





Application Packet BCS & Washington County

Bryan/College Station Application Information Not Accepting applications

Stay in the loop about when we will be accepting applications again.

- Follow our website www.Habitatbcs.org
- Subscribe to our Email list drabadan@habitatbcs.org
- Follow our Facebook page Habitat for Humanity BCS
- Follow our Instagram page B/CS Habitat for Humanity

If you have any questions or concerns, please contact the Program Manager at (979)823-7200. EXT

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Washington County Application Information

- 1. Intake day is scheduled for Saturday, February 22, 2025 (appointments only).
- 2. Call (832) 545-4934 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 <u>current</u> documents** to your intake appointment, or it **cannot be reviewed**.
- **5. Limited Intake** Appointments; make an appointment during January 27th Febuary7th 2025 *Only*. If you have any questions or concerns, please contact Sharon Gammell Miller at (832) 545-4934.



Introduction to the Homebuyer Selection Process

Habitat for Humanity Bryan/College Station and Washington County Habitat for Humanity are nonprofit, ecumenical Christian housing ministries 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 Brazos County and Washington County, TX 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 regarding 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.

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 as listed below. You will receive notification of 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. The cost of current housing exceeds 30% of the homeowner's income.
 - 4. The current neighborhood is unsafe or unsuitable for children or other family members.
- B. You must have lived or worked in the Washington County area for at least **one** year.
- II. Ability to Pay

*Habitat f	or Humanity- Homebuyer	Selection Income Table fo	or Brazos County and Was	shington County
Household Size	Bryan/College station	Bryan/College station	Washington County	Minimum monthly
	Income range	Minimum monthly	Income Range	Washington County
1	\$28,550 - \$49,500	\$2,379	\$28,550 - \$51,100	\$2,379
2	\$28,550 - \$56,550	\$2,379	\$28,550 - \$58,400	\$2,379
3	\$27,900 - \$63,650	\$2,325	\$28,750 - \$65,700	\$2,396
4	\$30,950 - \$70,700	\$2,579	\$30,320 - \$73,000	\$2,526
5	\$33,450 - \$76,350	\$2,787	\$32,760 - \$78,850	\$2,787
6	\$35,950 - \$82,050	\$2,995	\$35,230 - \$84,700	\$2,934
7	\$38,400 - \$87,700	\$3,200	\$37,610 - \$90,550	\$3,133
8	\$40,850 - \$93,350	\$3,404	\$40,020 - \$96,400	\$3,334
9	\$43,350- \$99,000	\$3,612	\$42,460 - \$96,990	\$3,536
10	\$45,850- \$104,650	\$3,820	\$44,835 - \$102,480	\$3,735
<u> </u>	*Rounded estin	nates based on federal media	an income estimates.	•



- 1. Total household income is between 35%-80% of median income.
- 2. Debt to Income Ratio below 38% homebuyer's debt payment should not prohibit them from meeting normal cost of living expenses.
- 3. Applicants have demonstrated an ability to make regular monthly payments for rent, utilities and other credit obligations.
- 4. Should not have outstanding debt in credit report (collections, charge offs, etc.) -credit score and medical accounts are not taken into consideration.
- 5. 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 Washington County 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, construction sites, or other approved locations.
- 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 second income, credit, and background check.
- 5. Construction of the house begins on your assigned lot.
- 6. You must complete the 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, please don't hesitate to contact us. Thank you for your cooperation. **Make sure all of your documents are current.**

Bryan/College Station Program Manager at (979) 823-7200 ext. 101 or drabadan@habitatbcs.org Washington County - Sharon Gammell Miller at 832-545-4934 or sharon.gammell@gmail.com.

Identif	ication 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 F	distory Documentation
	Landlord reference *
-	nave lived in the current dwelling for less than 2 years, previous landlord reference must be filled out. We are looking at a 2- ntal history.
	Lease Contract (if applicable)
Income	Documentation
	Employment Verification (for all those working that will live in household) *
•	nave worked less than 3 years at your current job, previous employment verification must be filled out. We sing at a 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	e Documentation
	Bank statements for checking and savings account from the last 2 months
	Bill statements for monthly expenses from last month*
*Month	lly expenses include utility statements, cable, internet, phone, car insurance, childcare, car payments, credit card
paymen	ts, furniture payments, student loans, child support, alimony, health insurance, etc.
Other	
	Non-refundable \$60 money order or (\$120 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

<u>IMPORTANT, PLEASE READ:</u> Before you 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 our website at www.habitatbcs.org

Call the office at (979) 823-7200, ext. 101 for Bryan/College station applications OR (832) 545-4934 for Washington County

Dear Applicant: Please complete this application to determine if you qualify for the Bryan/College station or Washington County homebuyer program.

