Affordable Homeownership Program Application Overview

Hometown Habitat for Humanity offers an affordable housing program that builds and sells safe, decent, affordable homes to qualifying partner families & individuals. Our program is made possible through community support, donations, and volunteers who work alongside our homebuyers. Habitat is not a giveaway program: we sell our homes at their appraised value using a 0% interest loan.

The qualifications to purchase a Habitat for Humanity home include:

1. I have a need for affordable housing - one or more of the following:

- □ I have not owned my own home within the last 3 years
- My rent and utilities cost too much
- □ My current housing is overcrowded
- □ My current housing needs critical repairs

2. I have the ability to pay for a Habitat home - all of the following:

- □ I have no court judgments filed against me
- □ I have not declared bankruptcy in the last 3 years
- □ I have a good history of making payments on time
- □ My household has had a steady monthly income for the last year
- □ My household's pre-tax income falls within these 2023 HUD Area Median Income (AMI) guidelines:

	Wilkes County, NC — Qualifying Income Ranges				
Household Size	50% AMI (lowest)	80% AMI (highest)			
1	\$ 24,250	\$ 38,750			
2	\$ 27,700	\$ 44,300			
3	\$ 31,150	\$ 49,850			
4	\$ 34,600	\$ 55 <i>,</i> 350			
5	\$ 37,400	\$ 59,800			
6	\$ 40,150	\$ 64,250			
7	\$ 42,950	\$ 68,650			
8	\$ 45,700	\$ 73,100			

3. I am willing to partner with Habitat - if selected, I will do all of the following:

- I agree to attend all required homebuyer education classes
- □ Each applicant in my household agrees to complete 250 hours of "sweat equity"
- □ I agree to pay for the first year of homeowners insurance before purchasing the home
- □ I currently live or work in Surry County, Wilkes County, or Yadkin County in NC
- □ I would like to live in the Town of Wilkesboro, where the next Habitat homes will be built

To apply, submit completed application with proof-of-income documents

Hometown Habitat for Humanity (HHFH) - 336-838-3044 www.HometownHabitat.org





HOMETOWN HABITAT FOR HUMANITY 320 COTHREN STREET WILKESBORO, NC 28697 (336) 838-3044





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: We need you to complete this application to determine if you qualify for a Habitat for Humanity house. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

	1	. APPLICAN	TINFORMATION					
Applicant			Co-applicant					
Applicant's Name			Co-applicant's Name					
Social Security Number	Home Phone	Age	Social Security Number	Home Phone		Age		
□ Married □ Separated □ Unmarried (Incl. single, divorced	, widowed)	☐ Married □ Separated □ Un	married (Incl. single, divorce	ed, wido	wed)		
Dependents and others who will live with Name	you (not listed by Age	co-applicant) Male Female	Dependents and others who will Name	live with you (not listed b Age		cant) Female		
					_ 🗆			
Present Address (street, city, state, ZIP co	ode) 🗆 Own	□ Rent	Present Address (street, city, sta	te, ZIP code) 🗆 Ow	n □R	ent		
Number of Years			Number of Years					
If Living :	at Present Addr	ess for Less	Than Two Years, Complete the F	ollowing				
Last Address (street, city, state, ZIP code)		🗆 Rent	Last Address (street, city, state,		n □R	ent		
Number of Years			Number of Years					
2	FOR OFFICE L	JSE ONLY -	DO NOT WRITE IN THIS SPAC	E				
Date Received:								

3. WILLINGNESS TO PARTNER			
To be considered for a Habitat home, you and your family must be willing to complete a certain numbing your home and the homes of others is called "sweat equity," and may include clearing the lot, pa	ier of "sweat-equity" hou inting, helping with const	rs. Your he ruction, w	elp in build- orking in
the Habitat office, attending homeownership classes or other approved activities.	Applicant	Yes	No □
I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:	Applicant: Co-applicant:		
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 ne	ed a Habitat home?	; F	
5. PROPERTY INFORMATION			
If you own your residence, what is your monthly mortgage payment? \$ /mo	nth Unpaid Balance \$_		
Do you own land? \Box No \Box Yes (If yes, please describe, including location)			

Is there a mortgage on the land? 🗆 No 🗆 Yes If yes: Monthly Payment \$Unpaid Balance \$

If you are approved for a Habitat home, how should your name(s) appear on the legal documents?

