



What is Orange County Habitat for Humanity?

Orange County Habitat for Humanity is an ecumenical Christian ministry that changes lives by building safe, decent, and affordable homes without discrimination because of race, color, religion, national origin, gender, disability, familial status, sexual orientation, marital status, or age. Homeowners are required to pay an affordable monthly payment.

How can I become a Habitat homeowner?

You may be eligible to participate in our homeownership program if you are at least 18 years of age, are within the income eligibility guidelines, have lived or worked in Orange County for at least one year and you meet the **3 criteria**: (1) Need for Adequate Shelter, (2) Ability to Pay, and (3) Willingness to Partner. Do the following statements apply to you?

Income Eligibility:

My gross annual income is within eligibility guidelines: (35-80% 2023 Area Median Income for Orange County). This includes wages, Social Security Disability Income, Child Support, TANF, pensions.

Household Size*	Minimum Applicant Income	Maximum Household Income
1	\$19,135	\$43,736
2	\$21,868	\$49,984
3	\$24,602	\$56,232
4	\$27,335	\$62,480
5	\$29,522	\$67,478
6	\$31,709	\$72,477
7	\$33,895	\$77,475
8	\$36,082	\$82,474

***Household Size** = Me (Applicant) + Any Adults Who Will Live With Me + Any Children Who Will Live With Me AND For Whom an Adult Household Member Has Custody + My Spouse, If Legally Married

1. I have need for adequate shelter:

- I currently live in housing that is substandard in at least one of the following ways:
 - Structurally defective or in significant disrepair
 - Inadequate number of bedrooms for age/gender of family members
 - Inadequate living space
- Transitional in nature
- In an unsafe neighborhood or community
- Cost-burdensome – rent is more than 30% of income; excessive utility costs

2. I have the ability to pay:

- I have had stable, verifiable income for at least two years
- I expect my income to remain stable or increase in the future.
- I am making on-time payments on my current bills and debts and am not default in any legal financial obligation.. **Note:** You may want to do a free preliminary credit report check at www.annualcreditreport.com or call 1-877-322-8228 before applying.
- I have not declared or discharged a bankruptcy in the previous 3 years.
- My household members and I abide by the law.
- I am a U.S. citizen or permanent resident.

3. I am willing to partner with Habitat:

- I am willing to fulfill all requirements in a timely, honest manner.
- I am willing to make an escrow deposit of \$800 before occupancy of the house.
- I am willing to make all my monthly mortgage payments on time.
- I am willing to accept a home with its floorplan and other features determined by Habitat.
- I am willing to spend the required 250 hours of sweat equity by helping with house construction or other approved activities (friends and other family members can help), and attending financial and home maintenance classes.
- I am willing to share my experience through conversations, events, and media publications.
- I am willing to care proactively for my home & neighborhood.

The applicant must understand that **verification of all information on the application is necessary to determine eligibility.** This will include a criminal check, credit check, income verification and a home visit.

**If all the above statements apply, you might be eligible!
Please complete the attached application or contact us at 812-723-3596.**



PLEASE RETURN APPLICATION TO:
 Orange County Habitat for Humanity
 1075 N Sandy Hook Road, Suite 4
 Paoli, IN 47454
 Phone: (812) 723-3596; Fax: (812) 723-7304
 Email: ochabitat1@gmail.com or ochabitat@yahoo.com

Application for Homeownership Program



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. We further pledge to keep all information you include in this application packet confidential in accordance with the Gramm-Leach-Bliley Act.

SECTION I: HOUSEHOLD INFORMATION

Applicant	Co-Applicant
Name: _____	Name: _____
Birth Date: _____ Age: _____	Birth Date: _____ Age: _____
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Social Security Number: _____	Social Security Number: _____
Marital Status (check one): <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried	Marital Status (check one): <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried
Phone Number: _____	Phone Number: _____
Email Address: _____	Email Address: _____

Dependents and others who will live with you (include both children and adults):

Name	Relationship	Birth Date	Age	Gender
_____	_____	_____	_____	Male Female
_____	_____	_____	_____	Male Female
_____	_____	_____	_____	Male Female
_____	_____	_____	_____	Male Female
_____	_____	_____	_____	Male Female
_____	_____	_____	_____	Male Female

