

YOU MUST READ THIS PAGE

Dear Applicant,

Habitat for Humanity is a Christian housing ministry financed through private donation and utilizing volunteer labor. Our purpose is to build and renovate decent and affordable housing with families and sell the houses at no profit and no interest to families who could not otherwise afford a home.

Please read the following items to see if you have an interest in our ministry AND to see if you meet our general guidelines:

- 1. To qualify you must have housing need. For example: no indoor plumbing, poor heating, leaks in the roof, overcrowding (three to a bedroom), unsafe or unsanitary conditions.
- 2. You need to have a legal, verifiable income of at least \$23,000 for I or 2 person families and more when a family consists of 3 or more members. That maximum income depends on family size. Please see Family Selection Criteria for more details.
- With your permission, we will verify employment and other income, verify checking and saving
 account balances, get a statement from your current landlord, have a credit check done, and ask you for
 credit references.
- 4. If you are approved for a Habitat home, we ask that you be willing to join in programs to learn and practice budgeting, home repair, and maintenance. We require that you attend the monthly Habitat for Humanity homeowner's meeting.
- 5. If approved for a Habitat home, all adult members (18 years and older) in your household must invest 250 hours of sweat equity, 100 of those hours before construction can begin on your home.
- 6. If approved for a Habitat home, \$1000 will be needed for a down payment You will have time to save this money before closing if your family is selected by making a minimum payment of \$75 per month from time of acceptance until time of closing.

If you are interested in Habitat and if you believe you quality for a home according to the above guidelines, we encourage you to fill out and return the enclosed application.

All Information is considered confidential and is to be used only for family selection. The application process takes between 30 and 60 days. We are very willing to help you fill out this application.

For more information, contact Sue Whitty at 586-263-1540 or email swhitty@macombhabitat.org, Monday – Friday 9 a.m. to 3 p.m.





Family Selection Criteria for Application

Criteria:

There are Three (3) criteria used to select applicants listed below:

- 1. Ability to Pay legal verifiable income that falls within income range (see chart below)
- 2. Need proof living in some type of substandard housing (see housing need assessment form)
- 3. Willingness to Partner each adult in the home complete a minimum of 250 volunteer hours

Ability to Pay:

This section clarifies guidelines used for reviewing the applicant's ability to pay.

Family Size	Minimum Yearly Gross Salary	Maximum Yearly Gross Salary
1	\$23,000	\$38,450
2	\$23,000	\$43,950
3	\$25,151	\$49,450
4	\$28,875	\$54,900
5	\$31,795	\$59,300
6	\$35,705	\$63,700
7	\$39,115	\$68,100
8	\$42,545	\$72,500

^{*}All program requirements are subject to change without notification

Credit Criteria:

- Must have a Credit Score in the 600's to qualify and 640 or higher to close on a house.
- Debt-to-Income ratio of 40% or lower: a math projection calculating the income you have coming in versus the debt you should have going out which includes
 - Minimum payments
 - 5% of collection
 - 2% of Student loans
 - 1% of medical
- Never filed bankruptcy or 2 years from discharge of bankruptcy.
- No foreclosure or within 3 year from foreclosure.
- No open liens or judgments against the applicants.
- Can't be delinquent on Student loans or Child Support.



Warren ReStore | 23211 Van Dyke, Warren, MI 48089 tel (586) 806-5604 macombhabitat.org/restore



Family Selection Documentation List

Applicant's Name:	Co-Applicant's Name
	No
You must return a copy (no originals) of the following ite	
Please return completed and signed application to Maco	
Clinton Township 34950 Little Mack Ave. Clinton Townsh	ip, MI 48035.
() 1. A \$50.00 money order made payable to "Macomb C application processing. () 2. Application - complete all sections and sign. () 3. Housing Need Assessment Form (check all items tha () 4. Truth-In-Lending Disclosure Statement (Please print () 5. Copy of the last two (2) year's income tax returns; tr signed by you and submitted by Macomb County Habitat. your returns. Please allow 10 days to receive information. () 6. Copy of pay stubs covering 90 consecutive days from () 7. Copy of any documents that verify income such as; \$() 8. Copy of Driver's License or State Issued Identification () 9. Copy of Social Security card for each adult applicant () 10. Copy of Proof of U.S. Citizen for each member of the Papers; Qualified Alien Papers. Birth Certificates are requi () 11. Copy of Divorce Papers - if applies. () 12. Copy of rent receipts for the past six (6) months. () 13. Copy of bank statements for the two (2) most received in the past of the past six (6) months. () 14. Letter of explanation for any concerns you may have	t fit your current circumstance). name at top - sign at bottom). anscripts will be required and a 4506-T request can be You can contact the IRS at 1-800-908-9946 for copies of all employed family members.* SI, Child Support, Disability, Alimony, etc. In (front and back) for each applicant. In the household such as; Birth Certificate; Naturalization ared for all children. In the months. The about your application.
How did you hear about our program?	
☐ Church ☐ Email/Internet/TV ☐ Family/Friend	☐ Flyer ☐ Habitat Homeowner
□Mail □School □ Social Worker □ Staff	□ Walk-in □ Word of Mouth
□ Other:	
Where did you get your application?	
□ Office □ Restore □ Event □ Websi	te 🗆 Other



