Type of asset and name of bank, savings and loan, credit union, retirement account, etc. (Do not include land here.)	Address	City, state	ZIP	Account number	Current balance/ value/vested amount (if applicable)
					\$
					\$
					\$
					\$
					\$
					\$
					\$

## 9. LIABILITIES AND EXPENSES

TO WHOM DO YOU OWE MONEY?	Applicant			Co-applicant		
Account	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Auto loan	\$	\$		\$	\$	
Installment (e.g., boat, personal loan)	\$	\$		\$	\$	
Lease (e.g., furniture, appliances — includes rent-to-own)	\$	\$		\$	\$	
Alimony/separate maintenance	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Revolving (e.g., credit cards)	\$	\$		\$	\$	
Student loan debt	\$	\$		\$	\$	
Open 30 days (balance paid monthly, e.g., travel card)	\$	\$		\$	\$	
Medical debt	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
<b>Total</b>	<b>\$</b>	<b>\$</b>		<b>\$</b>	<b>\$</b>	

## MONTHLY EXPENSES

Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities (electricity, water, gas)	\$	\$	\$
Insurance (rental, car, health, etc.)	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$



Land line	\$	\$	\$
Business expenses	\$	\$	\$
Union dues	\$	\$	\$
Transportation expense (gas, bus pass, vehicle upkeep, etc.)	\$	\$	\$
Food and essential supplies	\$	\$	\$
Entertainment	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

## 10. DECLARATIONS

Please check the box beside the word that best answers the following questions for you and the co-applicant.	Applicant	Co-applicant
a. Are there 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 years? If YES, identify the type(s) of bankruptcy: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had any property foreclosed upon in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you party to a lawsuit in which you potentially have any personal financial liability?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Have you conveyed title to any property in lieu of foreclosure or completed a pre-foreclosure sale or short sale (where the lender agreed to accept less than the outstanding mortgage balance due) within the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Are you a co-signer or guarantor on any debt of loan that is not disclosed on this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. 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
<b>Note:</b> If you answered "yes" to any question a through g, or "no" to Question h, please explain on a separate piece of paper.		

## 11. AUTHORIZATION, AGREEMENT AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat homeownership program, my ability to repay an affordable loan and other expenses of homeownership, and my willingness to be a partner through sweat equity and otherwise according to Habitat for Humanity policy.

I understand that the evaluation will include personal visits, a credit check and employment verification (if applicable). I have answered all the questions on this application truthfully and accurately, and if any of the information provided changes after I submit 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 even if the application is not approved.

If this application is created as (or converted into) an "electronic application," I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable federal and/or state electronic transaction laws. I intend to sign and have signed this application either using my: (a) electronic signature or (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.

I also understand that Habitat for Humanity screens all applicants on the sex offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

**Applicant signature**

**Date**

**Co-applicant signature**

**Date**

X \_\_\_\_\_ X \_\_\_\_\_

**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.

## 12. RIGHT TO RECEIVE COPY OF APPRAISAL

This is to notify you that if you qualify for the homeownership program and complete the program requirements, we may order an appraisal to determine the value of a home that you may be eligible to purchase, and we may charge you for this appraisal. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close.

**Applicant's name** \_\_\_\_\_ **Co-applicant's name** \_\_\_\_\_

### 13. DEMOGRAPHIC INFORMATION

#### PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW:

The purpose of collecting this information is to help ensure that all applicants are being treated fairly, that the housing needs of communities and neighborhoods are being fulfilled, and to otherwise evaluate our programs and report to our funders. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex and race) in order to monitor our compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to provide this information but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." **The law provides that we may not discriminate** on the basis of this information or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, federal regulations require us to note your ethnicity, sex and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

Applicant	Co-applicant
<b>Ethnicity (check one or more):</b> <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, and so on.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information	<b>Ethnicity (check one or more):</b> <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, and so on.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information
<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information	<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information
<b>Race (check one or more):</b> <input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe:</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, and so on.</i> <input type="checkbox"/> Black or African American <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, and so on.</i> <input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information	<b>Race (check one or more):</b> <input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe:</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, and so on.</i> <input type="checkbox"/> Black or African American <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, and so on.</i> <input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information

To be completed only by the person conducting the interview		
Was the ethnicity of the Borrower collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Was the sex of the Borrower collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Was the race of the Borrower collected on the basis of visual observation or surname? <input type="checkbox"/> Yes <input type="checkbox"/> No		
This application was taken by: <input type="checkbox"/> Face-to-face interview (included electronic media w/video component) <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	Interviewer's name (print or type)	Interviewer's phone number
	Interviewer's signature	Date

## 14. UNMARRIED ADDENDUM

### FOR BORROWER SELECTING THE UNMARRIED STATUS

**Lender instructions for using the Unmarried Addendum:** The lender may use the Unmarried Addendum only when a borrower selected "Unmarried" in Section 1 and the information collected is necessary to determine how state property laws directly or indirectly affecting creditworthiness apply, including ensuring clear title. For example, the lender may use the Unmarried Addendum when the borrower resides in a state that recognizes civil unions, domestic partnerships or registered reciprocal beneficiary relationships or when the property is located in such a state. "State" means any state, the District of Columbia, the Commonwealth of Puerto Rico, or any territory or possession of the United States.

**If you selected "Unmarried" in Section 1:**

Is there a person who is not your legal spouse but who currently has real property rights similar to those of a legal spouse? ☐ No ☐ Yes

If YES, indicate the type of relationship and the state in which the relationship was formed. For example, indicate if you are in a civil union, domestic partnership, registered reciprocal beneficiary relationship, or other relationship recognized by the state in which you currently reside or where the property is located.

☐ Civil union ☐ Domestic partnership ☐ Registered reciprocal beneficiary relationship

☐ Other (explain): \_\_\_\_\_

State: \_\_\_\_\_

## Equal Credit Opportunity Act Notice

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices at 225 Peachtree Street, NE, Atlanta GA, 30303.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete, and we will be unable to invite you to participate in the Habitat program.

**Applicant(s):**

Signature \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_

## 15. WHAT HAPPENS NEXT?

Once you have returned a fully completed application, with copies of your required documentation, Habitat for Humanity of Greater Palm Beach County will review of your application to determine if you meet the initial requirements of the program relating to the following areas:

### **HOUSING NEED, ABILITY TO REPAY, & WILLINGNESS TO PARTNER.**

**Within 30 days of submitting a complete application, we will notify you in writing of the status of your application.** If an application is missing information, or the additional financial documents are not included, we will consider it an INCOMPLETE APPLICATION, and provide you a deadline to return the missing items. Your ability to complete this application, following all instructions, including all supplemental documentation, and returning everything prior to deadline, will be the first review into how we measure your overall **WILLINGNESS TO PARTNER**. Additional factors will contribute to this throughout the application review process.

If you are approved to move on to phase 2, we will conduct a deeper review of your **ABILITY TO REPAY**, including, but not limited to, an Employment Verification, Rent History, Background Check, Sex Offenders Registry check, and other non-traditional credit reviews. We will also request additional documents & examine a longer range of paystubs, bank statements and other financial documents to see your finances on a longer timeline.

If you meet the necessary credit and income requirements, you will then be interviewed by our staff, and have a home visit performed by members of our Homeowner Selection Committee where we will make a determination on your **HOUSING NEED**. The Board of Directors will have final approval.