



## Habitat Homebuyer Program Application Package

**Completing the Application Package** is the first step to applying to Habitat Monterey Bay's home ownership program.

**Please complete the Application and provide the following information:**

1. A money order to cover the cost of your Credit Report(s). \$25 if one applicant; \$40 if two or more applicants (applicant and co-applicant). No cash, checks, or refunds. **Please make money order out to "Habitat for Humanity Monterey Bay".**
2. Copies of Applicant and Co-applicant's Photo IDs and Proof of US Legal Permanent Residency (Permanent Resident Card, Birth Certificate, Certificate of Naturalization, US Passport) – All applicants must show proof of legal residency and at least one applicant must be a legal permanent resident.
3. Copies of your last three current pay stubs or proof of income *for everyone over 18 who is employed*, including on-call or seasonal/temporary/informal work. If working more than one job, please list all current employment. (If self-employed, all pages last 3 years tax returns. If receiving disability, social security, copy of benefit statement.)
4. Copies of your last two years Federal income tax returns and W-2 forms.

**Applications will not be processed if incomplete and/or the documents above are not received.**

**You must attend a Family Selection Orientation in order to complete our program requirements. Once your application is processed, we will contact you with the Orientation schedule.**

If you have any questions please call Family Services staff at: 831-469-4663 ext. 12 or email us at: [FamilyServices@habitatmontereybay.org](mailto:FamilyServices@habitatmontereybay.org)

**Return your completed Application, along with the items requested above, to:**

Habitat for Humanity Monterey Bay  
108 Magnolia Street  
Santa Cruz, CA 95062

*If English is your second language and you need translation services, if you need a sign language interpreter, or if you require any other type of assistance please call our staff at (831) 469-4663. We require at least a three-day notice to set up translation services and provide reasonable accommodations*

*Spanish Si Ingles es su segundo idioma y necesita servicios de traduccion, si necesita un interprete de lenguaje en senas o si requiere cualquier otra clase de asistencia, favor de llamar nuestro personal a 831-469-4663. Requerimos por lo menos tres dias de anticipo para ponerle servicios de traduccion y proveerle acomodaciones razonables.*

Habitat for Humanity Monterey Bay provides equal housing opportunities for all, and ensures fair and equal access to its programs and services regardless of race, color, religion, gender, gender identification, national origin, religion, familial or marital status, disability, ancestry, sexual orientation, source of income, or other characteristics protected by law.



Habitat for Humanity Monterey Bay  
 108 Magnolia Street  
 Santa Cruz, CA 95062  
 831-469-4663  
[www.habitatmontereybay.org](http://www.habitatmontereybay.org)



## Application Homebuyer Program

Please complete this application to determine if you qualify for the Habitat for Humanity Homebuyer Program. Please fill out the application as completely and accurately as possible. *All information you provide on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act*

### 1. APPLICANT INFORMATION

Applicant Information (Titleholder)	Co-Applicant Information (Titleholder)
Applicant's name:	Co-Applicant's name:
Social Security Number:	Social Security Number:
Date of birth: (mm/dd/yyyy)	Date of birth: (mm/dd/yyyy)
Current address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent	Current address (street, city, state, zip code) <input type="checkbox"/> Own <input type="checkbox"/> Rent
Time lived at current address (years, months):	Time lived at current address (years, months):
Phone:	Phone:
E-mail address:	E-mail address:
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced or widowed)	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes single, divorced or widowed)
<b>If living at present address less than 2 years, also include your previous address.</b>	
Previous address (street, city, state, zip code):	Previous address (street, city, state, zip code):
Time lived at previous address (years, months):	Time lived at previous address (years, months):

### Additional Household Member(s) Information

Please list all current household members that are going to be living in the Habitat home

Name (First, Last):	Date of Birth: (mm/dd/yyyy)	Sex	Age	Relationship	Has Income	Currently living with you? If not, explain why on page 8 of this Application.
1.					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.					<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## 2. WILLINGNESS TO PARTNER

Applicant acknowledges that all Habitat housing projects require that applicant families assist and participate in the promotion of the Habitat *Homeownership Program* and in the building process. This will include attendance of a Homeowner Orientation, and 500 hours of "sweat equity" toward the building of Habitat homes. Accommodations may be made for applicants with mobility disabilities, but there remains an expectation that the applicant will participate in some way toward the building of their home, which may include outreach to the community, helping to build understanding and support within their own immediate neighborhood and/or participating in interviews for the media.

