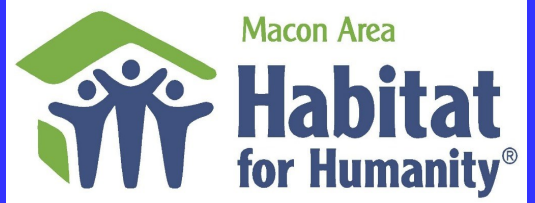




HOMEOWNER



APPLICATION

**Macon Area Habitat for Humanity**  
**690 Holt Avenue Macon, Georgia 31204**  
**Telephone: (478) 745-0630 ex. 301**  
**[www.maconhabitat.org](http://www.maconhabitat.org)**  
**Family Selection Criteria**

**What is Macon Area Habitat for Humanity?**

Macon Area Habitat for Humanity is an ecumenical Christian nonprofit organization building affordable homes with people who qualify. Homeowners spend a minimum of 300 hours working with Habitat to complete the requirement of “sweat equity” and purchase their homes from Habitat with an interest-free mortgage. The monthly payment for a 3-bedroom house is between \$450-\$500 per month including insurance and taxes.

**Do I Qualify to Buy a Habitat for Humanity Home?**

**You may be eligible if you meet Habitat’s 3 basic guidelines (Need, Ability to Pay, & Willingness to Partner) and can answer “yes” to all of the following statements:**

**1. I have a Need:**

The housing I live in is at least one of the following:

- Overcrowded
- Poorly maintained (substandard)
- In a dangerous neighborhood
- Public housing or Section 8
- Temporary (I will not be able to live here much longer)
- I spend more than 35% of my gross income on rent

**AND**

My income falls within the following guidelines:

**Macon Area Habitat for Humanity**  
**Income Guidelines – 2016**

# of people	25%	60%
1	9225	22140
2	10550	25320
3	11875	28500
4	13175	31620
5	14250	34200
6	15300	36720
7	16350	39240
8	17250	41400

## 2. I have the ability to pay:

I have not declared bankruptcy/foreclosure within the last 3 years and any existing bankruptcy has been satisfied or discharged.

- I pay my rent on time
- I have had a stable income for the past year

## 3. I am willing to partner with Habitat:

- I am willing to be a partner with Habitat and put in at least 300 hours of “sweat equity” first working on other families’ homes, and then building my own home. I will also attend homeowner education classes. I understand that Habitat does not give away houses, and I know that I will be held responsible for paying back a mortgage for 20 years.
- I have been living or working in either Bibb or Jones County for at least the last year.
- I understand that Macon Area Habitat for Humanity is building houses **only in Lynmore Estates** and, if approved, I am willing to move to, and live in, Lynmore Estates.
- I understand that Habitat will build a home that is appropriate for my family and its size. Which does include children of the same age and same sex will share a room.

## What will be required of me if I am approved?

- Work at least 300 hours of “Sweat Equity” – first help build other families’ homes, then help build your own home.
- Attend homeowner education classes.
- Pay a deposit of up to \$1700 before closing.
- Debt MUST NOT INCREASE before closing on your home.
- Pay a monthly mortgage for 20 years.

## How do I apply for a Macon Habitat House?

Please contact Habitat for Humanity at (478) 745-0630 ex. 301 or HomeFirst at (478) 803-2373 to learn more about homeownership programs in Macon. You should expect the application process to take 4 months between turning in an application and beginning construction on your house **if** you are approved as a homeowner.



