



Return Application to:
 Clinch River Habitat for Humanity
 111 Randolph Road • Oak Ridge, TN 37830
 Phone: (865) 483-5433



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.

Application for Housing Program

Dear Applicant: The Application For Housing Program process involves the applicant(s) completing this application and attending a Homeownership Orientation session. Information obtained from the application will be used to help determine if the applicant meets the financial qualifications and criteria for a Habitat home. The Homeownership Orientation session will provide potential homeowners with valuable information about Clinch River Habitat for Humanity, give an overview of how the homeownership program works, and explain other requirements and criteria for partnership.

1. APPLICANT INFORMATION

Applicant	Co-Applicant
Applicant's Name:	Co-Applicant's Name:
Applicant's E-mail Address:	Co-Applicant's E-mail Address:
Present Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent Street _____ Post Office Box # _____ City, State Zip Code _____ Home Phone Number: _____ Cell Phone Number: _____ Number of Years Living at this address: _____	Present Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent Street _____ Post Office Box # _____ City, State Zip Code _____ Home Phone Number: _____ Cell Phone Number: _____ Number of Years Living at this address: _____
_____ / _____ / _____ Social Security Number Date of Birth	_____ / _____ / _____ Social Security Number Date of Birth
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (including single, divorced, widowed)

Dependents (people who will be living in the house with you)

Name	Date of Birth	Male/Female	Social Security Number
_____	_____	<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"/>	_____

2. EMPLOYMENT INFORMATION

Applicant		Co-Applicant	
<u>Current Employer</u>	Years on Job	<u>Current Employer</u>	Years on Job
Company _____	Gross Monthly Pay \$ _____	Company _____	Gross Monthly Pay \$ _____
Name _____		Name _____	
Address _____		Address _____	
City _____		City _____	
State, Zip _____		State, Zip _____	
Type of Business	Business Phone	Type of Business	Business Phone
Applicant		Co-Applicant	
<u>Previous Employer</u>	Years on Job	<u>Previous Employer</u>	Years on Job
Company _____	Gross Monthly Pay \$ _____	Company _____	Gross Monthly Pay \$ _____
Name _____		Name _____	
Address _____		Address _____	
City _____		City _____	
State, Zip _____		State, Zip _____	
Type of Business	Business Phone	Type of Business	Business Phone

3. MONTHLY INCOME

Gross Monthly Income	Applicant	Co-Applicant
Employment Income	\$ _____	\$ _____
AFDC	\$ _____	\$ _____
Social Security	\$ _____	\$ _____
SSI	\$ _____	\$ _____
Disability	\$ _____	\$ _____
Alimony	\$ _____	\$ _____
Child Support	\$ _____	\$ _____
Other (List)	\$ _____	\$ _____
Other (List)	\$ _____	\$ _____

Other than Applicant and Co-Applicant, list income of all household members over age 18 :

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

4. REGULAR MONTHLY EXPENSES

What are your monthly expenses (bills)?

	Monthly Amount		Monthly Amount
Rent	\$ _____	Cable TV, Internet, Telephone/Cell Phone	\$ _____
Utilities (Water, Gas, Electric)	\$ _____	Job Related Expenses (Union Dues, etc)	\$ _____
Car Payments	\$ _____	Student Loans	\$ _____
Insurance	\$ _____	Alimony/Child Support	\$ _____
Child Care	\$ _____	Medical Expenses	\$ _____
Credit Card Payments	\$ _____	Other (Explain)	\$ _____

5. CREDIT

To Whom you and the co-applicant owe money (EX: Auto Loan, Personal Loan, Credit Cards, etc)

Name of Company _____	Monthly Payment \$ _____	Name of Company _____	Monthly Payment \$ _____
Address _____	Unpaid Balance \$ _____	Address _____	Unpaid Balance \$ _____
City _____		City _____	
State, Zip _____		State, Zip _____	
Account Number	Months left to pay	Account Number	Months left to pay
Name of Company _____	Monthly Payment \$ _____	Name of Company _____	Monthly Payment \$ _____
Address _____	Unpaid Balance \$ _____	Address _____	Unpaid Balance \$ _____
City _____		City _____	
State, Zip _____		State, Zip _____	
Account Number	Months left to pay	Account Number	Months left to pay
Name of Company _____	Monthly Payment \$ _____	Name of Company _____	Monthly Payment \$ _____
Address _____	Unpaid Balance \$ _____	Address _____	Unpaid Balance \$ _____
City _____		City _____	
State, Zip _____		State, Zip _____	
Account Number	Months left to pay	Account Number	Months left to pay

6. HOUSING EXPERIENCES

Current Landlord	Time Living at this Address	Previous Landlord	Time Living at this Address
Company _____		Company _____	
Name _____		Name _____	
Address _____		Address _____	
City _____		City _____	
State, Zip _____		State, Zip _____	
Phone _____	Amount Paid in Rent.	Phone _____	Amount Paid in Rent.

7. CURRENT HOUSING CONDITION

In the space below, describe the conditions of the house or apartment where you live and/or the circumstances of your living conditions where you live. Explain why you are applying for the Habitat Housing Program.

8. PROPERTY INFORMATION

Where in Roane County do you prefer to live? _____ Would you be willing to live in any other part of the county. _____ If you are unable to relocate, please state the reason(s) _____

Does anyone in your family have special needs? Yes No If Yes, will this affect the house design? Yes No

9. DECLARATIONS

Please Check the Box That Best Answers the Following Questions for You and Co-Applicant.

Answering "yes" to any of these questions does not automatically disqualify you.	Applicant		Co-Applicant	
A. Do you have any debt because of a court decision/judgment 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. Have you ever applied for a mortgage loan from another lending institution?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
G. Have you ever applied for a Habitat house?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
H. Have you ever been convicted of a felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I. Are you a U.S. citizen or have permanent residency status?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
J. Are you a Veteran or currently serving in the military?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answered "yes" to any question A through H, please explain. Use a separate sheet of paper if necessary.

10. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Clinch River 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 Habitat partner family. I also understand that the evaluation will include personal interviews and a home visit, verification of my present and past employment and earnings, financial records, bank accounts, stock holdings and any other asset balances that are needed to process this application. I further authorize Clinch River Habitat for Humanity to order a consumer credit report and verify other credit information, including landlord references. It is understood that a photocopy of this document will serve as my authorization.

I acknowledge that Clinch River Habitat for Humanity screens all potential staff (whether paid or unpaid), board members and applicant families on the sex offender registry, and that by completing this application, I am submitting myself and all persons listed on the first page of the application to such an inquiry. In addition, I understand that by completing this application, I am submitting myself and all persons listed on the first page of the application to a criminal background check.

Furthermore, I understand that the completion of this application in no way guarantees that I will receive housing through Clinch River Habitat for Humanity. 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 purchase a Habitat home, I may be disqualified from the program. The original or a copy of this application will be retained by Clinch River Habitat for Humanity even if the application is not approved.

Applicant Signature

Date

Co-Applicant Signature

Date

X _____ X _____