Do all the members of the household outlined above currently reside together? Yes No

If no, please explain current living arrangements and why the arrangements are expected to change upon the purchase of a Habitat home:

SECTION II: CURRENT HOUSING CONDITIONS

Applicant	Co-Applicant (if different than applicant)
Current Street Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Years at this Residence: _____ Total Monthly Mortgage/Rent: \$ _____ # of People Living at this Residence: _____ # of Bedrooms: _____ # of Bathrooms: _____ Name, Address, & Phone Number of Landlord: _____ _____	Current Street Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Years at this Residence: _____ Total Monthly Mortgage/Rent: \$ _____ # of People Living at this Residence: _____ # of Bedrooms: _____ # of Bathrooms: _____ Name, Address, & Phone Number of Landlord: _____ _____
Current Mailing Address (if different than above): _____ _____	Current Mailing Address (if different than above): _____ _____
Previous Street Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Years at this Residence: _____	Previous Street Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Years at this Residence: _____
Please describe the conditions of your current residence(s) and why you need a Habitat home: _____ _____ _____	

SECTION III: EMPLOYMENT INFORMATION

Applicant	Co-Applicant
Current Job Title: _____ Rate of Pay: \$ _____ #hours/week _____ Current Employer: _____ Work Address: _____ Work Phone Number: _____ Years on this Job: _____	Current Job Title: _____ Rate of Pay: \$ _____ #hours/week _____ Current Employer: _____ Work Address: _____ Work Phone Number: _____ Years on this Job: _____
Previous Job Title: _____ Previous Employer: _____ Work Address: _____ Years on this Job: _____ Reason for Leaving: _____	Previous Job Title: _____ Previous Employer: _____ Work Address: _____ Years on this Job: _____ Reason for Leaving: _____

Applicants must show steady employment for two years. If there is a gap in employment for more than two months, please explain the reason on a separate sheet of paper.

SECTION IV: ASSETS

Information regarding bank accounts or other financial accounts of household members:

Household Member's Name	Financial Institution's Name	Account Type (e.g., checking)	Current Balance
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Do you own any land? Yes No Estimated Value: \$ _____ Unpaid Balance: \$ _____

Do you own any vehicles? Yes No Estimated Value: \$ _____ Unpaid Balance: \$ _____

If you are approved for the homeownership program, you will be required to save for a down payment. Please describe your plan to save up this money in time for closing: _____

SECTION V: MONTHLY INCOME

Income Source	Applicant	Co-Applicant	Others in Household Name _____	Total (\$/Month)
Wages	\$ _____	\$ _____	\$ _____	\$ _____
Alimony*	\$ _____	\$ _____	\$ _____	\$ _____
Child Support*	\$ _____	\$ _____	\$ _____	\$ _____
Housing Choice Voucher (Section 8)	\$ _____	\$ _____	\$ _____	\$ _____
Social Security (SS)	\$ _____	\$ _____	\$ _____	\$ _____
Supplemental Security Income (SSI)	\$ _____	\$ _____	\$ _____	\$ _____
Supplemental Nutrition Assistance Program (SNAP/Food Stamps)	\$ _____	\$ _____	\$ _____	\$ _____
Temporary Assistance for Needy Families (TANF)	\$ _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____	\$ _____

Total Monthly Income: \$ _____

**As a Special Purpose Credit Program, we are authorized to inquire about income from alimony, child support, or separate maintenance. Applicants may request that this income not be used in determining their ability to repay the mortgage loan for which they are applying.*

Self-employed applicants will be required to provide additional documentation such as tax returns and financial statements.

