

We believe everyone, man, woman and child should have a decent, safe, and affordable place to live.

QUINCY AREA HABITAT FOR HUMANITY

quincyareahabitatforhumanity.org
facebook.com/Quincy-Area-Habitat-for-Humanity
(217)223-4224

To volunteer: (217)224-3755

To apply to be a Partner Family:

lwaite@adams.net (217)223-5259
moulton49@sbcglobal.net

The Quincy Area Habitat for Humanity has partnered with families to build more than 20 homes in Quincy. Owning a home builds strength, stability, self-reliance as well as shelter for the Partner Family members as well as the community. All homes are built in Quincy.

Partner Families must

1. demonstrate a need for decent, safe, affordable housing.
2. be willing and able to pay a no interest mortgage, which when paid is recycled to build another home. Their debt allows the Partner Family to add a mortgage and still owe creditors less than 36% of their income. The family income is no higher than 63% of the Adams County Median Income.
3. perform "sweat equity" hours of at least 150 for a single applicant or at least 250 for 2 people. Working these hours helps the Partner Family to gain skills to maintain their home in the future.
4. complete "Financial Peace University" classes.
5. pay a down payment of \$1,000 and one year of Insurance on the house on the day of closing.

We cannot discriminate based on race, gender, color, sexual orientation, religion, national origin, or disability or marital status.

Veterans Build: Homes for Vets Through
Habitat for Humanity

Veterans Build is Habitat for Humanity's national initiative to build homes for U.S. veterans and their Families. In some cases maintenance of the exterior may be completed. They are also seeking to include as many veteran volunteers as possible to help the Vets make the transition to civilian life better.

Get more information about VETERAN ENERGY
at veteranenergy.us/

*"Every hand makes a difference to give
a hand up, not a hand out."*

Thank you for your time and interest!



Affiliate name
 Affiliate mailing address for receipt of completed application
 Affiliate phone number

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

1. APPLICANT INFORMATION	
Applicant	Co-applicant
Applicant's name	Co-applicant's name
Social Security number Home phone Age	Social Security number Home phone Age
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)
Dependents and others who will live with you (not listed by co-applicant)	Dependents and others who will live with you (not listed by co-applicant)
Name Age Male Female	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"/>	_____ _____ <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"/>
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 _____
If living at present address for less than two years, complete the following	
Last address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent	Last address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent
Number of years _____	Number of years _____

2. FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

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: _____

3. WILLINGNESS TO PARTNER

To be considered for Habitat homeownership, you and your family must be willing to complete a certain number of "sweat-equity" hours. Your help in building your home and the homes of others is called "sweat equity" and may include clearing the lot, painting, helping with construction, working in the Habitat office, attending homeownership classes or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:	Applicant	Yes	No
	Co-applicant	<input type="checkbox"/>	<input type="checkbox"/>

4. PRESENT HOUSING CONDITIONS

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

Other rooms in the place where you are currently living:

Kitchen Bathroom Living room Dining room Other (please describe) _____

If you rent your residence, what is your monthly rent payment? \$ _____ / month
 (Please supply a copy of your lease or a copy of a money order receipt or canceled rent check.)

Name, address and phone number of current landlord: _____

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

5. PROPERTY INFORMATION

If you own your residence, what is your monthly mortgage payment? \$ _____ / month Unpaid balance \$ _____

Do you own land? No Yes Monthly payment \$ _____ Unpaid balance \$ _____

If you wish your property to be considered for building your Habitat home, please attach land documentation.

6. EMPLOYMENT INFORMATION

Applicant		Co-applicant	
Name and address of CURRENT employer	Years on this job	Name and address of CURRENT employer	Years on this job
	Monthly (gross) wages \$		Monthly (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 LAST employer	Years on this job	Name and address of LAST employer	Years on this job
	Monthly (gross) wages \$		Monthly (gross) wages \$
Type of business	Business phone	Type of business	Business phone

11. DECLARATIONS

Please circle the word that best answers the following questions for you and the co-applicant

	Applicant		Co-applicant	
a. Do you have 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 been declared bankrupt within the past seven years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Have you had property foreclosed on in the past seven years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Are you paying alimony or child support?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
f. 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

If you answered "yes" to any question a through e, or "no" to question f, please explain on a separate piece of paper.

12. AUTHORIZATION 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 the no-interest loan and other expenses of homeownership, and my willingness to be a partner through sweat equity. I understand that the evaluation will include personal visits, a credit check and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, 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. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

I also understand that Habitat for Humanity screens all applicant families 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.

Applicant's name _____

Co-applicant's name _____

13. 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 are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on 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 ethnicity, 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.

Applicant	Co-applicant
<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: ____ / ____ / ____ Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)	<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: ____ / ____ / ____ Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)

To be completed only by the person conducting the interview							
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; border-bottom: 1px solid black; padding: 5px;">Interviewer's name (print or type)</td> <td style="width: 30%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 5px;">Interviewer's signature</td> <td style="border-bottom: 1px solid black; padding: 5px; text-align: right;">Date</td> </tr> <tr> <td style="padding: 5px;">Interviewer's phone number</td> <td></td> </tr> </table>	Interviewer's name (print or type)		Interviewer's signature	Date	Interviewer's phone number	
Interviewer's name (print or type)							
Interviewer's signature	Date						
Interviewer's phone number							

10. DEBT

To whom do you and the co-applicant(s) owe money?						
Account	Applicant			Co-applicant		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Other motor vehicle	\$	\$	\$	\$	\$	\$
Boat	\$	\$	\$	\$	\$	\$
Furniture, appliance, televisions (includes rent-to-own)	\$	\$	\$	\$	\$	\$
Alimony	\$	\$	\$	\$	\$	\$
Child support	\$	\$	\$	\$	\$	\$
Credit card	\$	\$	\$	\$	\$	\$
Credit card	\$	\$	\$	\$	\$	\$
Credit card	\$	\$	\$	\$	\$	\$
Total medical	\$	\$	\$	\$	\$	\$
Other	\$	\$	\$	\$	\$	\$
Other	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$

Monthly expenses			
Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities	\$	\$	\$
Insurance	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$
Land line	\$	\$	\$
Business expenses	\$	\$	\$
Union dues	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Total	\$	\$	\$