



BUILD A BETTER FUTURE WITH



Habitat
for Humanity®
Coosa Valley

STRONGER HOMES. STRONGER FAMILIES. STRONGER COMMUNITIES.

HABITAT HOMEOWNERS ARE ACTIVE PARTICIPANTS IN BUILDING A BETTER HOME AND A BRIGHTER FUTURE FOR THEMSELVES AND THEIR FAMILIES.

INTERESTED IN BECOMING A HABITAT HOMEOWNER?

START BY REGISTERING TO ATTEND A REQUIRED INFORMATIONAL SESSION.

 **APPLICATIONS AVAILABLE: DECEMBER 15, 2025**

 **APPLICATION SUBMISSION PERIOD: JANUARY 5 – FEBRUARY 27, 2026**

TOGETHER, WE CAN BUILD STRENGTH, STABILITY, AND SELF-RELIANCE THROUGH SHELTER.

JAN 15
6PM

BOYS & GIRLS CLUB

211 East Main St., Rome, GA 30161

JAN 22
6PM

CHATTOOGA COUNTY CIVIC CENTER

44 Hwy 48., Summerville, GA 30747

FEB 4
10AM

COMMUNITY RESOURCE CENTER OF CHATTOOGA

50 Eleanor Ave., Summerville, GA 30747

FEB 7
3PM

HABITAT COOSA VALLEY RESTORE

504 East First Ave., Rome, GA 30161

FEB 12
6PM

ROCKMART CITY HALL

316 N. Piedmont Ave., Rockmart, GA 30153



EQUAL HOUSING
OPPORTUNITY

For More Information: www.habitatcoosavalley.org



504 East First Ave
Rome, GA 30161
706.378.0030

www.habitatcoosavalley.org

A complete application packet must include a **COPY** of all the following documents:

- ALL sections of the Application have been completed and signed
- Copy of current identification for each applicant(s)
- Copy of Social Security Cards for applicant(s)
- Explanation to address any issues that may show up on your background check.
- Copies of the 3 most recent pay stubs for each of the current jobs held by **ALL applicants**
- Employment Verification (Form included in packet; to be completed by applicant and employer)
- Copies of last 2 years' income tax statements for **ALL applicants**
- Copies of all W-2s for last 2 years for **ALL applicants**
- Documentation of other types of **ALL applicable income** (See sources of qualifying income)
- Copies of 3 months of bank statements for each checking &/or savings account for **ALL applicants**
- Rent Verification Form (Form included in packet; to be completed by applicant and landlord)
- A copy of your HUD Housing Voucher if applicable
- Copies of 3 months of all outstanding loans (car, student & other); be sure balances are included
- Written explanation of any outstanding debt obligations, or large debts recently paid off that may still show up on a credit report (if necessary)
- \$10 Application Fee (CASH or Money Order payable to HFH-CV)**

Please note, completing an application with HFHCV does not guarantee that you will be qualified for Habitat housing. This is just the first step in a process that could take 4 – 6 months. Habitat Coosa Valley will notify you of your application status. If you have any questions, please feel to call us at (706) 378.0030.



Application Criteria

Habitat's primary goal is to provide simple, decent and affordable homes to qualified low-income working individuals and families.

Please note, an application with HFHCV does not guarantee that you will be qualified for Habitat housing. This is just the first step in a process that could take 4 – 6 months. Habitat Coosa Valley will notify you of your application status. If you have any questions, please call 706.378.0030.

To apply for homeownership with Habitat for Humanity - Coosa Valley:

- You must be a US Citizen or permanent legal resident
- You must be a first-time homebuyer
- You must live or work in Chattooga, Floyd or Polk County for at least one year
- You must have lived independently for at least one year
- You must attend a homeowner informational session

Selection Process

Homeowners are selected on three criteria:

1. Need

You are unable to obtain a conventional mortgage

Your rent is too high compared to your income

Your current residence has maintenance issues that are not being addressed by the landlord

Your current residence is too small for your family

2. Willingness to Partner

You agree to complete 250 - 300 hours of sweat equity. Sweat equity hours are earned by helping to build your home alongside volunteers and doing community service.

You agree to complete all assigned homeowner education.

