



Application Packet

Website: habitatbcs.org/apply/

1. Intake day is scheduled for August 24th (*appointments only*)
 2. Call (979) 823-7200 ext.101 to make an intake appointment to turn in your application.
 3. Carefully review the **checklist** to see what documents are needed.
 4. Please make sure you bring **all your current documents** to your intake appointment or it **cannot be reviewed**.
 5. **Limited Intake appointments**; so make an appointment during August 1st - 12th **Only**.
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If you any questions or concerns, please contact our Homebuyer Program Manager at (979) 823-7200, extension 101.



Introduction to the Homebuyer Selection Process

Bryan/College Station Habitat for Humanity is a nonprofit, ecumenical Christian housing ministry and our mission is to provide low income homeowners with simple, safe and decent homes while eliminating substandard housing. Using volunteer labor and donated funds, we build and sell 3, 4 and 5 bedroom homes in the Bryan/College Station area for approximately \$160,000 to \$190,000 over a period of 30 years with a 0% interest. Habitat homeowners make monthly payments which include the principle, homeowner's insurance, and property taxes. We invite people from all walks of life to partner with us in helping build homes for people in need.

Below you will find additional information over our homeowner selection criteria. All information obtained during the selection process is confidential and will be used only for the purpose of determining eligibility for our program. If you wish to apply, we invite you to fill out an application and contact the Homebuyer Program Manager at (979) 823-7200, ext. 101 or at drabadan@habitatbcs.org.

Once you've turned in your application, it will be evaluated to see if you qualify on the criterion of ability to pay. If so, 2 selection committee members will evaluate your need by conducting a home visit. Afterwards, the selection committee will recommend the application to the Habitat Board for approval if the applicant qualifies on all 3 criteria. You will receive notification on our decision within 30 days. Applicants not approved during one application period may reapply later should their circumstances change.

Homeowner Selection Criteria

- I. Need
 - A. Determined by the condition of current housing
Examples Include:
 - 1. Problems with heating, electricity, unsafe structure, inaccessibility for disabled family members, etc.
 - 2. Overcrowded living conditions.
 - 3. Cost of current housing exceeds 30% of homeowner's income.
 - 4. Current neighborhood is unsafe or unsuitable for children or other family members.
 - B. You must have lived or worked in the Brazos County area for at least **one** year.
- II. Ability to Pay

*B/CS Habitat for Humanity- Homebuyer Selection Income Table		
Household Size	Income Range	Minimum monthly
1	\$29,350 - \$49,500	\$2,445
2	\$29,350 - \$56,550	\$2,445
3	\$27,900 - \$63,650	\$2,325
4	\$30,950 - \$70,700	\$2,579
5	\$33,450 - \$76,350	\$2,787
6	\$35,950 - \$82,050	\$2,995
7	\$38,400 - \$87,700	\$3,200
8	\$40,850 - \$93,350	\$3,404
9	\$43,350 - \$99,000	\$3,612
10	\$45,850 - \$104,650	\$3,820

*Rounded estimates based on federal median income estimates.

Total household income is between 35%-80% of median income of B/CS.

1. Debt to Income Ratio below 38% - homebuyer's debt payment should not prohibit them from meeting normal cost of living expenses.
2. Applicants have demonstrated an ability to make regular monthly payments for rent, utilities and other credit obligations.
3. Should not have outstanding debt in credit report (collections, charge offs, etc.) -credit score and medical accounts are not taken into consideration.
4. Applicants should have been at their current place of employment for at least one year with a 3-year work history.

III. Willingness to Partner

1. If selected, you will become a partner with B/CS Habitat for Humanity. You must complete a minimum of 250 hours of sweat equity (per applicant) which will be done at the Habitat office, ReStore, and construction site.
2. Attend homeowner workshop classes over topics such as budgeting.
3. As a Habitat homeowner, you will be responsible for making your monthly payments on time and communicating any contact changes (i.e. phone number) to Habitat.

The Application Process

The application process, meaning from the time you submit your application to the time you move into your home, **may take up to 3-5 years**. There are 3 phases in the process and you must complete each one in order to move into your home. The steps are below:

Phase One

1. Submit application to Habitat for approval.
2. Complete home ownership classes.
3. Complete half of the hours of sweat equity.
4. Get added to lot list.

