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APPLICATION FOR A HABITAT HOME

	APPLICANT	CO-APPLICANT
NAME		
ADDRESS		
CITY		
POSTAL CODE		
PHONE		

	<u>Applicant</u>		<u>Co-Applicant</u>	
Have you lived in Sault Ste. Marie and Area for 2 years?	Yes	No	Yes	No
Are you a Canadian Citizen/Landed Immigrant?	Yes	No	Yes	No
Have you ever declared bankruptcy?	Yes	No	Yes	No
If yes , when was the discharge date?	_____		_____	

List all persons who would be living in the Habitat Home.

NAME	BIRTH DATE	AGE	SEX	RELATIONSHIP
1.				Self
2.				
3.				
4.				
5.				
6.				
7.				

PRESENT HOUSING

Apartment _____ House _____ Townhouse _____ Total Number of Rooms _____

Number of Bedrooms _____ Number of Bathrooms _____ Monthly Rent \$ _____

PREVIOUS HOUSING (*If present address is less than 5 years*)

Dates (from-to)	Address	Landlord's Name	Landlord's Phone No.

Describe the condition of your present housing.

Explain why your family has requested a Habitat home.

Why do you feel your family should be chosen to buy a Habitat home?

How did you hear about Habitat Sault Ste. Marie and Area?

FINANCIAL INFORMATION

MONTHLY INCOME: Include all income – employment income, social assistance, WSIB, pensions, child tax benefit, employment insurance, child support, spousal support, child care supplements, GST payments etc.

Applicant's name: _____

Current employer: _____ How long? _____ Gross Monthly Income \$ _____

Other Income: _____ Amount \$ _____
_____ \$ _____
_____ \$ _____

Work History for past 5 years:

Employer: _____ How long? _____

Co-applicant's name: _____

Current employer: _____ How long? _____ Gross Monthly Income \$ _____

Other Income: _____ Amount \$ _____
_____ \$ _____
_____ \$ _____

Work History for past 5 years:

Employer: _____ How long? _____

Please list other wage earners over 18 years in your household who contribute to the household income.
Please attach another sheet if needed

Name: _____ How long? _____ Gross Monthly Income \$ _____

Employer: _____

Name: _____ How long? _____ Gross Monthly Income \$ _____

Employer: _____

MONTHLY INCOME and EXPENSES

INCOME

Applicant \$ _____
 Co-Applicant \$ _____
 Other \$ _____
 Total (A) \$ _____

OTHER

Child Tax Benefit \$ _____
 Disability \$ _____
 Pensions \$ _____
 Spousal Support \$ _____
 Child Support \$ _____
 GST \$ _____
 Child Care Supplement \$ _____
 Other (EI, CPP, WSIB) \$ _____
 Total (B) \$ _____

ASSETS

Bank Accounts \$ _____
 Car \$ _____
 RRSP \$ _____
 Other (property, RV's, etc) \$ _____
 Total (C) \$ _____

Total Income/Assets (A+B+C) \$ _____

Total Expenses (D+E+F+G) \$ _____

HOUSEHOLD

Rent \$ _____
 Heat \$ _____
 Hydro/Water \$ _____
 Telephone/Cable \$ _____
 Insurance \$ _____
 Other _____ \$ _____
 Total (D) \$ _____

PERSONAL

Food (food, hygiene, cleaning) \$ _____
 Clothing \$ _____
 Transportation (if no car) \$ _____
 Child Care \$ _____
 Dental/Prescriptions \$ _____
 Other _____ \$ _____
 Total (E) \$ _____

TRANSPORTATION

Gas \$ _____
 Repairs \$ _____
 Insurance \$ _____
 Other _____ \$ _____
 Total (F) \$ _____

OTHER PAYMENTS

Credit Card Payments \$ _____
 Car Loan \$ _____
 Student Loans \$ _____
 Other Loans \$ _____
 Spousal/Child Support \$ _____
 Other _____ \$ _____
 Total (G) \$ _____

Please list all debts (loans, student loans, credit cards, etc.)

To Whom	Total Amount Owning	Monthly Payment

PLEASE PROVIDE PROOF OF INCOME

- Year to date pay receipts
- Your income tax returns for the past 3 years (line 150)

PLEASE PROVIDE A RECENT COPY OF YOUR CREDIT REPORT

This may be obtained, free of charge, by calling **EQUIFAX at 1-800-465-7166**

WILLINGNESS TO PARTNER

To BE CONSIDERED FOR a Habitat home, you, along with your family and/or friends must complete 500 hours of “sweat equity”. Your sweat equity hours may include helping with construction, painting, landscaping, fundraising, or other approved Habitat activities. Willingness to partner also includes media requests and publicity for Habitat for Humanity Sault Ste. Marie and Area.

I am willing and able to complete the required number of hours:

Applicant	Yes	No
Co-applicant	Yes	No

What would you and your family do to help build your home?

REFERENCES

Please list 3 people who know you well. We will be contacting them for letters of reference. Some references to consider may be: social worker, clergy, teacher, friend, or employer. Do not include family members.

Name	Occupation
Address	City Prov.
Postal Code	Phone
How do you know this individual?	

Name	Occupation
Address	City Prov.
Postal Code	Phone
How do you know this individual?	

Name	Occupation
Address	City Prov.
Postal Code	Phone
How do you know this individual?	

HAVE YOU ENCLOSED:

- Copies of your family's current year-to-date income
- Include employee earnings, child tax credit, and supplements
- Copies of your family's income tax returns for the previous 3 years (line 150)
- Copies of your previous 6 months bank statements or passbook
- Credit report from Equifax
- Completed release of information form (see below)

APPLICANT AGREEMENT

*We understand that false or misleading information may be grounds for rejection of our application.

*We understand that the completion of this application is in no way a guarantee of receiving a Habitat home.

*We understand that this application will be reviewed with all other applications that are completed and final approval is the sole right of Habitat for Humanity.

AUTHORIZATION AND RELEASE

The undersigned applicant(s) applies for a Habitat home and a no-interest loan to finance the purchase price of the home. Applicant(s) authorizes Habitat for Humanity to evaluate applicant(s) actual need for a Habitat home, ability to repay the loan and other expenses of home ownership, and willingness to participate in the Habitat partnership. The evaluation will include but may not be limited to: credit checks, personal visits and contact of references.

I/we give our permission to Habitat for Humanity Sault Ste. Marie and Area to communicate with the people I/we have given as references.

All information will remain confidential.

The original copy of this application will be retained by Habitat for Humanity even if the application is not approved. Under the Freedom of Information and Protection of Privacy Act, this information is collected for the purposes of Habitat for Humanity only and no other uses. By signing below, the applicant(s) warrants the information to be complete, accurate and true and authorizes the release of information. The applicant(s) also agrees to supply additional up-to-date information when requested.

APPLICANT

Name: (print) _____

Signature: _____

Social Insurance No. _____

CO-APPLICANT

Name: (print) _____

Signature: _____

Social Insurance No. _____

We would like to thank-you for taking the time to complete your application. We realize we have asked for a lot of information, but it is all necessary in order for us to reach a decision.

Dated the _____ day of _____

Please have the application form completed along with all other requested information returned to the Habitat office by _____.