



Habitat for Humanity of Greenville County
Family Services Department
 P.O. Box 1206, Greenville, SC 29602
 Phone: (864) 372-3936 Fax: (864) 312-5004
www.habitatgreenville.org



"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. Habitat for Humanity is an Equal Housing Opportunity."

Homeownership Program Eligibility & Pre-Qualification

Date Received: _____
 (Office Use Only)

Dear Program Candidate: Please complete this pre-qualification form to determine if you are eligible to participate in the Habitat for Humanity of Greenville County homeownership program. All information you include on this form will remain confidential in accordance with the Gramm-Leach-Bliley Act. All sections of this form must be filled out completely and accurately. Please allow 2-4 weeks for processing.

SELECTION CANDIDATE INFORMATION

How did you learn about the Habitat Greenville homeownership program?

Candidate's Name: _____ Nickname: _____
 Last First MI

Current Address: _____ (_____) _____
 Street Address Apt # City Zip Code County

How long have you lived at this address? _____ (Months/Years)

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Marital Status: Married *Separated Unmarried (single, *divorced or widowed)

*Legal documentation of marital status will be required in order to complete qualification process

Phone: Home/Cell: _____ Work: _____ E-mail : _____

How long have you lived or worked in Greenville County? _____ (Months/Years)

Employer/Major Income Source: _____ Employment Start Date: ____/____/____

Hourly Wage: \$ _____ # hours worked per week: _____ Total Annual (gross) income: \$ _____

Other Annual Income: \$ _____ SSI/Disability Child Support Social Security Other

If you have been employed by your current employer less than one year, please provide two years of employment history. You may use an additional sheet of paper, if needed.

Start date	End date	Employer	Hours/week	Hourly wage
____/____/____	Currently employed			
____/____/____	____/____/____			
____/____/____	____/____/____			

Please explain any gaps in employment over the last two years. You may use an additional sheet of paper, if needed.

CO-CANDIDATE/SPOUSE INFORMATION

Candidate's Name: _____ Nickname: _____
Last First MI
Current Address: _____ (_____) _____
Street Address Apt # City Zip Code County

How long have you lived at this address? _____ (Months/Years)

Social Security Number: ____ - ____ - ____ Date of Birth: ____/____/____

Marital Status: Married *Separated Unmarried (single, *divorced, widowed)
***Legal documentation of marital status will be required in order to continue qualification process**

What is your relationship to the primary candidate? Spouse/Life Partner Parent Other

Phone: Home/Cell: _____ Work: _____ E-mail : _____

How long have you lived or worked in Greenville County? _____ (Months/Years)

Employer/Major Income Source: _____ Employment Start Date: ____/____/____

Hourly Wage: \$ _____ # of Hours worked per week: _____ Total Annual (gross) income: \$ _____

Other Annual Income: \$ _____ SSI/Disability Child Support Social Security Other

If you have been employed by your current employer less than one year, please provide two years of employment history. You may use an additional sheet of paper, if needed.

Start date	End date	Employer	Hours/week	Hourly wage
____/____/____	Currently employed			
____/____/____	____/____/____			
____/____/____	____/____/____			

Please explain any gaps in employment over the last two years. You may use an additional sheet of paper, if needed.

RESIDENT INFORMATION

Number of Adults (18 and over) to occupy the Home: _____ **Number of Children** (17 and younger) to occupy the Home: _____

Dependents: *please list all other individuals who live in your home*

NAME	GENDER	SOCIAL SECURITY #	DOB / AGE (write both)	RELATIONSHIP

NEED FOR HOUSING

How long have you lived at your current residence? (Month, year) _____

Are you currently residing in subsidized housing? YES NO

Do you currently live with relatives or friends? YES NO

How much rent do you pay monthly? \$ _____ Current Landlord/Property Manager: _____

Address: _____

City State Zip Code

Fax #: _____

Is the cost of utilities included in your rent?..... YES NO

Does the amount of monthly rent change when your income changes?..... YES NO

Do you have central heating and or air?..... YES NO

Do you feel safe in your current housing?..... YES NO

Is your plumbing in need of repair?..... YES NO

Do you have electrical problems?..... YES NO

Are there any structural problems?..... YES NO

Is maintenance/management responsive to your repair requests?..... YES NO

How many bedrooms do you have?: _____ How many bathrooms do you have?: _____

Tell us why you believe you need a Habitat for Humanity home. *Please feel free to use an additional sheet of paper if needed.*