You plan to fulfill your partnership with Habitat after purchasing the home by:

1. Paying your mortgage on time
2. Maintaining your home and lawn
3. Observing all county and city ordinances
4. Being a good neighbor

3. Ability to Pay

Your income is enough to pay the monthly mortgage, including taxes and homeowner's insurance, in addition to your other bills

Your income and work history must be 2 years stable and verifiable

You demonstrate financial responsibility

Your income falls within Habitat's income guidelines (Guidelines change annually)

Chattooga County Household Size

	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
50%	\$26,700	\$30,500	\$34,300	\$38,100	\$41,150	\$44,200	\$47,250	\$50,300
80%	\$42,700	\$48,800	\$54,900	\$60,950	\$68,850	\$70,750	\$75,600	\$80,500

Floyd County Household Size

	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
50%	\$27,750	\$31,700	\$35,650	\$39,650	\$42,800	\$45,950	\$49,150	\$52,350
80%	\$44,400	\$50,750	\$57,100	\$63,400	\$68,500	\$73,550	\$78,650	\$83,700

Polk County Household Size

	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
50%	\$26,700	\$30,500	\$34,300	\$38,100	\$41,150	\$44,200	\$47,250	\$50,300
80%	\$42,700	\$48,800	\$54,900	\$60,950	\$65,850	\$70,750	\$75,600	\$80,500

***Qualifying Sources of Income:**

- Employment Income
- Self-Employment Income (6 months of receipts or most recent Federal Return)
- Social Security / Disability Income
- Retirement / Pension Income
- Child Support for children under 15
- Benefits for children under the age of 15

The applicant and co-applicant must make at least the minimum amount listed above for each household size.

While your credit does not have to be perfect, you need to demonstrate that you are able to pay your bills on time. Habitat will look at your payment history, as shown on your credit report, as well as the total amount of debt you have and the amount of any collections or judgements.

Debt-to-Income (DTI) Ratios:

- **Monthly** DTI Ratio must be less than 42.00%
 - Add up all monthly debt payments including car payment(s), minimum credit card payment(s), student loan payment and other loans – this excludes monthly bills such as utilities, insurance and phone.
 - Determine your monthly income: for employment income, this is your gross income before taxes and deductions. For self-employment, this is your net income after deduction for your expenses.
 - Divide the total of your monthly debt payments by your monthly income. This must be less than 42.00%
- **Annual** DTI Ratio must be less than 15.00%

- Add up your total debt including total balance of credit card debt, all past due balances on accounts and monthly bills. Excludes installment loans (i.e., car loan and student loans) if this debt is current. If you are past due the entire balance of the loan must be included in the DTI ratio.
- Determine your annual income: Monthly gross x 12.
- Divide the total of your debt by your annual income. This must be less than 15%.

Free Credit Report: You can access an annual free credit report by requesting:

1. Online at www.annualcreditreport.com
2. By phone, 877.322.8228
3. By filling out the Annual Credit Report request form and mailing it to: Annual Credit Report Request Service. PO Box 105281. Atlanta, GA 30348-5281

Bankruptcies: 4 years cleared with established good credit after



Habitat Coosa Valley
 504 East First Ave
 Rome, GA 30161

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:** _____

1A. APPLICANT INFORMATION

Applicant	Co-applicant																																																
Applicant's name: _____	Co-applicant's name: _____																																																
Alternative and former names: _____	Alternative and former names: _____																																																
Social Security number _____	Social Security number _____																																																
Home phone (____) _____	Home phone (____) _____																																																
Cell phone (____) _____	Cell phone (____) _____																																																
Work phone (____) _____	Work phone (____) _____																																																
Age _____ Date of birth (mm/dd/yyyy) _____	Age _____ Date of birth (mm/dd/yyyy) _____																																																
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.)	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.)																																																
Dependents and others who will live with you:	Dependents and others who will live with you (not listed by co-applicant):																																																
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Age</th> <th style="text-align: center;">Male</th> <th style="text-align: center;">Female</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><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 style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Age</th> <th style="text-align: center;">Male</th> <th style="text-align: center;">Female</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><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: _____																																																

If you have lived at your present address for less than two years, complete the following, for all addresses during the past two years:

Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years: _____	Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years: _____
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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: _____

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 "sweat-equity" 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 SWEAT-EQUITY 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?