1.	APPLICA	NT INFORMATIO	ON			
Bryan/College Station Application (Must live or work i	in B/CS)	Washington Co	ounty Application (Must live c	or work in V	VC)
Check yes if you are applying for this area:	☐ Yes	Check yes if yo	u are applying for th	nis area:		☐ Yes
, , , , , , , , , ,		, ,	, 5			
APPLICANT			CO-APPLI	CANT		
Applicant's Name		Co-applicant's		CART		
Social Security #		Social Security	#			
Age://///		Age:	Birthdate: ———	_/	/	
Phone #:		Phone #: ——				
Email:		Email:				
☐ Married ☐ Separated ☐ Unmarried (single, divorce	d. widowed)	□ Manyind □				
Current Address		☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed) Current Address ☐ Own ☐ Rent				
				_ • • • • • • • • • • • • • • • • • • •		
Number of Vears Living Here:		Number of Ves	rs Living Horo			
Number of Years Living Here:			rs Living Here:			
Mailing Address (If different from above)		Mailing Addres	s (If different from	above)		
If you have lived at your present			-			
Previous Address □ Own □ Ren	it	Previous Addre	ess .	□ Owi	n □ Rent	
		Number of Vea	rs Living here:			
Number of Years Living here:		Number of rea	is Living here.			
Dependents and others who will	l live with y	ou (do not inclu	de applicant & co-a	pplicant)		
Name	Re	lationship	Birthdate	Age	Male	Female
			/ /			
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			/ /			
			/ /			1
			/ /			



2. WILLINGNESS TO PARTNER

To be considered for a Habitat Home, you and your family must be willing to complete a minimum of 250 (per adult) "sweat equity" hours. Your help in building your home and the homes of others is called "sweat equity" and may include clearing the lot, painting, helping with construction, working in the Habitat office, working at the ReStore, or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT EQUITY HOURS.

Applicant:	☐ Yes	□ No
Co-Applicant:	☐ Yes	□ No

3. PRESENT HOUSING CONDITION
Number of bedrooms (please circle): 1 2 3 4 5
□ Own □ Rent □ Living with Relatives/Friends □ Other (explain)
Are you living in subsidized housing?
If you are renting, what is your monthly payment? \$/month
Name, address, and phone number of apartment complex or landlord:
In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat house?
4. PROPERTY INFORMATION
Do you own your residence? ☐ Yes ☐ No Type of residence: ☐ Mobile Home ☐ House ☐ Other
Monthly Payment \$ Unpaid Balance \$
Mobile Home Year: Substandard ☐ Yes ☐ No
Do you own or rent land? ☐ Own ☐ Rent
If you own the land, please provide the location
Are you making payments towards the land?
Are you willing to build your home on your land? ☐ Yes ☐ No (Habitat will make the final determination)
If yes : can you provide proof of ownership (title search, deed, and property value) \square Yes \square No



		5. EMPLOYM	ENT INFORMATION			
	APPLICANT			CO-APPLICAN	Т	
Name and address o	f current employer:	Years on the job:	Name and addres	s 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:	-1	Work phone #:	
	If	you have a second job, comp	lete the following in	formation		
Name and address o	f 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 th	an 3 years, complete	e the following informat	ion	
Name and address o	f previous employer:	Years on the job:		s 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:	<u> </u>	Business phone #:	

		6. MONTHLY INCO	ME	
Income source	Applicant	Co-applicant	Others in Household	Total
Wages	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Section 8	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Total:	\$	\$	\$	\$
PLEASE NOTE:		HOUSEHOLD MEMBERS W	HOSE INCOME IS LISTED ABOVE	
Self-employed applications may be required to	nts Name	Date of Birth	Income source	Monthly Income
provide additional				
documentation such as	s			
tax returns and financi	al			
statements.				