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. 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 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)					Present Address (street, city, state, zip code)		Present Address (street, city, state, zip code)		
<input type="checkbox"/> Own <input type="checkbox"/> Rent					<input type="checkbox"/> Own <input type="checkbox"/> Rent		<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)					Last Address (street, city, state, zip code)				
<input type="checkbox"/> Own <input type="checkbox"/> Rent					<input type="checkbox"/> Own <input type="checkbox"/> Rent				
Number of Years _____					Number of Years _____				

## Date Received: \_\_\_\_\_

More Information Requested? | ☐ Yes | ☒ No

Date Application Completed:

Accepted Denied

Date Letter Sent: \_\_\_\_\_

Date of Home Visit: \_\_\_\_\_

Date Letter Sent: \_\_\_\_\_

### 3. WILLINGNESS TO PARTNER

To be considered for a Habitat home, 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, 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"/>

### 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 cancelled 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 (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. EMPLOYMENT INFORMATION

Applicant		Co-Applicant	
Name and Address of <b>Current</b> Employer	Years On This Job	Name and Address of <b>Current</b> 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 <b>Last</b> Employer	Years On This Job	Name and Address of <b>Last</b> Employer	Years On This Job
	Monthly (Gross) Wages \$		Monthly (Gross) Wages \$
Type of Business	Business Phone	Type of Business	Business Phone



**7. MONTHLY INCOME AND COMBINED MONTHLY BILLS**

Gross Monthly Income	Applicant	Co-Applicant	<sup>2</sup> Others in Household	<sup>3</sup> Monthly Bills	Monthly Amount
<sup>1</sup> Base Employment Income	\$	\$	\$	Rent	\$
AFDC/TANF				Utilities	
Food Stamps				Car Payments	
Social Security				Insurance	
SSI				Child care	
Disability				School Lunch	
Alimony				Average Credit Card Payment	
Child Support				Student Loans	
Other				Alimony/Child Support	
<b>Total</b>	\$	\$	\$	<b>Total</b>	\$

<sup>1</sup>Self-employed applicant(s) may be required to provide additional documentation such as tax returns and financial statements.

<sup>3</sup>Please attach copies of last month's bills.

<sup>2</sup>List additional household members over 18 who receive income:

Name	Age	Monthly Wages
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**8. SOURCE OF DOWNPAYMENT AND CLOSING COSTS**

Where will you be getting the money to pay the down payment and closing costs (for example: savings, parents)? If you are borrowing money to pay these costs, explain how and from whom.

**9. ASSETS****List Checking and Savings Accounts Below**

Name and Address of Bank, Savings & Loan, or Credit Union:	Name and Address of Bank, Savings & Loan, or Credit Union:
Account Number: Balance \$	Account Number: Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union:	Name and Address of Bank, Savings & Loan, or Credit Union:
Account Number: Balance \$	Account Number: Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union:	Name and Address of Bank, Savings & Loan, or Credit Union:
Account Number: Balance \$	Account Number: Balance \$

<b>Do you own a:</b>	Yes	No	<b>Do you own a:</b>	Yes	No
Stove	<input type="checkbox"/>	<input type="checkbox"/>	Car (#1)	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	Make and Year _____		
Washer	<input type="checkbox"/>	<input type="checkbox"/>	Car (#2)	<input type="checkbox"/>	<input type="checkbox"/>
Dryer	<input type="checkbox"/>	<input type="checkbox"/>	Make and Year _____		

10. DEBT					
To Whom Do You and the Co-Applicant Owe Money?					
Car	Monthly Payment	Unpaid Balance	Name and Address of Company	Monthly Payment	Unpaid Balance
	\$	\$		\$	\$
	Mos. left to pay:			Mos. left to pay:	
Furniture	Monthly Payment	Unpaid Balance	Name and Address of Company	Monthly Payment	Unpaid Balance
	\$	\$		\$	\$
	Mos. left to pay:			Mos. left to pay:	
Credit Card	Monthly Payment	Unpaid Balance	Alimony/Child Support	\$	/month
	\$	\$	Job-Related Expenses	\$	/month
	Mos. left to pay:		(Child Care, Union Dues, etc.)	\$	/month
Medical	Monthly Payment	Unpaid Balance	<b>Column 2: Subtotal of Payments</b>	\$	/month
	\$	\$	<b>Column 1: Subtotal of Payments</b>	\$	/month
	Mos. left to pay:				
<b>Column 1: Subtotal of Payments</b>	\$	/month	<b>Total Monthly Expenses</b>	\$	/month