Phase Two

1. Choose a lot
2. Get added to build schedule
3. Deposit \$1,000 towards your escrow account
4. Successfully complete 2nd income, credit, and background check.
5. Construction of house begins on your assigned lot.
6. You must complete remaining hours of sweat equity.

Phase Three

1. Successfully pass the third income, credit, and background check.
2. Complete and turn in a loan application.
3. Sign loan documents
4. Attend dedication and closing
5. ***It's now your home!***



Homebuyer Application Document Checklist

All the documents listed below are required for your application to be processed. If any of the documents are missing, your application **cannot** be considered for the homebuyer program. If you have any questions about the application call the Homebuyer Program Manager at (979) 823-7200, ext. 101. Make sure that all of your documents are **current**.

Identification Documentation

- Driver's License / Picture ID (for applicant & co-applicant)
- Social Security Card (for all who will live in household, including dependents)
- Birth Certificate and Residency/Green card (for all who will live in household, including dependents)
- Marriage Certificate or Divorce Decree (if applicable)

Rental History Documentation

- Landlord reference *

*If lived in current dwelling for less than 2 years, previous landlord reference must be filled out. We are looking at 2-year rental history.

- Lease Contract (if applicable)

Income Documentation

- Employment Verification (for all those working that will live in household)*

*If worked less than 3 years at current job, previous employment verification must be filled out. We are looking at 3 year work history in the last 5 years

- Last 6 paystubs (for all those working that will live in household)
- Most recent award letter for SSI, social security benefits, veteran's benefits, etc. (if applicable)
- Proof of last 12 months child support payments (if applicable)
- Last two years of Tax Returns (for all those working that will live in the household)
- Last two years of W-2 forms (for all those working that will live in the household)

Expense Documentation

- Bank statements for checking and savings account from the last 2 months
- Bill statements for monthly expenses from last month*

***Monthly expenses include utility statements, cable, internet, phone, car insurance, etc.**

Other

- Non-refundable \$50 money order or (\$100 if there is a co-applicant.)
- Homeownership application completely filled out
- Land information (if applicable); title search, deed, property value, etc.



Habitat Homebuyer Program Application

IMPORTANT, PLEASE READ: Before you can turn in your application, you **can** attend an informational meeting where you will receive additional information. For the next informational meeting date and times, please:

Visit the office at 119 Lake St. Brvan. TX 77803. Call the office at (979) 823-7200. ext. 101 OR visit our website at www.habitatbcs.org

Dear Applicant: Please complete this application to determine if you qualify for the B/CS Habitat for Humanity homebuyer program. Please fill out the application as completely and accurately as possible. All information you include in this application will be kept confidential in accordance to the Gramm-Leach-

1. APPLICANT INFORMATION					
APPLICANT			CO-APPLICANT		
Applicant's Name			Co-applicant's name		
Social Security # _____			Social Security # _____		
Age: _____ Birthdate: _____/_____/_____			Age: _____ Birthdate: _____/_____/_____		
Phone #: _____			Phone #: _____		
Email: _____			Email: _____		
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)			<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)		
Current Address _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent			Current Address _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent		
Number of Years Living here: _____			Number of Years Living here: _____		
Mailing Address (If different from above)			Mailing Address (If different from above)		
If you have lived at your present address for less than two years, complete the following:					
Previous Address _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent			Previous Address _____ <input type="checkbox"/> Own <input type="checkbox"/> Rent		
Number of Years Living here: _____			Number of Years Living here: _____		
Dependents and others who will live with you (do not include applicant & co-applicant)					
Name	Relationship	Birthdate	Age	Male	Female
		/ /			
		/ /			
		/ /			
		/ /			
		/ /			