ABILITY TO PAY

DEBTS				
	Monthly Payment Amount	Interest Rate	Balance on Account	# of Months until Paid
Car Payment	\$ <input style="width: 80%;" type="text"/>		\$ <input style="width: 80%;" type="text"/>	
Student Loans	\$ <input style="width: 80%;" type="text"/>		\$ <input style="width: 80%;" type="text"/>	
Credit Card(s)	\$ <input style="width: 80%;" type="text"/>		\$ <input style="width: 80%;" type="text"/>	
Other _____	\$ <input style="width: 80%;" type="text"/>		\$ <input style="width: 80%;" type="text"/>	

MONTHLY HOUSEHOLD INCOME

Gross Monthly Income Source	Candidate	Co-Candidate	Others in Household	Total
Salary/Wages	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
TANF	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alimony	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Child Support	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Social Security	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
SSI	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Retirement/Pension	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Disability	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other _____	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Total	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**** Please Note:** Self-employed candidates will be asked to provide additional documentation such as tax returns and financial statements

ESTIMATED MONTHLY EXPENSES

	Candidate	Co-Candidate
Rent	\$ <input type="text"/>	\$ <input type="text"/>
Utilities	\$ <input type="text"/>	\$ <input type="text"/>
Insurance	\$ <input type="text"/>	\$ <input type="text"/>
Child Care	\$ <input type="text"/>	\$ <input type="text"/>
Telephone	\$ <input type="text"/>	\$ <input type="text"/>
Internet/Cable	\$ <input type="text"/>	\$ <input type="text"/>
Groceries	\$ <input type="text"/>	\$ <input type="text"/>
Gasoline	\$ <input type="text"/>	\$ <input type="text"/>
Clothing	\$ <input type="text"/>	\$ <input type="text"/>
Savings Deposits	\$ <input type="text"/>	\$ <input type="text"/>
Church/Charity	\$ <input type="text"/>	\$ <input type="text"/>
Total	\$ <input type="text"/>	\$ <input type="text"/>

ASSETS		
	Financial Institution Name, City	Current Balance
Checking		\$ <input type="text"/>
Savings		\$ <input type="text"/>
Credit Union		\$ <input type="text"/>
Other _____		\$ <input type="text"/>
Other _____		\$ <input type="text"/>
Total		\$ <input type="text"/>

DECLARATIONS				
	Candidate		Co-Candidate	
1. Are you a US citizen or permanent resident?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2. Do you have any outstanding judgments or liens because of a court decision against you?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. Have you declared bankruptcy within the last 2 years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4. Are you a co-signer on any loans?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5. Have you ever applied for a mortgage?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6. Have you ever owned a home?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7. Have you had a home or property foreclosed on in the past 2 years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
8. Are you currently involved in any lawsuit?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
9. Are you paying alimony or child support?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
10. Have you ever served in the Armed Forces?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
11. Have you ever been arrested, cited, charged or been placed on probation for any criminal violation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO

If you answered "yes" to any question 2-11 above, please explain briefly below:

INCOME CERTIFICATION			
I HEREBY CERTIFY that the information I have given about my income and assets is correct. I further consent to release of information required or requested by Department of Family Services.			
_____	_____	_____	_____
Candidate Signature	Date	Co-Candidate Signature	Date

DECLARATION OF CITIZENSHIP			
I HEREBY CERTIFY that I am a Citizen of the United States of America.			
_____	_____	_____	_____
Candidate Signature	Date	Co-Candidate Signature	Date

Is there anything else you would like Habitat for Humanity of Greenville County to know about you and your family? Please include any physical or mental limitations, special needs or accommodations required for your family.

You may use an additional sheet of paper if needed.

WILLINGNESS TO PARTNER

To be considered for Habitat for Humanity homeownership, you and your family must be willing to complete a certain number of "sweat equity" hours. "Sweat Equity" is helping build your home and the homes of others and may include clearing the lot and helping with construction, as well as working in the Habitat office, attending classes, or other approved community service activities. Please read each question below and answer truthfully. Co-candidates and spouses must also answer.