SECTION VI: DEBTS & OTHER EXPENSES

Debt/Expense	Applicant			Co-Applicant		
	Minimum Payment/Mo.	Actual Payment/Mo.	Unpaid Balance	Minimum Payment/Mo.	Actual Payment/Mo.	Unpaid Balance
Alimony and/or Child Support	\$	\$	\$	\$	\$	\$
Motor Vehicles (e.g., car, boat)	\$	\$	\$	\$	\$	\$
Rent-to-Own (e.g., furniture)	\$	\$	\$	\$	\$	\$
Real Property (e.g. land, house)	\$	\$	\$	\$	\$	\$
Medical Debts	\$	\$	\$	\$	\$	\$
Credit Cards	\$	\$	\$	\$	\$	\$
Personal Loans	\$	\$	\$	\$	\$	\$
Student Loans	\$	\$	\$	\$	\$	\$
Child Care	\$	\$	\$	\$	\$	\$
Insurance	\$	\$	\$	\$	\$	\$
Cell phone/internet:	\$	\$	\$	\$	\$	\$
Do you use a budget to plan for and track your regular household expenses? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Applicant's estimated monthly cost of utilities (including electric, gas, water, etc.): \$ _____/month						
Co-Applicant's estimated monthly cost of utilities (including electric, gas, water, etc.): \$ _____/month						
Please describe any additional debts, collections, or charge-offs of which you are aware but towards which you are not currently making payments: _____ _____						
Are you currently working with a financial agency to resolve your debts and/or improve your credit? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, please describe the agency, any fees required for service, and the nature of the services received: _____ _____						

SECTION VII: DECLARATIONS

Declaration	Applicant	Co-Applicant
(a) Do you have any outstanding judgments due to a court decision against you?	Yes No	Yes No
(b) Have you been evicted from your residence in the past seven years?	Yes No	Yes No
(c) Have you had property foreclosed on you in the past seven years?	Yes No	Yes No
(d) Have you declared or discharged a bankruptcy in the past seven years?	Yes No	Yes No
(e) Have you been convicted of a felony in the past seven years?	Yes No	Yes No
(f) Are you currently involved in a lawsuit or other legal proceedings?	Yes No	Yes No
(g) Are you currently paying alimony or child support or separate maintenance?	Yes No	Yes No
(h) Are you a co-signer or endorser on any loan?	Yes No	Yes No
(i) Are you a U.S. citizen or permanent resident?	Yes No	Yes No
If you answered "Yes" to any of the questions (a) through (h), please explain on a separate sheet of paper, which you must sign, date, and submit with this application		

SECTION VIII: AUTHORIZATION & RELEASE

By signing below, I confirm and authorize the following:

I understand that I am authorizing Orange County Habitat for Humanity to evaluate; 1) my household's actual need for the assistance offered through the agency's homeownership program; 2) my ability to repay the affordable mortgage loan that may be offered to me upon my successful completion of the program; and 3) my willingness to partner with the agency through Sweat Equity and other program requirements.

I understand that evaluation of my application will include verification of the information contained in this application packet regarding all household members, including, but not limited to, information pertaining to residence, income, employment, and debt. I understand that this evaluation may also include, but is not limited to, documentation, home visits, credit checks, criminal background checks, checks against the sex offender registry, searches of public records, and contact with current and former employers, landlords, creditors, and other financial institutions disclosed in this application packet and throughout the application process. By submitting this application packet, I am authorizing Orange County Habitat for Humanity to conduct this evaluation regarding all household members.

I have completed this application truthfully and to the best of my present knowledge, and I understand that I am required to notify Habitat for Humanity staff of any material changes to the information contained in this application and may be required to provide documentation verifying such changes. I understand that any discovery of inaccuracy, incompleteness, fraudulence, or change in the information supplied in this application packet may result in the denial of my application or deselection from the program, even after I have been approved.

I understand that if I successfully complete the homeownership program, Orange County Habitat for Humanity may order an appraisal in connection with the proposed mortgage loan. I understand that, upon completion of the appraisal, Habitat for Humanity will promptly provide me with a copy, even if the loan does not close.

I understand that Orange County Habitat for Humanity will retain the original or a copy of this application packet and its attachments for 25 months, even if the application is not approved or deselection occurs.

Applicant Signature	Date	Co-Applicant Signature	Date

**PLEASE ATTACH A COPY OF YOUR DRIVER'S LICENSE
OR OTHER FORM OF I.D.**

SECTION IX: INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE FILLING OUT THIS SECTION: 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 designated box in each section.

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

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 for the Midwest Region at 55 W. Monroe Street, Suite 1825, Chicago, IL 60603 or the Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

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.

Applicant(s):

X _____

X _____

Print name: _____

Print name: _____

Date: _____

Date: _____