		6. EMPLOYMEN	TINFORMATION			
Applicant			Co-applica	nt		
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	ype of Business Business Phone		Type of Business	Busin	ess Phone	
If Working at	Curren	t Job Less Than One	Year, Complete the Following Informat	ion	and the second	
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	Busir	ness Phone		

Gross Monthly Income	7. N Applicant	Co-Applicant	ND COMBINED MONTH ² Others in Household		Monthly Amount
¹ Base Employment Income	\$	\$	\$	Rent	\$
TANF				Utilities	
Food Stamps				Car Payments	
Social Security				Insurance	
SSI				Child Care	
Disability				School Lunch	
Alimony				Average Credit Card Paymen	t
Child Support				Student Loans	
Other				Alimony/Child Support	
Total	\$	\$	\$	Total	\$
and how will you pay it bac	ns and financial st at month's bills. 8. ey to make the do k?	atements. SOURCE OF DOWN wn payment (for exam List Checking an	Name PAYMENT AND CLOSIN ple, savings or parents)? If 9. ASSETS Id Savings Accounts Bel	you borrow the money, who wil	
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Name and Address of Bank,	, Savings & Loan, -	or Credit Union:	Name and Address	of Bank, Savings & Loan, or Cre	dit Union:
Account Number:		Balance \$	Account Number:	Bala	
Name and Address of Bank,			, loobant ramber		nce \$
	, Savings & Loan,			of Bank, Savings & Loan, or Cre	

Do you own a:	Yes		No	Do you own a:				Ye	s No
Boat				Car (#1)				C	
Mobile Home				Make and Year				_	
 Washer				Car (#2)					
Dryer				Make and Year				_	
,			10.	D E B T					
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(COLUMN 1				COLUMN	2		574-	
Car		Monthly Payment	Unpaid Balance	Cell Phone Contracts			Monthly Payment	Unp Bala	
		\$	\$				\$	\$	
		Mos. left to	pay:				Mos. left to	pay:	
Furniture, Appliances and Telev	visions	Monthly	Unpaid	Other Money You Owe					
		Payment	Balance	Name and Address of Compa	ny		Monthly Payment	Unp Bala	
		\$	\$				\$	\$	
Credit Card		Mos. left to Monthly	Unpaid	-			Mos. left to	pay:	
		Payment	Balance	Alimony/Child Support			\$		/month
		\$	\$	Job-related Expenses			\$		/month
Medical		Mos. left to Monthly	pay: Unpaid	(Child Care, Union Dues, etc.)			\$		/month
		Payment	Balance	Column 2: Subtotal of Payı	nents		\$		/month
		\$ Mos. left to	\$	Column 1: Subtotal of Payı			\$		/month
		\$	/month	Total Monthly Expenses			\$		/month
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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 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			
	□ I do not wish to furnish this information	\Box I do not wish to furnish this information			
Race	/National Origin:	Race/National Origin:			
	American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander Black/African American Caucasian Asian American Indian or Alaskan Native AND Caucasian Asian AND Caucasian Black/African American AND Caucasian	 American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander Black/African American Caucasian Asian American Indian or Alaskan Native AND Caucasian Asian AND Caucasian Black/African American AND Caucasian 			
	American Indian or Alaskan Native AND Black/African American Other (specify)	 American Indian or Alaskan Native AND Black/African American Other (specify) 			
Sex: □ Fe	i city: spanic DNon-Hispanic	Ethnicity: Hispanic Non-Hispanic Sex: Female Male Birthdate:			
	tal Status: arried	Marital Status:			

	o Be Completed Only By the Person Conducting the	e Interview
	Interviewer's Name (print or type)	
This application was taken by:		
□ Face-to-face Interview	Interviewer's Signature	Date
🗆 By Mail		
🗆 By Telephone	Interviewer's Phone Number	