**I AM WILLING TO PARTNER IN HABITAT'S HOMEOWNERSHIP PROGRAM:**

Applicant: ☐ Yes ☐ No

Co-Applicant: ☐ Yes ☐ No

## 3. PRESENT HOUSING CONDITIONS

Number of occupants in your current residence \_\_\_\_\_

Number of the following rooms in in your current residence:

Bedrooms \_\_\_\_\_ Kitchen \_\_\_\_\_ Living Room \_\_\_\_\_ Dining Room \_\_\_\_\_ Bathrooms \_\_\_\_\_ Other Rooms \_\_\_\_\_

In the space below, describe the condition of your current housing. Why do you need a Habitat home?

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## 4. EMPLOYMENT INFORMATION

Applicant		Co-Applicant	
Name and address of <b>CURRENT</b> employer	Years on this job	Name and address of <b>CURRENT</b> employer	Years on this job
	Monthly (gross) wages \$		Monthly (gross) wages \$
Self Employed: <input type="checkbox"/>		Self Employed: <input type="checkbox"/>	
Job/position	Business phone	Job/position	Business phone
<b>If working at current job less than one year, or have a second job, please complete the following. If more space is needed please include on page 8 of this application.</b>			
Applicant		Co-Applicant	
Name and address of <b>LAST</b> employer	Years on this job	Name and address of <b>LAST</b> employer	Years on this job
	Monthly (gross) wages \$		Monthly (gross) wages \$
Job/position	Business phone	Job/position	Business phone

### 5. MONTHLY INCOME

Enter the amount received monthly & submit documentation to verify income. Spousal and/or child support income need not be included if applicant or co-applicant does not chose to have it considered for repaying this loan.

Monthly Income	Applicant	Co-Applicant	Other Household Member	Other Household Member
Gross Monthly Income	\$	\$	\$	\$
Pension/Social Security	\$	\$	\$	\$
VA Benefits	\$	\$	\$	\$
Supplemental Social Security Income (SSI)	\$	\$	\$	\$
Disability (SSD)	\$	\$	\$	\$
Spousal Support	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Other (specify)	\$	\$	\$	\$
<b>Total</b>	\$	\$	\$	\$

**Notice: Spousal support, child support, or separate maintenance income need not be revealed if the Applicant or Co-Applicant does not choose to have it considered for repaying this loan.**

If you have other income not listed above to declare, check here \_\_\_\_\_ and include on page 8 of this application.

### 6. SOURCE OF DOWNPAYMENT

You will be required to pay 1-2 % down payment, and pay closing costs. What will be the source of your down payment (for example, savings or a relative)? If you borrow the money, whom will you borrow it from, and how will you pay it back?

### 7. ASSETS

List Checking and Savings Accounts Below

If you have other accounts not listed below, check here \_\_\_\_\_ and include on page 8 of this application.

Applicant	Co-Applicant
Name of Bank:	Name of Bank:
Address:	Address:
City, State, ZIP:	City, State, ZIP:
Account Number:	Account Number:
Current Balance:	Current Balance:
Name of Bank:	Name of Bank:
Address:	Address:
City, State, ZIP:	City, State, ZIP:
Account Number:	Account Number:
Current Balance:	Current Balance:

8. DEBTS						
To whom do you and co-applicant owe money?						
	Applicant			Co-Applicant		
Account	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Motor Vehicles	\$	\$		\$	\$	
Furniture, appliances, TVs	\$	\$		\$	\$	
Spousal support	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Credit Card	\$	\$		\$	\$	
Credit Card	\$	\$		\$	\$	
Credit Card	\$	\$		\$	\$	
Total Medical	\$	\$		\$	\$	
Real Estate	\$	\$		\$	\$	
Total	\$	\$		\$	\$	