2. WILLINGNESS TO PARTNER

APPLICANT			CO-APPLICANT		
Name and address of current employer:		Years on the job:	Name and address of current employer:		Years on the job:
Rate of pay: \$	Hours per week:	Gross Monthly Income: \$	Rate of pay: \$	Hours per week:	Gross Monthly Income: \$
Type of business:		Work phone #:	Type of business:		Work phone #:
If you have a second job, complete the following information					
Name and address of second employer:		Years on the job:	Name and address of second employer:		Years on the job:
Rate of pay: \$	Hours per week:	Gross Monthly Income: \$	Rate of pay: \$	Hours per week:	Gross Monthly Income: \$
Type of business:		Business phone #:	Type of business:		Business phone #:
If you have worked at your current job for less than 3 years, complete the following information					
Name and address of previous employer:		Years on the job:	Name and address of previous employer:		Years on the job:
Rate of pay: \$	Hours per week:	Gross Monthly Income: \$	Rate of pay: \$	Hours per week:	Gross Monthly Income: \$
Type of business:		Business phone #:	Type of business:		Business phone #:

6. MONTHLY INCOME				
Income source	Applicant	Co-applicant	Others in Household	Total
Wages	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Section 8	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Total:	\$	\$	\$	\$

PLEASE NOTE: Self-employed applicants may be required to provide additional documentation such as tax returns and financial statements.	HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE			
	Name	Date of Birth	Income source	Monthly Income

7. DEBT						
Account	Applicant			Co-applicant		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Credit cards	\$	\$		\$	\$	
Credit cards	\$	\$		\$	\$	
Car payments	\$	\$		\$	\$	
Student loans	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Alimony	\$	\$		\$	\$	
Furniture, etc. (rent to own)	\$	\$		\$	\$	
Other:	\$	\$		\$	\$	
Total:	\$	\$		\$	\$	

8. MONTHLY EXPENSES			
Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities	\$	\$	\$
Insurance (health & auto)	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cable	\$	\$	\$
Cell phone	\$	\$	\$
Child support/Alimony	\$	\$	\$
Other:	\$	\$	\$
Other:	\$	\$	\$
Total:	\$	\$	\$

9. DECLARATIONS		
Please check the word that best answers the following questions for you and the co-applicant		
	Applicant	Co-applicant
a. Do you have any outstanding judgments 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 seven 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 past seven 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
If you answered "yes" to any question a through e, or "no" to question f, please explain on a separate piece of paper.		

EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices in the Southwest region located at 1999 Bryan St. Suite 2150 Dallas, TX 75201.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete, and we will be unable to invite you to participate in the Habitat program.

Printed Name	Signature	Date

Printed Name	Signature	Date





Applicant's name _____

Co-applicant's name _____

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 ethnicity, 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.

Applicant	Co-applicant
<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: ____ / ____ / ____ Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)	<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: ____ / ____ / ____ Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)

To be completed only by the person conducting the interview			
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	Interviewer's name (print or type)		
	<table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">Interviewer's signature Date</td> <td style="width: 30%;">Date</td> </tr> </table>	Interviewer's signature Date	Date
	Interviewer's signature Date	Date	
Interviewer's phone number (979) 823-7200			



CURRENT LANDLORD REFERENCE

To whom it may concern,

The applicant below is applying for the B/CS Habitat for Humanity homeownership program and is required to provide rental history. Please get this form completely filled out by your landlord and include it in your application packet. If you have any questions, please feel free to contact the Homebuyer Program Manager at (979) 823-7200, ext. 101 or drabadan@habitatbcs.org. Thank you for your cooperation.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION		
I, _____, authorize _____ to release the following information below to B/CS Habitat for Humanity. _____		
Tenant's Signature	Date	
THIS SECTION TO BE COMPLETED BY LANDLORD		
Tenant has Rented From:	To:	
Amount of Monthly Rent: \$	Tenant's Payment History: Excellent <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>	
Is monthly rent subsidized? Yes <input type="checkbox"/> No <input type="checkbox"/>	Subsidized Amount: \$	
If yes, please fill out information on the right.	Tenant's Amount: \$	
Within the last 12 months, how many times has the tenant paid rent late and how many days was it past due?		
Additional Comments:		
COMPLETED BY		
Printed Name	Signature	
Phone Number	Fax Number	Date
Address of Property:		