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Substandard Structure (please check problems)

Housing Need Assessment Form

Habitat homeownership program requires that future homeowners are currently living in conditions that are considered unacceptable. Based on your current living environment, you must meet at least one of the five needs listed below. Please check all needs that apply to your current living situation. Habitat Family Selection committee will verify all needs claimed with an on-site visit.

Ш	Heating system does not provide for healthful/comfortable living.
	Insulation is not sufficient to maintain minimal comfort.
	There is not a continuous supply of safe water.
	There is not a safe/sanitary method of sewage disposal.
	The electrical supply is not reliable.
	Wiring poses a threat to safety.
	Landlord is consistently unwilling to complete necessary repairs.
	Head of household, family and friends are unable to readily repair deficiencies.
	Repairs cannot be made as documented by building inspectors.
	Uncorrectable barriers to physically challenged family members exist.
Sa	fety
	Access to street, yard, parks or playgrounds is hazardous. There are unavoidable dangers to children.
	Immediate physical environment contains un-removable hazardous or toxic material.
	There is no ready means of egress exit from a basement bedroom.
Siz	e of Present Dwelling
	More than three family members share a bedroom
	School-age children of opposite sex share a bedroom
	Child (age I or older) and adult share a bedroom
Ter	mporary housing
	Family has tentative living arrangements with relatives or friends.
	Family is living in a transitional housing facility or a motel.
	Family is living in a house that is being condemned or foreclosed.
	Family is losing its lease, certificate or voucher due to uncontrollable circumstances.
Cos	et of Housing
	Family is paying more than 35% of its monthly net income for rent.
The	above information is true about our current housing condition to the best of my/our knowledge.





We build strength, stability, self-reliance and shelter.

TRUTH-IN-LENDING DISCLOSURE STATEMENT

(THIS IS NEITHER A CONTRACT NOR A COMMITMENT TO LEND)

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Property Address: Unknown at this time

Prepared by: Macomb County Habitat for Humanity

charge

Family Selection Committee

Application No: Unknown at this time

Date Prenared

tille Date Fle	pareu.	
FINANCE CHARGE	AMOUNT FINANCED	TOTAL OF PAYMENTS
The dollar amount the credit will cost you	The amount of credit provided to you on your behalf	or The amount you will have paid after making all payments is scheduled
\$0	Amount determined on construction type or location	Amount determined on construction type or location
	FINANCE CHARGE The dollar amount the credit will cost you	The dollar amount the credit The amount of credit provided to you will cost you on your behalf

☐ REQUIRED DEPOSIT: The annual percentage rate does not take into account your required deposit Payments: Your payment schedule will be

Number of	Amount of	When Payments	Number of	Amount of	When Payments
Payments	Pavments	Are Due	Pavments	Pavments	Are Due
300	To be determined on construction type or location	1 st of each month after mortgage is signed			

- DEMAND FEATURE: This obligation has a demand feature
- □ VARIABLE RATE FEATURE: This loan contains a variable rate feature: A variable rate disclosure has been proved earlier CREDIT LIFE/CREDIT DISABILITY: Credit life insurance and credit disability are not required to obtain credit, and will not be provided unless you sign and agree to pay that additional cost.

Type:	Premium	Signature
Credit Life	\$0	I want credit life insurance Signature: N/A
Credit Disability	\$0	I want credit disability insurance Signature: N/A
Credit Life and Disability	\$0	I want credit life and disability insurance Signature: N/A

Type.	Fremium	Signature	
Credit Life	\$0	I want credit life insurance	Signature: N/A
Credit Disability	\$0	I want credit disability insurance	Signature: N/A
Credit Life and Disability	\$0	I want credit life and disability insurance	Signature: N/A
INSURANCE: The following	incurance is required to e	htain cradit:	

INSONAIVEE. THE TOHOWING II	isulance is required to ob	tuill of cuit.	
□ Credit Life Insurance	☐ Credit disability☐ Pro	perty Insurance	□ Flood Insurance
You may obtain the insurance	e from anyone you want	that is acceptable t	to creditor
■ If you purchase property f	ood insurance from credi	tor you will pay \$0	for a one year term
SECURITY: You are giving a s	ecurity interest in:		
☐ The goods or property being	ng purchased	□ Real propert	y you already own
FILING FEES: \$0			
LATE CHARGE: If a payment	s more than 10 days late,	you will be charge	d a \$25.00 late fee
PRE-PAYMENT: If you pay th	e balance owed off early,	you may	
□ will not have to pay a pena	alty 🗆 will not be e	entitled to a refund	of part of the finance
ACCUMANTION C.			