9. MONTHLY HOUSEHOLD EXPENSES				
	Applicant	Co-Applicant	Other Household Member	Other Household Member
Rent	\$	\$	\$	\$
Utilities	\$	\$	\$	\$
Insurance	\$	\$	\$	\$
Child Care	\$	\$	\$	\$
Phone/Internet/Cable	\$	\$	\$	\$
Business expenses	\$	\$	\$	\$
Other	\$	\$	\$	\$
Other	\$	\$	\$	\$
Other	\$	\$	\$	\$
<b>Total:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

10. DECLARATIONS				
	Applicant		Co-Applicant	
	Yes	No	Yes	No
A. Do you have any debt because of a court decision against you?				
B. Have you declared bankruptcy or had property foreclosed on within the past 7 years?				
C. Are you currently involved in a lawsuit?				
D. Do you now or have you owned property within the last three years?				
E. Are you a U.S. citizen or permanent resident?				
<b>If you answered "yes" to any question (A) through (E) please explain on page 8 of this application.</b>				

## 12. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity Monterey Bay to evaluate my actual need for a Habitat home, my ability to repay the loan and other expenses of homeownership, and my willingness to be a partner family. I understand that the evaluation includes, but is not limited to, a **credit check, confidentiality agreement, background check, sex offender Website check, employment verification, current and previous landlord references, personal references and a home visit**. I, hereby, authorize Habitat for Humanity Monterey Bay to collect this information.

I understand that I will not be able to request modifications to the design of the home.

I understand that Habitat home ownership requires timely mortgage payments and that I am responsible for maintenance on my own unit. I understand that Habitat home ownership may require participation in a homeowners' association, requiring an additional monthly payment.

I understand that to keep the homes affordable for low-income families, Habitat has the "right of first refusal" to purchase the home back from me in perpetuity.

I have answered all the questions on the application truthfully. I understand that if I have not answered all the questions truthfully, my application may be disqualified. The original of this application will be retained by Habitat for Humanity Santa Cruz County for a minimum of 25 months.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**What is the best way to contact you:** Phone ☐ E-mail ☐ US Mail ☐ (please check one)

**PLEASE NOTE:** If more space is needed to complete any part of this application, use page 8 of this application or a separate sheet of paper and attach it to this application. Please mark your additional comments with "A" for Applicant and "C" for Co-Applicant

## 13. LIST OF REQUIRED DOCUMENTS - All documents MUST be submitted by deadline.

**The following is a list of documents that you must submit with your application for housing to Habitat for Humanity Monterey Bay. All information in your application is confidential and will be kept strictly private. Your application will be declined as incomplete if you do not submit all the listed documents that apply to your household.**

- ☐ **Application for Housing** – fully completed, signed and dated by Applicant and Co-Applicant.
- ☐ **Employment Verification Form** – completed by employer of all members of the household over the age of 18 who are employed. **Verification Forms should be mailed directly to Habitat for Humanity by the employer** at the address on the form. Application may be submitted before Employment Verification is received by Habitat from the employer.

For the following items please **enclose copies only**. Do not include original documents: All document requirements are needed for both Applicant and Co-Applicant.

- ☐ **Federal income tax returns and W-2 forms** for the last two years, (*consecutive*). Include copies of 1099 forms if applicable.
- ☐ **Paycheck stubs** for applicant and co-applicant for the last three (3) months (*consecutive*).
- ☐ **Documents for other sources of income, if applicable** (for example, child support, SSI, unemployment, disability, section 8 voucher, school grants, loans, etc). If not employed, a statement of non-employment is required.
- ☐ **Copies of Applicant and Co-applicant's Photo IDs and Proof of US Legal Permanent Residency** (Permanent Resident Card, Birth Certificate, Certificate of Naturalization, US Passport) – All applicants must show proof of legal residency and at least one applicant must be a legal permanent resident.
- ☐ **One form of identification for all dependents.** *Acceptable forms of ID are: Social Security Cards, Birth Certificate or Passport.*

## 14. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

**Please Read This Statement Before Completing the Box Below:**

The following information is requested by the federal government for loans related to the purchase of homes in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but you are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.)

