

PARTNERSHIP IN HOME BUILDING APPLICATION

Herkimer County Habitat for Humanity

A. Applicant Information

Applicant's Name _____

Applicant's Birthdate _____ SS #: _____

Are You a legal U.S. resident: _____ Yes _____ No

Marital Status:
 _____ Married _____ Unmarried (Include: Single, divorced, widowed) _____ Separated

Applicant's Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number - Home: _____ Work: _____

How long have you lived at the above address? _____

Co-Applicant's Name: _____ Co-Applicant's Birthdate: _____

Co-Applicant's SS #: _____ Are you a legal U.S. Resident: _____ Yes _____ No

Co-Applicant's Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number - Home: _____ Work: _____

How long have you lived at the above address? _____

List below the names of all the people who live in your home, including yourself:

Name	Age	M/F	Relationship to Applicant	How long a part of the household?
1 _____	_____	_____	SELF	_____
2 _____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____
5 _____	_____	_____	_____	_____
6 _____	_____	_____	_____	_____
7 _____	_____	_____	_____	_____
8 _____	_____	_____	_____	_____

B. Verification of Information

1. Please enclose a copy of your most recent Federal and/or State Income Tax Returns and W2 or paycheck earnings statement with this application.
2. **Credit Check:** APPLICANTS WILL BE RESPONSIBLE FOR A CREDIT CHECK FEE.

C. Present Housing Situation:

_____ Owned _____ Rented _____ Other (Please describe): _____

Number of bedrooms: (Please Circle) 1 2 3 4 5

Other rooms in the house: _____Kitchen _____Bathroom _____Living Room _____ Dining Room

If Renting, What is your monthly rent? _____ Does this include utilities? _____

Name of Landlord: _____ Address: _____

_____ Telephone # _____

What is the condition of the house you live in? _____

Do you own land? _____ No _____ Yes If so, where? _____

D. Income:

Applicant 1: I work _____ job(s). I work _____ hours per week.

My job is _____

1. Before deductions, my job pays \$ _____ per (circle below which applies)
week 2 weeks month year

2. After deductions, I bring home a check of \$ _____ per (circle below which applies)
week 2 weeks month year

3. I work _____ hours of overtime in an average (circle which applies)
week 2 weeks month year

4. Employment: I work for _____
Street _____
Town/State _____ Zip _____
Supervisor's name _____ Telephone # _____

5. I have worked this job _____ years and _____ months.

6. If you have worked at this job less than 2 years, list the name and address of your former employer:

7. If you have more than one job, list employer, supervisor, job title, address and telephone number for each job on attached sheet(s).

F. Debts: (To whom does the family owe money?) Include all credit cards held listed by largest amounts first. Do not list utilities unless currently overdue.

Person/Company	What for?	Amount Owed	Monthly Payment
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____

Do you pay child support? _____ yes _____ no

If so, are your payments current? _____ yes _____ no

How much per month? \$ _____ Until _____ (month) _____ (year)

OTHER INFORMATION

Please state why you are applying to Habitat for Humanity for a house.

What will you and your family do to help build your own house and other Habitat houses?

Is there anything else Habitat should know about you and your family?

RELEASE OF INFORMATION

I/WE HERBY GIVE PERMISSION TO Herkimer County Habitat for Humanity to contact my employer, past employer, landlord, past landlord and references, and to do a credit check for the purpose of verifying the information included in this application and to determine my credit and need for Habitat housing. Habitat may also do a criminal background check.

Signed this day:

Applicant 1 _____ Date: _____

Applicant 2 _____ Date: _____

If I/we are selected, I/we recognize and accept that I/we will need to be part of the publicity for Habitat for Humanity. I/we agree to the release of information, including names or photographs to the media.

Signed this day:

Applicant 1 _____ Date: _____

Applicant 2 _____ Date: _____

- Please send:
1. This completed form
 2. Copy of your last two consecutive pay stubs from each job
 3. Copy of your last Federal and/or State income tax return form 1040.

Please send to: Herkimer County Habitat for Humanity
PO Box 148
Herkimer, NY 13350

I/WE understand that 25 hours of the 500 sweat equity hours MUST BE COMPLETED BEFORE ACCEPTANCE AS A PARTNER FAMILY with Herkimer County Habitat for Humanity. If I am/we are *not* accepted as a partner family, there will be NO reimbursement for sweat equity hours.

Signed:

Applicant 1: _____ Date: _____

Applicant 2: _____ Date: _____

We are pledged to the letter and spirit of US 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.