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: _____

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 CURRENT employer:	Start date (mm/dd/yyyy):	Name and address of CURRENT 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 PREVIOUS employer:	Years on this job:	Name and address of PREVIOUS 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) \$ _____			PLEASE NOTE: 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: _____	\$	\$	\$	\$
Total	\$	\$	\$	\$

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		
	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	\$	\$		\$	\$	
Total	\$	\$		\$	\$	

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	\$	\$	\$
Total	\$	\$	\$

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

Note: 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
<p>Ethnicity (check one or more):</p> <p><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></p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to provide this information</p>	<p>Ethnicity (check one or more):</p> <p><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></p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to provide this information</p>
<p>Sex:</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information</p>	<p>Sex:</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information</p>
<p>Race (check one or more):</p> <p><input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe:</i> _____</p> <p><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></p> <p><input type="checkbox"/> Black or African American</p> <p><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></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to provide this information</p>	<p>Race (check one or more):</p> <p><input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe:</i> _____</p> <p><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></p> <p><input type="checkbox"/> Black or African American</p> <p><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></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to provide this information</p>

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
<p>This application was taken by:</p> <p><input type="checkbox"/> Face-to-face interview (included electronic media w/video component)</p> <p><input type="checkbox"/> By mail <input type="checkbox"/> By telephone</p>	<p>Interviewer's name (print or type)</p> <hr/> <p>Interviewer's signature</p>	<p>Interviewer's phone number</p> <hr/> <p>Date</p>

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: _____



Employment Verification

Habitat for Humanity – Coosa Valley requires employment verification. The following form must be completed by the employer of the applicant and co-applicant (if applicable). **If the applicant or co-applicant has not been at their current job for 12 months, additional employment verification for the previous employer is required.**

If there is any gap in employment, the applicant or co-applicant may submit a letter with the explanation of the gap in employment for consideration.

Rent Verification

Habitat for Humanity – Coosa Valley requires rent verification for the past two years. The following form must be completed by the landlord of the applicant and the co-applicant (if applicable). **If the applicant has not been at their current residence for 12 months or more, additional forms must be completed by the previous landlord(s).**



Verification of Employment

Part A – Must be completed by the Applicant (& Co-Applicant), Signed and dated and returned to Habitat.	
Applicant Name:	Employer:
Address:	Address:
Social Security:	

I have applied for homeownership with Habitat for Humanity – Coosa Valley. Please provide the salary and employment verification required below.

_____ Signature of Applicant	_____ Date
Part B – Must be completed by the employer of the applicant listed above.	
Is the applicant employed by you?	Yes or No Position: _____
Dates of Employment:	Probability of continued employment? Yes or No
Full Time or Part Time	# of Hours per week:
Base Pay: \$ ____ / hour	Annual Salary: \$ _____
Does the applicant work overtime? Yes or No	Estimated overtime per week/year: _____
Does the applicant receive commission? Yes or No	\$ _____ Wkly / Mnthly / Qtrly / Yrly
Does the applicant receive bonus or tips? Yes or No	\$ _____ Wkly / Mnthly / Qtrly / Yrly
Is this employment seasonal? Yes or No	Does the applicant draw unemployment in off season? Yes or No
Employer Name / Title:	Signature:
Date:	Phone Number:

The above information is confidential and will be used to determine the applicant's eligibility for homeownership. Thank you for your cooperation.





Request for Verification of Rent

Part 1 – Request	
To: Landlord (Name & Address)	From: Habitat for Humanity – Coosa Valley 504 East First Ave Rome, GA 30161
Lender: HFH-CV Betsy Allgood	Title: Executive Director
Date:	
Applicant(s): (Name & Address)	
Applicant Signature:	(Co) Applicant Signature:
Part 2 – Verification of Rent	
Tenant Rented from: ___/___/___ to: ___/___/___	
Amount of Rent: \$_____ mthly	Is account satisfactory? Yes or No
If no, please explain:	
Number of late payments (30 or more days late):	
Signature of Landlord / Rental Agent:	
Date:	Phone Number:





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 for the Southeast region, or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

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 Name: _____

Applicant Signature: _____

Date: _____

Co-Applicant Name: _____

Co-Applicant Signature: _____

Date: _____

