



Junction City/Harrisburg/Monroe

**Habitat for Humanity**<sup>®</sup>

P.O Box 171, Junction City, OR 97448 [www.jchmhabitat.org](http://www.jchmhabitat.org) 541-998-9548

### Family Partnership Application

## Section 1: Applicants

### Applicant 1:

Full Legal Name: \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Married  Separated  Unmarried (include single, divorced or widowed)

Social Security Number: \_\_\_\_\_

*By providing your social security number you are authorizing us to obtain a credit report and criminal background check.*

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Mailing address (if different from above) \_\_\_\_\_

\_\_\_\_\_

Landlord's name, address, email address, and telephone number:

\_\_\_\_\_

\_\_\_\_\_

If you have lived at your current address for less than two years, what was your previous address(es) and how long did you live there?

\_\_\_\_\_

**Applicant 2:**

Name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Married  Separated  Unmarried (include single, divorced or widowed)

Social Security Number: \_\_\_\_\_

*By providing your social security number you are authorizing us to obtain a credit report and criminal background check.*

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Current Address (if different from Applicant 1): \_\_\_\_\_

\_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Mailing address if different from above: \_\_\_\_\_

\_\_\_\_\_

Landlord's name, address, email address, and telephone number:

\_\_\_\_\_

\_\_\_\_\_

If you have lived at your current address for less than two years, what was your previous address(es) and how long did you live there?

\_\_\_\_\_

## Section 2: Dependents

List names, dates of birth (DOB), and gender of the dependents who will live with you more than 50% of the time.

### Applicant 1's dependents:

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

### Applicant 2's dependents (if not listed above):

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_

Dependents of additional applicants (not listed as Applicant 1 or 2's dependents) should be listed on an additional application form.

## Section 3: Employment Information

### Applicant 1:

Name and Address of Current Employer (use a separate page to list additional employers)

\_\_\_\_\_

\_\_\_\_\_

Monthly Gross Income \_\_\_\_\_ Years with this employer? \_\_\_\_\_

If you have been working at your current job for less than a year, please complete the following information:

Name and Address of Previous Employer

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Monthly Gross Income \_\_\_\_\_ Years with this employer? \_\_\_\_\_

**Applicant 2:**

Name and Address of Current Employer (use a separate page to list additional employers)

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Monthly Gross Income \_\_\_\_\_ Years with this employer? \_\_\_\_\_

If you have been working at your current job for less than a year, please complete the following information:

Name and Address of Previous Employer

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Monthly Gross Income \_\_\_\_\_ Years with this employer? \_\_\_\_\_

## Section 4: Monthly Income

	Applicant 1	Applicant 2
Gross employment (before deductions)		
Pension Income		
SSI <sup>1</sup>		
Disability <sup>1</sup>		
Social Security <sup>1</sup>		
Spousal Support <sup>2</sup>		
Child Support <sup>2</sup>		
Other <sup>3</sup>		
<b>Total</b>		

For additional applicants, please use an additional Application Form and attach it to the application. All information is required for all applicants. **All applicants whose income is considered will be on the title and subject to the same review.**

<sup>1</sup>For SSI, Disability, or Social Security income, please provide the most recent benefits award letter.

<sup>2</sup>Spousal support and child support will be included as income, unless it is unreliable.

<sup>3</sup>What is the source of this additional income? How long can you expect it to continue?

## Section 5: Monthly Bills

Provide totals for ALL applicants. ***Please provide copies of two months of all bills.***

Rent \_\_\_\_\_

Electric/Gas \_\_\_\_\_

Child Support \_\_\_\_\_

Alimony/Spousal Support \_\_\_\_\_

Job-Related Expenses \_\_\_\_\_

**Total** \_\_\_\_\_

Additional monthly bills. (Please note that loan payments are listed on the following page.)

# Loan Payments

Loans	Payment To:	Monthly Payments	Balance Due	Time Left on Loan
Car Loan				
Car Loan				
Credit Card				
Credit Card				
Credit Card				
Credit Card				
Credit Card				
Student Loans you are paying				
Student Loans Deferred				
Tires				
Furniture Rental/ Loan/Rent-To-Buy				
TV, Computer				
Loans from Banks/ Credit Unions				
Medical				
"Payday" or short term loans				
Loans from friends or family				
Other				
Other				
Other				
<b>Total</b>				

## Section 6: Source of Closing Costs

You will need \$1000-\$2000 for closing costs (related to the purchase of your house) and moving expenses. What will be the source of this money? If you borrow it, from whom will you borrow it and how will you repay it?

## Section 7: Assets – List for each applicant. Include two months most recent statements, all pages, for each account. List additional accounts on a separate sheet of paper.