APPLICANT	CO-APPLICANT
<input type="checkbox"/> I do not wish to provide this information  <b>RACE/NATIONAL ORIGIN:</b>  <input type="checkbox"/> American Indian or Alaskan Native  <input type="checkbox"/> Asian or Pacific Islander  <input type="checkbox"/> Black, not of Hispanic origin  <input type="checkbox"/> White, not of Hispanic origin  <input type="checkbox"/> Hispanic  <input type="checkbox"/> Other (specify) _____  <b>SEX:</b>  <input type="checkbox"/> Female <input type="checkbox"/> Male  Birthdate: ____/____/____  <b>Marital Status:</b>  <input type="checkbox"/> Married  <input type="checkbox"/> Separated  <input type="checkbox"/> Unmarried (Including single, divorced, widowed)	<input type="checkbox"/> I do not wish to provide this information  <b>RACE/NATIONAL ORIGIN:</b>  <input type="checkbox"/> American Indian or Alaskan Native  <input type="checkbox"/> Asian or Pacific Islander  <input type="checkbox"/> Black, not of Hispanic origin  <input type="checkbox"/> White, not of Hispanic origin  <input type="checkbox"/> Hispanic  <input type="checkbox"/> Other (specify) _____  <b>SEX:</b>  <input type="checkbox"/> Female <input type="checkbox"/> Male  Birthdate: ____/____/____  <b>Marital Status:</b>  <input type="checkbox"/> Married  <input type="checkbox"/> Separated  <input type="checkbox"/> Unmarried (Including single, divorced, widowed)

List Additional Information on this page (reference section number)



## CREDIT REPORT AUTHORIZATION FORM

Applicant Name: \_\_\_\_\_

First  
Itl.

Last

Middle

Co-Applicant Name: \_\_\_\_\_

First  
Itl.

Last

Middle

Present Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Applicant Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Co-Applicant Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Applicant's Present Employer: \_\_\_\_\_

Applicant's Previous Employer: \_\_\_\_\_

Co-Applicant's Present Employer: \_\_\_\_\_

Co-Applicant's Previous Employer: \_\_\_\_\_

I/we hereby give my/our consent for Habitat for Humanity East Bay/Silicon Valley to obtain any and all information concerning my/our credit history from a credit reporting agency.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## PRIVACY POLICY AND PRACTICES

*Note: If you have an impairment, disability, language barrier, or otherwise require an alternative means of completing this form or accessing information about housing counseling, please talk to your housing counselor about arranging alternative accommodations.*

Habitat for Humanity Monterey Bay (“Habitat”) is committed to assuring the privacy of individuals and/or households who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all personal information shared orally and/or in writing will be managed within ethical and legal considerations. Additionally, we want you to understand how we use the personal information we collect about you. Please carefully review this notice as it describes our policy regarding the collection and disclosure of your nonpublic, personal information.

### **What is nonpublic, personal information?**

- Information that identifies an individual personally and is not otherwise publicly available information, such as your
- Social Security Number or demographic data such as your race and ethnicity
- Includes personal financial information such as credit history, income, employment history, financial assets, bank account information, and financial debts

### **What personal information does Habitat collect about you?**

- Information that you provide on applications, forms, email, or verbally
- Information about your transactions with us, our affiliates, or others
- Information we receive from your creditors or employment references
- Credit Reports

### **What categories of information do we disclose and to whom?**

We may disclose the following personal information to financial service providers (such as companies and governmental entities providing mortgages), Federal and State partners and Habitat for Humanity International for program review, monitoring, auditing, research, and/or oversight purposes, and/or any other pre-authorized individual and/or organization. The types of information we disclose are as follows:

- Information you provide on applications/forms or other forms of communication. This information may include your name, address, Social Security number, employer, occupation, account numbers, assets, expenses, and income.
- Information about your transactions with us, our affiliates, or others such as your account balance, monthly payment, payment history, and method of payment.
- Information we receive from a consumer credit reporting agency such as your credit bureau reports, your credit and payment history, your credit scores, and/or your credit worthiness.
- We may share anonymous, aggregated case file information, but this information may not be disclosed in a manner that would personally identify you in any way. This is done in order to evaluate our program, gather valuable research information, and/or design future programs.