	Candidate	Candidate	Co-Candidate	Co-Candidate
Habitat for Humanity of Greenville County is a drug-free organization and I am willing to keep all family members in my home drug-free.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am willing to earn at least 200 "sweat equity" hours at the rate of at least 20 hours per month.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am willing to work in partnership with Habitat staff and volunteers.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am willing to make monthly payments toward \$2000 in closing costs until paid in full.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am willing to participate in all required homeownership education classes.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am willing to accept a home in the areas where Habitat is building, and understand that while my location preferences are considered, they cannot be guaranteed.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am willing to provide all documents and information within 7 days of request in order to ensure my file is complete.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Please read the following statements carefully. Your signature on page 7 indicates that you understand and agree to the terms outlined below:

I understand that by submitting this eligibility & pre-qualification form, I am authorizing Habitat for Humanity of Greenville County to continually evaluate my actual need for a Habitat for Humanity home, my ability to repay the loan and manage other expenses of homeownership, and my willingness to be a partner family throughout my participation in the program.

I understand that the evaluation of my participation will include credit checks, background checks, employment verifications, landlord references, a financial assessment, personal references and a home visit. My submission of this eligibility form is for program qualification purposes only, and my selection as a partner family is not guaranteed, but contingent upon successful completion of the program and all of its requirements as well as pre-approval for financing. I understand that completion of this form in no way guarantees that I will receive housing through the Habitat for Humanity of Greenville County homeownership program.

(continued)

I certify that all of the information provided in this eligibility & pre-qualification form is accurate and truthful. I understand that providing false or misleading information to Habitat is grounds for rejection of my participation in the program and future assistance with affordable housing through Habitat for Humanity.

I understand that I must notify Habitat immediately of any changes in my information, including but not limited to telephone number, address, employment, and the persons to occupy the home. Failure to do so may be grounds for rejection of my participation in the program and future assistance with affordable housing through Habitat for Humanity.

I understand that this pre-qualification form and all documents received by Habitat becomes the sole property of Habitat for Humanity of Greenville County, even if I am deemed ineligible or disqualified from the program.

Signature of Candidate

Date

Signature of Co-Candidate

Date

AUTHORIZATION AND RELEASE OF INFORMATION

I understand that by completing this qualification form, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat homeownership program, my ability to replay the mortgage loan offered to me and any other expenses related to homeownership including maintenance and repair, as well as my willingness to be a partner through sweat equity. I understand that the evaluation will include a personal interview, home visit, pre-approval for financing, a credit check and a background check.

I have answered all the questions on this form truthfully and understand that my participation will be denied and I will be disqualified from the program if I have provided any false or misleading information, even if I have already been approved to receive a Habitat home. The original or a copy of this form will be retained by Habitat for Humanity even if I am deemed ineligible for the program.

I also understand that Habitat for Humanity screens all prospective families on the sex offender registry. By completing this form and signing below, I am also submitting myself to such an inquiry. I further understand that by completing this qualification form, I am submitting myself to a criminal background check.

Signature of Candidate

Date

Signature of Co-Candidate

Date

Mail completed form to:

OR

Drop-off completed form to:

Habitat for Humanity of Greenville County
Family Services Department
P.O. Box 1206
Greenville, SC 29602

Habitat for Humanity of Greenville County
50 Grand Ave.
Greenville, SC 29607

Fax completed form to 864-312-5004

Email completed form to familyservices@habitatgreenville.org

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HOMEOWNER APPLICANT VOLUNTARY INFORMATION FORM

HABITAT FOR HUMANITY OF GREENVILLE COUNTY, SOUTH CAROLINA

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

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 the 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 not furnish it. 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 above information, please check the box below. (Lender must review the above material to assure the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.)

APPLICANT

Race/national origin:

- I do not wish to furnish this information.
- American Indian or Alaskan Native
- Asian
- White
- Native Hawaiian/Pacific Islander
- Black or African American
- American Indian or Alaskan Native and White
- Asian and White
- Black or African American and White
- American Indian/Alaskan Native and Black/African American
- Other/Multiracial (specify)_____

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino

Sex:

- Female
- Male

TO BE COMPLETED BY THE AFFILIATE:

This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone	Received by (print or type name) _____

	Signature Date

Note to affiliate: Once the homebuyer applicant submits an application form, an affiliate representative not involved in the homeowner selection must detach this sheet from the application form and keep it in a separate file to which no one involved in the homeowner selection process has access.

