

Date: \_\_\_\_\_



## Clare County Habitat for Humanity Homeownership Application

This application assists Clare County Habitat for Humanity in evaluating your eligibility for our homeownership program. Selection is based on housing need, ability to repay an affordable mortgage, and willingness to complete required partnership activities. Completing this form does not guarantee acceptance into the program. All information will remain confidential and used solely for program evaluation in compliance with Fair Housing requirements.

### 1. Applicant and Co-Applicant Information

#### Applicant Information

#### Co-Applicant Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_

### 2. Accessibility Needs (Optional)

This information is used only to ensure safe and appropriate home design.

- |  |  |
|--|--|
| <input type="checkbox"/> Zero-step Entry<br><input type="checkbox"/> First-floor Bathroom<br><input type="checkbox"/> Other: _____<br>_____<br>_____ | <input type="checkbox"/> First-floor Bedroom<br><input type="checkbox"/> Space for mobility device |
|--|--|

If you have home-design or mobility-related needs not listed above, please describe them here.

### 3. Income & Employment Information

#### Applicant Employment

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Monthly Gross Income: \$ \_\_\_\_\_

#### Co-Applicant Employment

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Monthly Gross Income: \$ \_\_\_\_\_

#### Other Income Sources (Check All that Apply)

- Wages or Salary
- Self-Employment
- SSI or SSD
- VA Benefits
- Pension or Retirement Income
- Child Support
- Social Security Retirement
- Alimony
- TANF/FIP (Cash Assistance)
- Unemployment Benefits
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_

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- Wages or Salary
- Self-Employment
- SSI or SSD
- VA Benefits
- Pension or Retirement Income
- Child Support
- Social Security Retirement
- Alimony
- TANF/FIP (Cash Assistance)
- Unemployment Benefits
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_

**Total Estimated Monthly Household Income: \$ \_\_\_\_\_**

(This total must include income from all household members age 18 or older who contribute to the household)

**Have you had any of the following in the past 3 years?**

- Bankruptcy     
  Eviction     
  Foreclosure     
  None of the above

**Are you current on all debt payments?**

- Yes     
  No

#### Household Information

**List the names and ages of all household members:**

Attach additional sheets as necessary

Name	Age

Total number of people who will live in the home: \_\_\_\_\_

Adults age 18 or older: \_\_\_\_\_

Adults contributing income: \_\_\_\_\_

#### 4. Current Housing Situation

##### Current Housing Type

Own    Rent    Living with family or friends    Temporary or unstable housing

Total Estimated Monthly Housing Cost: \$ \_\_\_\_\_  
(Include rent, utilities, etc.)

Describe your current housing concerns or needs:

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Explain why you are applying for a Habitat home:

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#### 5. SWEAT EQUITY REQUIREMENTS

All Habitat partner families must complete sweat equity before closing unless an alternative plan is approved by the Board.

A. Sweat equity may include construction, office support, community volunteer service, homeowner classes, or other approved activities.

B. Off-site volunteer hours must be pre-approved and may not count 1:1.

C. Failure to complete sweat equity requirements before closing may result in removal from the program.

D. Sweat equity cannot be required after closing under law.

Applicant Initials: \_\_\_\_\_

Co-Applicant Initials: \_\_\_\_\_

## 6. Required Attachments

The following documents must be submitted with your completed application. Your application cannot be reviewed until all required items are received. Documents related to income only apply if that income source is listed in Section 3.

### A. Identification

- Government-issued photo ID for each applicant
- Proof of lawful residency (Driver's License, State ID, or legal immigration documentation)

### B. Income Documentation

Provide documentation for each income source listed in Section 3.

- Pay stubs for the last 30 days (*if employed*)
- W-2s or 1099s for the last 2 years (*if applicable*)
- Federal tax returns for last 2 years (*if filed*)
- Social Security, SSI, or SSDI benefit letter (*if applicable*)
- VA benefits award letter (*if applicable*)
- Child support documentation (*if applicable*)
- Alimony documentation (*if applicable*)
- Pension or retirement statement (*if applicable*)
- TANF / FIP determination letter (*if applicable*)
- Self-employment income summary, tax return, or profit and loss statement (*if applicable*)
- Unemployment benefit statement (*if applicable*)
- Other income verification: \_\_\_\_\_

### C. Financial Documentation

- Bank statements for the last 2 months
- Documentation for outstanding debts, if requested
- Documentation for assets, if requested

### D. Other Documentation (If Applicable)

- Court documentation for child custody, guardianship, or support orders
- Any additional items requested by Habitat staff to complete verification

## 7. Applicant Certification

By signing below, I certify that:

A. All information provided in this application is true, complete, and accurate to the best of my knowledge.

B. I understand that providing false, incomplete, or misleading information may result in denial or removal from consideration.

C. I authorize Clare County Habitat for Humanity to verify all information included in this application, including employment, income, rental history, financial information, and identity.

D. I understand that this application does not guarantee acceptance into the Habitat homeownership program.

E. I understand that a separate authorization form will be required for credit and background checks.

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

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

## 8. Optional HUD Demographic Information

Completion of this section is voluntary. It does not affect eligibility or selection. Information is collected for federal reporting requirements only.

### A. Race (Select all that apply)

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Other: \_\_\_\_\_

### B. Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino

### C. Veteran Status

- Veteran
- Active Duty
- Not a Veteran

### D. Primary Language Spoken at Home

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