We do not sell or rent your personal information to any outside entity.

We may also disclose personal information about you to third parties as permitted by law.

### **How is your personal information secured?**

We restrict access to your nonpublic personal information to Habitat employees who need to know that information in order to provide products and services to you and to help them do their jobs, including underwriting and servicing of loans, making loan decisions, and financial and housing counseling. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information, and we train our staff to safeguard client information and prevent unauthorized access, disclosure, or use.

### **Opting Out of Certain Disclosures**

You may direct Habitat to not disclose your nonpublic personal information to third parties (other than disclosures made to project partners and those permitted by law). However, if you choose to opt out, we will not be able to answer any questions from your creditors, which may limit Habitat's ability to provide services such as credit counseling. If you choose to opt-out, please sign below under the "Opt-Out" clause. If you choose to release your information as stipulated in this Privacy Policy, sign under the "Release" clause. You may change your decision any time by contacting our agency.

**Please sign under either the Opt-Out Section or the Release Section, not both.**

**OPT-OUT:** I request that Habitat make no disclosures of my nonpublic personal information to third parties other than project partners and those permitted by law. By choosing this option, I understand that Habitat will NOT be able to answer any questions from my creditors. I understand that I may change my decision any time by contact Habitat.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**RELEASE:** I hereby authorize Habitat to release nonpublic personal information it obtains about me to my creditors and any third parties necessary to provide me with the services I requested. I acknowledge that I have read and understand the above privacy policy and disclosures.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## EMPLOYMENT VERIFICATION

### THIS SECTION TO BE COMPLETED BY APPLICANT

TO: Name and Address of Employer: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RE: \_\_\_\_\_  
Applicant Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

I hereby authorize release of my employment information.

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

The individual named directly above is an applicant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

### Return Form To:

Habitat for Humanity Monterey Bay  
108 Magnolia Street  
Santa Cruz, CA 95062  
831-469-3118 - Fax

### THIS SECTION TO BE COMPLETED BY EMPLOYER

Employee Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Presently Employed: Yes \_\_\_\_\_ Date First Employed \_\_\_\_\_ No \_\_\_\_\_ Last Day of Employment \_\_\_\_\_

**Current** Wages/Salary: \$ \_\_\_\_\_ (check one)  
☐ hourly ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly ☐ yearly ☐ other \_\_\_\_\_

Average # of regular hours per week: \_\_\_\_\_ Year-to-date earnings: \$ \_\_\_\_\_ from: \_\_\_\_/\_\_\_\_/\_\_\_\_ through: \_\_\_\_/\_\_\_\_/\_\_\_\_

Overtime Rate: \$ \_\_\_\_\_ per hour Average # of overtime hours per week: \_\_\_\_\_

Shift Differential Rate: \$ \_\_\_\_\_ per hour Average # of shift differential hours per week: \_\_\_\_\_

Commissions, bonuses, tips, other: \$ \_\_\_\_\_ (check one)  
☐ hourly ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly ☐ yearly ☐ other \_\_\_\_\_

List any anticipated change in the employee's rate of pay within the next 12 months: \_\_\_\_\_; Effective date: \_\_\_\_\_

If the employee's work is seasonal or sporadic, please indicate the layoff period(s): \_\_\_\_\_

Additional remarks: \_\_\_\_\_

\_\_\_\_\_  
Employer's Signature \_\_\_\_\_ Employer's Printed Name \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Employer [Company] Name and Address \_\_\_\_\_

\_\_\_\_\_  
Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_