		7.	DEBT			
		Applicant			Co-applicant	
Account	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. MON	ITHLY 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?	☐ Yes ☐ No	☐ Yes ☐ No
b.	Have you been declared bankrupt within the past seven years?	☐ Yes ☐ No	☐ Yes ☐ No
c.	Have you had property foreclosed on in the past seven years?	☐ Yes ☐ No	☐ Yes ☐ No
d.	Are you currently involved in a lawsuit?	☐ Yes ☐ No	☐ Yes ☐ No
e.	Are you paying alimony or child support?	☐ Yes ☐ No	☐ Yes ☐ No
f.	Are you a U.S citizen or permanent resident?	☐ Yes ☐ No	☐ Yes ☐ No
	If you answered "yes" to any question a through e, or "no" to question f, please explain on a s	eparate piece of pap	er.



			10. ASSETS		
Name of bank, credit uni	ion, etc.		Address	Account Number	Current Balance
					\$
					\$
					\$
			VEHICLES		
		Year	N	/lake & Model	
Car #1					
Car #2					
Car #3					

11. SOURCE OF ESCROW ACCOUNT DEPOSIT
Where will you get the money to make the escrow account deposit (for example, savings or parents)? If you borrow money, whom will you borrow it from and how will you pay it back?



12. AUTHORIZATION AND RELEASE I understand that by filing this application, I am authorizing Washington County 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 partner family. I understand that the evaluation will include personal visits, a credit check and employment verification. 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 receive a Habitat home, I may be disqualified from the program. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved. I understand and agree to provide updates to Habitat in case of any changes on family income, employment, contact information, number of family members and health conditions. I also understand that Washington County Habitat for Humanity screens all applicant families on the sex offender registry and Specially Designated Nationals (SDN) list. By completing this application, I am submitting myself to such inquiries. I further understand that by completing this application, I am submitting myself to a criminal background check. Applicant signature Date Co-applicant signature Date PLEASE NOTE: If more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application. Please mark your additional comments with "A" for applicant and/or "C" for co-applicant. **FOR DEPENDENTS AGES 18 & UP** I understand that Washington County Habitat for Humanity screens all potential applicants and dependents listed on the application on the sex offender registry and the Specially Designated Nationals (SDN) list as well as conduct criminal background checks. By signing below, I am submitting myself to all the checks listed in this paragraph. **Printed Name** Signature Date **Printed Name** Signature Date **Printed Name** Date Signature 13. RIGHT TO RECEIVE COPY OF APPRAISAL This is to notify you that we may order an appraisal in connection with your loan, and we may charge you for the appraisal. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close. Applicant signature Date Co-applicant signature Date



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





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Applicant's Name	Co-applicant's Name
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 provide 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		
☐ I do not wish to furnish this information	☐ I do not wish to furnish this information		
Race (applicant may select more than one racial designation): ☐ American Indian or Alaska Native ☐ Native Hawaiian or other Pacific Islander ☐ Black/African-American ☐ White ☐ Asian	Race (applicant may select more th	ve	
Ethnicity: ☐ Hispanic or Latino ☐ Non-Hispanic or Latino	Ethnicity: ☐ Hispanic or Latino ☐ Non-Hispanic or Latino		
Sex: ☐ Female ☐ Male	Sex: ☐ Female ☐ Male		
Birthdate://	Birthdate://		
Marital status: ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed)	Marital status: ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorce	d, widowed)	
To be completed only by the person conducting the interview			
This application was taken by:	Interviewer's name (print or type)		
Face-to-face interview	Interviewer's signature	Date	
By mail By telephone	Interviewer's phone number		



CURRENT LANDLORD REFERENCE

To whom it may concern,

The applicant below is applying for the 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 us. Thank you for your cooperation.

Bryan/College Station Program Manager at (979) 823-7200 ext. 101 or drabadan@habitatbcs.org **Washington County - Sharon Gammell Miller** at 832-545-4934 or<u>sharon.gammell@gmail.com.</u>

APPLICANT RELEASE OF INFORMATION AUTHORIZATION			
I,, authorize	, authorize		to release the following
information below to Washington County Habitat			
Tenant's Signature		Date	
THIS SECTION TO	BE CO	MPLETED BY LANDLO	RD
Tenant has Rented From:	To:		
Amount of Monthly Rent:	ı	Tenant's Payment Histor	y:
\$		Excellent Satisfactor	ory □ Unsatisfactory □
Is monthly rent subsidized?		Subsidized Amount:	
Yes □ No □		\$	
Tenant's Amount: If yes, please fill out information on the right.			
\$			
Within the last 12 months, how many times has the tenant paid rent late and how many days was it past due?			
Additional Comments:			
Additional Comments.			
COMPLETED BY			
Printed Name		Signature	
Phone Number	Fax N	umber	Date
Address of Property:			L



PREVIOUS LANDLORD REFERENCE

To whom it may concern,

The applicant below is applying for the 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 us. Thank you for your cooperation.