ASSUMPTION: Someone buying your property

☐ may subject to conditions ☐ may not assume the remainder of your loan in the original terms.

See your contact documents for any additional information about nonpayment, default, or any required repayments in full before the scheduled date and prepayment refunds and penalties

means an estimate

■ all dates and numerical disclosures except the late payment disclosures are estimated.

THE UNDERSIGNED ACKNOWLEDGES RECEIVING A COMPLETED COPY OF THIS DISCLOSURE

DATE APPLICANT APPLICANT DATE

Shelby Township ReStore | 46660 Van Dyke, Shelby Township, MI 48317 tel (586) 263-1540 macombhabitat.org/restore



Macomb County Habitat for Humanity c/o Baker College, 34950 Little Mack Avenue, Clinton Township, MI 48035 (586) 263-1540

Application



We are pledged to the letter and spirit of U.S. policy for we are progress or the letter as spin or oscillations 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, handcap, familial status or national origin.

Habitat Homeownership Program

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 INF	FORMATION						
Applicant				Co-applicant			
Applicant's name				Co-applicant's name			
Social Security number	Home phone	Α	ge	Social Security number	Home phone		Age
☐ Married ☐ Separated	☐ Unmarried (Incl. single,	divorced,	widowed)	☐ Married ☐ Separated	☐ Unmarried (Incl. single	e, divorce	ed, widowed)
Dependents and others who will	Il live with you (not listed by	co-applic	cant)	Dependents and others who v	will live with you (not listed b	y co-ap	olicant)
Name	Age	Male	Female	Name	Age	Mal	e Female
						_ 0	
X							
Present address (street, city, sta	te, ZIP code)	- (Own Rent	Present address (street, city, s	tate, ZIP code)	0	1014-0000 P
Number of years				Number of years			
If you have lived at your present ad	dress for less than two years	s, complet	te the following	ng:			
Last address (street, city, state, 2	ZIP code)	□ (Own Rent	Last address (street, city, state	, ZIP code)	0	
Number of years				Number of years			
				1			
2. FOR OFFICE USE	ONLY — DO NOT	WRIT	EINTH	IS SPACE			
Date received:				Date of selection committee app	proval:		
ate of notice of incomplete applic	cation letter:	*		Date of board approval:			
ate 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:

Yes No
Applicant □ □
Co-applicant □ □

4. PRESENT HOUSING	CONDITIO	NS								
Number of bedrooms (please circle)	1 2	2	3	4	5					
Other rooms in the place where you are Kitchen Bathroom L Other (please describe)	iving room									
f you rent your residence, what is your п Please supply a copy of your lease or a						onth				
lame, address and phone number of cur	rrent landlord:									
n the space below, describe the condition										
5. PROPERTY INFORMA	TION									
you own your residence, what is your m	nonthly mortgage	e payment	1? \$				/ month	Unpaid baland	ce \$	
o you own land? □	□ No □	Yes Mo	onthly pay	ment \$_				Unpaid baland	ce \$	
you wish your property to be considered	d for building yo	ur Habitat	t home, pl	ease attac	h land docum	nentation.				
6. EMPLOYMENT INFOR	MATION									

Applicant Co-applicant Name and address of CURRENT employer Years on the job Name and address of CURRENT employer Years on the job Monthly (gross) wages Monthly (gross) wages Business phone Type of business Business phone Type of business If working at current job less than one year, complete the following information: Name and address of LAST employer Years on the job Name and address of LAST employer Years on the job Monthly (gross) wages Monthly (gross) wages Type of business **Business phone** Type of business Business phone

Income source	Applicant	Co-applicant	Others in household	Total
Wages	\$	\$	\$	\$
TANF	\$	s	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Section 8 housing	\$	\$	\$	\$
Other:		\$	\$	\$
Other:		\$	\$	\$
Other:		\$	\$	\$
Total	\$	\$	\$	\$

PLEASE NOTE: Self-employed applicants may be required to provide additional documentation such as tax returns and financial statements.	HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE						
	Name	Income source	Monthly income	Date of birth			

Where will you get the money to make the down payment or pay for closing costs (for example, savings or parents)? If you borrow the money, whom will you borrow it
from, and how will you pay it back?