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We are pleased to offer you the opportunity to receive information about your account electronically. If you would like to receive correspondence and notices from us electronically, instead of paper copies through the mail, please review this notice and provide your consent.

- 1. Scope of Communications to Be Provided in Electronic Form.** When you use a product or service to which this disclosure applies, you agree that we may provide you with any communications in electronic format, and that we may discontinue sending paper communications to you, unless and until you withdraw your consent as described below. Your consent to receive electronic communications and transactions includes, but is not limited to:
 - All legal and regulatory disclosures and communications associated with the product or service available through Habitat for Humanity of Greenville County.
 - Notices or disclosures about a change in the terms of your account or associated payment feature and responses to claims.
 - Privacy policies and notices.

- 2. Method of Providing Communications to You in Electronic Form.** All communications that we provide to you in electronic form will be provided either (1) via e-mail, (2) by access to a web site that we will designate in an e-mail notice we send to you at the time the information is available, or (3) to the extent permissible by law, by access to a web site that we will generally designate in advance for such purpose.

- 3. How to Withdraw Consent.** You may withdraw your consent to receive communications in electronic form by contacting us at familyservices@habitatgreenville.org or PO Box 1206 Greenville, SC 29602. At our option, we may treat your provision of an invalid email address, or the subsequent malfunction of a previously valid email address, as a withdrawal of your consent to receive electronic communications. We will not impose any fee to process the withdrawal of your consent to receive electronic communications. Any withdrawal of your consent to receive electronic communications will be effective only after we have a reasonable period of time to process your withdrawal.

- 4. How to Update Your Records.** It is your responsibility to provide us with true, accurate and complete e-mail address, contact, and other information related to this E-Sign Act disclosure and your account, and to maintain and update promptly any changes in this information. You can update information (such as your e-mail address) by contacting us at familyservices@habitatgreenville.org or PO Box 1206 Greenville, SC 29602.

- 5. Hardware and Software Requirements.** In order to access, view, and retain electronic communications that we make available to you, you must have:
 - an Internet browser that supports 128 bit encryption;
 - sufficient electronic storage capacity on your computer's hard drive or other data storage unit;
 - an e-mail account with an Internet service provider and e-mail software in order to participate in our electronic communications programs;
 - a personal computer (for PC's: Pentium 120 MHz or higher; for Macintosh, Power Mac 9500, Power PC 604 processor 120-MHz Base or higher), operating system and telecommunications connections to the Internet capable of receiving, accessing, displaying, and either printing or storing communications received from us in electronic form via a plain text-formatted e-mail or by access to our web site using one of the browsers specified above;
 - Adobe Reader version 8.0 or higher.

6. **Requesting Paper Copies.** We will not send you a paper copy of any communication, unless you request it or we otherwise deem it appropriate to do so. You can obtain a paper copy of an electronic communication by printing it yourself or by requesting that we mail you a paper copy, provided that such request is made within a reasonable time after we first provided the electronic communication to you. To request a paper copy, contact us at familyservices@habitatgreenville.org or PO Box 1206 Greenville, SC 29602. We may charge you a reasonable service charge for the delivery of paper copies of any communication provided to you electronically pursuant to this authorization. We reserve the right, but assume no obligation, to provide a paper (instead of electronic) copy of any communication that you have authorized us to provide electronically.
7. **Communications in Writing.** All communications in either electronic or paper format from us to you will be considered "in writing." You should print or download for your records a copy of this disclosure and any other communication that is important to you.
8. **Federal Law.** You acknowledge and agree that your consent to electronic communications is being provided in connection with a transaction affecting interstate commerce that is subject to the federal Electronic Signatures in Global and National Commerce Act, and that you and we both intend that the Act apply to the fullest extent possible to validate our ability to conduct business with you by electronic means.
9. **Termination/Changes.** We reserve the right, in our sole discretion, to discontinue the provision of your electronic communications, or to terminate or change the terms and conditions on which we provide electronic communications. We will provide you with notice of any such termination or change as required by law.
10. **Consent.** By signing below you agree that you have read, understand, and agree to the E-Sign Act. You hereby give your affirmative consent to provide electronic communications to you as described herein. You further agree that your computer satisfies the hardware and software requirements specified above and that you have provided us with a current e-mail address at which we may send electronic communications to you.

Acknowledged and agreed to by:

Applicant Name

Co-Applicant Name

Applicant Signature

Co-Applicant Signature

Date

Date