Name of Banking Account Holder: \_\_\_\_\_

Name and Address of Bank, Savings and Loan, Credit Union or Other Institution

\_\_\_\_\_

\_\_\_\_\_

Account Type: Checking \_\_\_\_\_ Savings \_\_\_\_\_ Money Market \_\_\_\_\_ CD \_\_\_\_\_

Account Number: \_\_\_\_\_ Balance \_\_\_\_\_

Name of Banking Account Holder: \_\_\_\_\_

Name and Address of Bank, Savings and Loan, Credit Union or Other Institution

\_\_\_\_\_

\_\_\_\_\_

Account Type: Checking \_\_\_\_\_ Savings \_\_\_\_\_ Money Market \_\_\_\_\_ CD \_\_\_\_\_

Account Number: \_\_\_\_\_ Balance \_\_\_\_\_



Name of Banking Account Holder: \_\_\_\_\_

Name and Address of Bank, Savings and Loan, Credit Union or Other Institution

\_\_\_\_\_

\_\_\_\_\_

Account Type: Checking \_\_\_\_\_ Savings \_\_\_\_\_ Money Market \_\_\_\_\_ CD \_\_\_\_\_

Account Number: \_\_\_\_\_ Balance \_\_\_\_\_

**List assets you own *WITHOUT* a loan payment.** If you have assets *WITH* a loan, please list them in Section 5, page 7.

Do you own a boat? \_\_\_\_\_ Type \_\_\_\_\_ Value \_\_\_\_\_

Do you own a mobile home? \_\_\_\_\_ Type \_\_\_\_\_ Value \_\_\_\_\_

Do you own a car? \_\_\_\_\_ Make & Year \_\_\_\_\_ Value \_\_\_\_\_

Do you own another car? \_\_\_\_\_ Make & Year \_\_\_\_\_ Value \_\_\_\_\_

Stocks & Bonds? \_\_\_\_\_ Type \_\_\_\_\_ Value \_\_\_\_\_

IRA/401K/etc.? \_\_\_\_\_ Type \_\_\_\_\_ Value \_\_\_\_\_

House? \_\_\_\_\_ Location \_\_\_\_\_ Value \_\_\_\_\_

Property? \_\_\_\_\_ Location \_\_\_\_\_ Value \_\_\_\_\_

## Section 8: Present Housing Conditions

Describe the house/apartment in which you currently live.

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

Other rooms: Kitchen \_\_\_\_\_ Bathroom (how many?) \_\_\_\_\_ Living Room \_\_\_\_\_

Dining Room \_\_\_\_\_ Other Rooms (Please describe) \_\_\_\_\_

If you rent a house, apartment, or mobile home what is your monthly rent payment?

\_\_\_\_\_

If you own a mobile home and rent space, what is the monthly space rent payment?

\_\_\_\_\_

If you own your residence, what is your monthly mortgage payment?

\_\_\_\_\_

If you are purchasing a mobile home, what is your monthly payment (not including space rent)?

\_\_\_\_\_

*Please attach a statement verifying this amount.*

Unpaid balance on mortgage or mobile home purchase contract? \_\_\_\_\_

Years remaining on mortgage or contract? \_\_\_\_\_

Habitat for Humanity works to address those who are living in housing that has structural issues, that is unsafe or overcrowded, or is cost burdening to families. Please describe the condition of your current home and how it is inadequate or substandard housing:

## Section 9: Willingness to Partner

To be considered for a Habitat home, you and your family must be willing to complete 500 “sweat equity” hours. Sweat equity is the term we use to describe your work on any Habitat-approved project, including construction of your house, other families’ houses, attending required workshops, office work, or a variety of other tasks.

Are you willing to complete the required sweat equity hours?

Applicant 1: Yes \_\_\_\_\_ No \_\_\_\_\_

Applicant 2: Yes \_\_\_\_\_ No \_\_\_\_\_

## Section 10: Declarations

If *any* applicant can answer “Yes” on questions A-E or “No” on question F, please explain below and indicate which applicant(s) are involved.

- A. Do you have any debt because of a court decision against you?  Yes  No
- B. Have you been declared bankrupt within the last three years?  Yes  No
- C. Have you had property foreclosed on in the past seven years?  Yes  No
- D. Are you currently involved in a lawsuit?  Yes  No
- E. Have you been ordered to pay child support or alimony?  Yes  No
- F. Are you a U.S. citizen or permanent resident?  Yes  No

## Section 11: Authorization and Release

I understand that by filing this application, I am authorizing Junction City/Harrisburg/ Monroe (JCHM) Habitat for Humanity to evaluate my actual need for a Habitat house, my ability to repay the low- or no-interest loan and other expenses of homeownership, and my willingness to be a partner family.

I understand that the evaluation will include personal visits, a credit check, and employment, rental history, public benefits and banking verifications.

I have answered all questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that if I have already been selected for family partnership, I may be de-selected on the basis of a fraudulent application.

The original or a copy of this application will be retained by JCHM Habitat for Humanity according to its document retention policy, even if the application is not approved.

I also understand that Habitat for Humanity screens all applicant families on the sex offender registry and that by completing this section, 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.

I authorize Habitat for Humanity to verify my employment, my banking status, my rental history and my public benefits. Further, I authorize Habitat for Humanity to run a credit check and a background check, which includes criminal and sexual offenses.

I authorize Habitat for Humanity to confer with USDA Rural Housing on my behalf, upon submission of the Uniform Residential Loan Application or Pre-Application during the housing process.

Print Name of Applicant 1 \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant 1 \_\_\_\_\_

Print Name of Applicant 2 \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant 2 \_\_\_\_\_



**Equal Housing Opportunity statement:** 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.