11. DECLARATIONS				
Please Check the Box That Best Answers the Following Questions For You and the Co-Applicant.				
	Applicant		Co-Applicant	
a. Do you have any debt 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 7 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 last 7 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
<p>Answering "yes" to these questions does not automatically disqualify you. If you answered "yes" to any question <b>a</b> through <b>e</b>, however, please explain on a separate sheet of paper.</p>				

12. AUTHORIZATION AND RELEASE			
<p>I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to be a partner family. 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.</p>			
Applicant Signature	Date	Co-Applicant Signature	Date
X _____		X _____	
<p><b>PLEASE NOTE:</b> 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.</p>			

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 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
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
<b>Race/National Origin:</b>	<b>Race/National Origin:</b>
<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> American Indian or Alaskan Native
<input type="checkbox"/> Native Hawaiian or other Pacific Islander	<input type="checkbox"/> Native Hawaiian or other Pacific Islander
<input type="checkbox"/> Black/African American	<input type="checkbox"/> Black/African American
<input type="checkbox"/> Caucasian	<input type="checkbox"/> Caucasian
<input type="checkbox"/> Asian	<input type="checkbox"/> Asian
<input type="checkbox"/> American Indian or Alaskan Native AND Caucasian	<input type="checkbox"/> American Indian or Alaskan Native AND Caucasian
<input type="checkbox"/> Asian AND Caucasian	<input type="checkbox"/> Asian AND Caucasian
<input type="checkbox"/> Black/African American AND Caucasian	<input type="checkbox"/> Black/African American AND Caucasian
<input type="checkbox"/> American Indian or Alaskan Native AND Black/African American	<input type="checkbox"/> American Indian or Alaskan Native AND Black/African American
<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Other (specify)
<b>Ethnicity:</b>	<b>Ethnicity:</b>
<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
<b>Sex:</b>	<b>Sex:</b>
<input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> Female <input type="checkbox"/> Male
<b>Birthdate:</b> ____/____/____	<b>Birthdate:</b> ____/____/____
<b>Marital Status:</b>	<b>Marital Status:</b>
<input type="checkbox"/> Married	<input type="checkbox"/> Married
<input type="checkbox"/> Separated	<input type="checkbox"/> Separated
<input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)	<input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)

**To Be Completed Only By the Person Conducting the Interview**

This application was taken by:

☐ Face-to-Face Interview☐ By Mail☐ By Telephone

Interviewer's Name (print or type)

Interviewer's Signature

Date

Interviewer's Phone Number



Dear Sir/Madam,

In order to complete the processing of your Habitat for Humanity application, please be advised the following documents and information are required.

**Income Items Required:**

- \_\_\_ Last two years tax returns and/or W2's
- \_\_\_ One month's of most recent pay stub from your present employer showing year-to-date earnings and pay period
- \_\_\_ Verification and explanation of commissions, bonuses, overtime, child support payments, and other income (**SSI, TANF**)
- \_\_\_ Bankruptcy petition, discharge, and written explanation of any bankruptcy
- \_\_\_ Final divorce or separation papers

**Credit Items Required:**

- \_\_\_ Signed landlord and employment verification
- \_\_\_ Explanation letter for any slow pays, judgments, liens, defaults, foreclosures, bankruptcies
- \_\_\_ Credit Report

**Other Items:**

- \_\_\_ Most recent electric, gas, **and** telephone bills showing no delinquency
- \_\_\_ Twelve months' history of all utility bills
- \_\_\_ Most recent monthly/quarterly bank statements

**Your application cannot be fully processed until the requested information is received. Delays in receipt of requested information may result in the expiration of your application. Other information may be requested during the processing of your application.**

**Please bring your completed application and all of the supporting documents to our office.**

Macon Area Habitat for Humanity  
690 Holt Avenue  
Macon, Georgia 31204  
(478) 745-0630 ex. 301  
(478) 745-0679 fax

---

(478) 745-0630 voice ~ (478) 745-0679 fax ~ [info@maconhabitat.org](mailto:info@maconhabitat.org) ~ [www.maconhabitat.org](http://www.maconhabitat.org)