8. SOURCE OF DOWN PAYMENT AND CLOSING COSTS

Name of bank, savings and loan, credit union, etc.	Address	City, state	ZIP	Account number	Current balance
					\$
					\$
					\$
					s
					\$
					\$
					\$
					\$

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, appliances, TVs (includes rent-to-own)	\$	\$	\$	\$	\$	\$			
Alimony	\$	\$	\$	\$	\$	\$			
Child support	\$	\$	\$	\$	\$	\$			
Credit card	\$	\$	\$	s	\$	s			
Credit card	\$	\$	s	s	\$	s			
Credit card	\$	\$	\$	\$	\$	\$			
Total medical	\$	\$	s	\$	\$	\$			
Other	\$	s	\$	\$	\$	\$			
Other	\$	\$	s	\$	\$	\$			
Total	s	s	s	\$	\$	s			

Account	Applicant	Co-applicant	Total	
Account	Applicant	Со-аррисант	Iotal	
Rent	\$	\$	\$	
Utilities	\$	\$	\$	
Insurance	\$	\$	\$	
Child care	\$	\$	\$	
Internet service	· \$	s	\$	
Cell phone	\$	s	\$	
Land line	\$	\$	\$	
Business expenses	\$	\$	\$	
Union dues	\$	\$	\$	
Other	\$	\$	\$	
Other	\$	\$	\$	
Other	\$	\$	\$	
Total	s	s	s	TO Y

11. DECLARATIONS	TAR STATE					100			
Please check the box beside the word that best answers the following que	estions for you and the co-applican	ıt:		100					
		Ар	plicant			Co	-applicant		
a. Do you have any outstanding judgments because of a court deci	sion against you?		Yes		No		Yes		No
b. Have you been declared bankrupt within the past seven years?			Yes		No		Yes		No
c. Have you had property foreclosed on or deed in lieu of foreclosu	re in the past seven years?		Yes		No		Yes		No
d. Are you currently involved in a lawsuit?		0	Yes		No		Yes		No
e. Have you directly or indirectly been obligated on any loan which of title in lieu of foreclosure, or judgment?	resulted in foreclosure, transfer		Yes		No		Yes		No
f. Are you currently delinquent or in default on any federal debt or a financial obligation or loan guarantee?	any other loan, mortgage		Yes		No		Yes		No
g. Are you paying alimony or child support or separate maintenance	97		Yes		No		Yes		No
h. Are you a co-signer or endorser on any loan?			Yes		No		Yes		No
i. Are you a U.S. citizen or permanent resident?			Yes		No		Yes		No
I understand that by filing this application, I am authorizing Macomb Coprogram, my ability to repay an affordable loan and other expenses of he I understand that the evaluation will include personal visits, a credit che truthfully, I understand that if I have not answered the questions truthful Habitat home, I may be disqualified from the program and forfeit any rig Macomb County Habitat for Humanity even if the application is not apple I also understand that Macomb County Habitat for Humanity screens a myself to such an inquiry. I further understand that by completing this a	ck and employment verification. I Illy, my application may be denied, this or claims to a Habitat home. To roved.	have and The o	answere that even riginal or	ner thi d all th if I hav a copy	ne question we already to y of this app	s on been blicat	ity. this applica selected to ion will be r	tion reco	eive a ned by
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.									
13. RIGHT TO RECEIVE COPY OF APPRAISA	L								
This is to notify you that we may order an appraisal in connection with y promptly provide a copy to you, even if the loan does not close.	our loan and we may charge you	for th	nis apprai	sal. U	oon comple	tion	of the appra	aisal	, we will
Applicant's name	Co-applicant's name						-		

14. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation or surname

Applicant	Co-applicant
☐ I do not wish to furnish this information	☐ I do not wish to furnish this information
Race (applicant may select more than one racial designation American Indian or Alaska Native Native Hawaiian or other Pacific Islander Black/African-American White Asian Ethnicity: Hispanic or Latino Non-Hispanic or Latino Sex: Female Male Birthdate:/ Marrial status: Married Separated Unmarried (single, divorced, widowed)	Race (applicant may select more than one racial designation): American Indian or Alaska Native Native Hawaiian or other Pacific Islander Black/African-American White Asian Ethnicity: Hispanic or Latino Non-Hispanic or Latino Sex: Female Male Birthdate: Marital status: Married Separated Unmarried (single, divorced, widowed)
To be completed only by the person conducting the interview	
This application was taken by:	Interviewer's name (print or type)
☐ Face-to-face interview	
☐ By mail	Interviewer's signature Date
□ By telephone	Interviewer's 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 at the East Central Region, 1111 Superior Ave., Suite 200, Cleveland, OH 44114-2507, 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(s)		
Signature	Signature	
Print name	Print name	
Date	Date	