Bryan/College Station Program Manager at (979) 823-7200 ext. 101 or drabadan@habitatbcs.org Washington County - Sharon Gammell Miller at 832-545-4934 or sharon.gammell@gmail.com.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION				
I,to				
(Tenants' name)		(Landlord / Leasing agency name)		
release the following information below to Washi	ngton Co	ounty Habitat for Humanity.		
Tenant's Signature	Tenant's Signature Date			
THIS SECTION TO BE COMPLETED BY LANDLORD				
Tenant Rented From:	To:			
/	//			
mm dd yyyy	mm	dd yyyy		
Amount of Monthly Rent Paid:		Tenant's Payment History:		
\$		Excellent Satisfactory hsatisfactory		
Was the monthly rent subsidized?		Subsidized Amount:		
		\$		
Yes □ No □		Tenant's Amount:		
		\$		
If yes, please fill out the information on the right.	If yes, please fill out the information on the right.			
How many times did the tenant pay rent late and	how ma	ny days was it past due?		
Additional Comments:				
COMPLETED BY				
Printed Name		Signature		
		6		
Phone Number	Fax Nu	umber Date		
Address of Property:				



CURRENT EMPLOYMENT VERIFICATION

To whom it may concern,

The applicant below is applying for the Habitat for Humanity homeownership program and is required to provide employment 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 us. Thank you for your cooperation.

Bryan/College Station Program Manager at (979) 823-7200 ext. 101 or drabadan@habitatbcs.org Washington County - Sharon Gammell Miller at 832-545-4934 or sharon.gammell@gmail.com.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION			
I,, authorize (Employee name) (Employee		to	
release the following information below to Washington County Habitat for Humanity.			
Employee's Signature Date			
	IS SECTION TO BE CO	MPLETED BY EMPLO	OYER
Date of Hire: / /	Present Position:		
Rate of Pay: \$	Hours Worked per Week:		Frequency of Pay (ex: weekly):
Paid vacation and holidays?	(if applicable) Does	the employee	Gross Total Earnings, Year to Date
□ Yes □No	receive a 9 or 12-month salary? □ 9 month □ month		\$
Past Year Gross Annual Income:	From		То
\$			
Does this person regularly receive overtime?		Average Overtime Hours:	
□ Yes □No		Rate of Pay for Overtime:	
If yes, please fill out the information on the right.			
Does this person regularly receive bonuses?		Bonus Amount:	
□Yes □No		Frequency of Bonus (ex: monthly):	
If yes, please fill out the information	on the right.		
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 Habitat for Humanity homeownership program and is required to provide employment 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 us. Thank you for your cooperation.

Bryan/College Station Program Manager at (979) 823-7200 ext. 101 or drabadan@habitatbcs.org Washington County - Sharon Gammell Miller at 832-545-4934 or sharon.gammell@gmail.com.

APPLICANT RELEASE OF INFORMATION AUTHORIZATION				
I,, authorizeto release to release to following information below to Washington County Habitat for Humanity.			to release the	
Employee's Signature THIS SECTION TO BE COMPLETED BY PREVIOUS EMPLOYER				
Date of Hire:	Date of Terminati	on:	Position Held:	
/ /	/ /			
Rate of Pay at Termination: \$	Hours Worked per Week:		Frequency of Pay (ex: weekly):	
Total Earnings, Past Year to Date \$	From		То	
Did this person regularly receive over	time?	Average Overtime Hours:		
☐ Yes ☐ No		Rate of Pay at Termination for Overtime:		
If yes, please fill out the information on the right.		Bonus Amount:		
Did this person regularly receive bonuses?				
□ Yes □ No		Frequency of Bonus (ex: monthly):		
If yes, please fill out the information	on the right.			
COMPLETED BY :				
Printed Name		Signature		
Business Phone Number	Business Fax Number		Date	
Business Name and Address:	1		1	