PREVIOUS LANDLORD REFERENCE

To whom it may concern,

The applicant below is applying for the B/CS Habitat for Humanity homeownership program and is required to provide rental history. Please get this form completely filled out by your previous landlord and include it in your application packet. If you have any questions, please feel free to contact the Homebuyer Program Manager at (979) 823-7200, ext. 101 or drabadan@habitatbcs.org. Thank you for your cooperation.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION		
I, _____, authorize _____ to <small>(Tenants' name) (Landlord / Leasing agency name)</small> release the following information below to B/CS Habitat for Humanity.		
_____ Tenant's Signature		_____ Date
THIS SECTION TO BE COMPLETED BY LANDLORD		
Tenant Rented From: ____ / ____ / ____ <small>mm dd yyyy</small>	To: ____ / ____ / ____ <small>mm dd yyyy</small>	
Amount of Monthly Rent Paid: \$	Tenant's Payment History: Excellent <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>	
Was the monthly rent subsidized? Yes <input type="checkbox"/> No <input type="checkbox"/>	Subsidized Amount: \$	
If yes, please fill out information on the right.	Tenant's Amount: \$	
How many times did the tenant pay rent late and how many days was it past due?		
Additional Comments:		
COMPLETED BY		
Printed Name	Signature	
Phone Number	Fax Number	Date
Address of Property:		

CURRENT EMPLOYMENT VERIFICATION

To whom it may concern,



CURRENT EMPLOYMENT VERIFICATION

To whom it may concern,

The applicant below is applying for the B/CS Habitat for Humanity homeownership program and is required to provide verification of employment. Please get this form completely filled out by your employer and include it in your application packet. If you have any questions, please feel free to contact the Homebuyer Program Manager at (979) 823-7200, ext. 101 or drabadan@habitatbcs.org. Thank you for your cooperation.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION		
I, _____, authorize _____ to <small>(Employee name) (Employer / Company name)</small> release the following information below to B/CS Habitat for Humanity.		
_____ Employee's Signature		_____ Date
THIS SECTION TO BE COMPLETE BY EMPLOYER		
Date of Hire: / /	Present Position:	
Rate of Pay: \$	Hours Worked per Week:	Frequency of Pay (ex: weekly):
Paid vacation and holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No	(if applicable) Does employee receive a 9 or 12-month salary? <input type="checkbox"/> 9 month <input type="checkbox"/> 12 month	Gross Total Earnings, Year to Date \$
Past Year Gross Annual Income: \$	From	To
Does this person regularly receive overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please fill out the information on the right.	Average Overtime Hours:	
Rate of Pay for Overtime:		
Does this person regularly receive bonuses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please fill out the information on the right.	Bonus Amount:	
Frequency of Bonus (ex: monthly):		
COMPLETED BY		
Printed Name		Signature
Business Phone Number	Business Fax Number	Date
Business Name and Address:		



PREVIOUS EMPLOYMENT VERIFICATION

To whom it may concern,

The applicant below is applying for the B/CS Habitat for Humanity homeownership program and is required to provide verification of employment. Please get this form completely filled out by your previous employer and include it in your application packet. If you have any questions, please feel free to contact the Homebuyer Program Manager at (979) 823-7200, ext. 101 or drabadan@habitatbcs.org . Thank you for your cooperation.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION		
I, _____, authorize _____ to release the <small>(Employee name) (Employer / Company name)</small> following information below to B/CS Habitat for Humanity.		
_____ Employee's Signature		_____ Date
THIS SECTION TO BE COMPLETED BY PREVIOUS EMPLOYER		
Date of Hire: / /	Date of Termination: / /	Position Held:
Rate of Pay at Termination: \$	Hours Worked per Week:	Frequency of Pay (ex: weekly):
Total Earnings, Past Year to Date \$	From	To
Did this person regularly receive overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please fill out the information on the right.	Average Overtime Hours: Rate of Pay at Termination for Overtime:	
Did this person regularly receive bonuses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please fill out the information on the right.	Bonus Amount: Frequency of Bonus (ex: monthly):	
COMPLETED BY :		
Printed Name		Signature
Business Phone Number () -	Business Fax Number	Date
Business Name and Address:		