



# Application for Housing

2007

## Please Note:

This application information is valid for the limited open application period for Coles County Habitat for Humanity, beginning in July 2007.

If you have questions about whether or not this affiliate is still accepting applications, please call our office at 348-7063 before completing the application form. The usual office hours for the Coles County Habitat for Humanity office are Monday through Friday, 8 am till noon.

The Coles County Habitat for Humanity works with people from all walks of life, in partnership with God and the people of Coles County, to develop decent and affordable housing for people in need by building and renovating houses in Coles County so that people can live and grow into all that God intended. If you need assistance in completing an application, please contact us.

Dear Applicant:

You recently expressed an interest in owning a Habitat for Humanity home through Coles County Habitat for Humanity. Enclosed please find an application for you to fill out. Please fill it out as completely as possible and return it to the office along with a copy of your last three years income tax returns.

Listed below are some of the criteria for owning a Coles County Habitat home:

Habitat housing is intended to assist families who have **lived in Coles County for at least one year**. The applicants should know that a general examination will be conducted by the Family Selection Committee (FSC) to determine:

1. the actual need for housing as determined by the condition of the current shelter
2. the ability to pay for Habitat housing
3. the willingness of the family to partner with Habitat

The following is a more detailed description of the three major areas of selection criteria:

1. **Actual need** is demonstrated by the applicant's current shelter being (a, b, or c)
  - a. Inadequate or being in need of repair such as the structure, heating, plumbing, electrical system, water supply, unsafe conditions, or inaccessibility.
  - b. Size of living quarters (i, ii, or iii)
    - i. More than 3 family members share a bedroom
    - ii. School age children of opposite sex share a bedroom
    - iii. Each family member has 100 sq. ft. or less space in which to live
  - c. Cost of housing: present home is inadequate if family is paying more than 50% of its gross income for rent or house payment, including taxes and insurance.
2. **Ability to pay for Habitat Housing**

A family of four must have a steady income, ranging from 30% to 70% of the median yearly income: (\$52,300 for Coles County in 2007). This criteria may vary due to circumstances. A family's debt may not exceed more than 36% of its gross monthly income. The family must also pay a \$500 down payment toward the cost of the home.
3. Those families that meet the above guidelines will show their **willingness to partner with Habitat** by giving permission for:
  - a. Two home visits to see the home and meet the family
  - b. Verification of employment and other income
  - c. Verification of checking and savings accounts
  - d. Review of last 3 years income tax returns
  - e. References from present and past landlords
  - f. References from utility companies

g. A credit check

These families will also contribute 250 hours of “sweat equity” per adult applicant by giving their time, energy and personal talents in the actual building of the home. One hundred of these hours can be met by the participation of family and friends.

**When all other selection criteria are equally met, the applicant household with the greatest need will be selected.**

If you have any questions, please call (217) 348-7063. Please return the application, copies of income tax returns and other requested documentation as soon as possible.

Sincerely,  
Jana Pamperin, Chair  
Family Selection Committee

Enc.

### 2007 Income Qualifications

To be eligible, family income must range between 30% and 70% of the median income for Coles County. For example, for a family of 4, the income should fall between \$16,350 and \$38,150 per year.

<b>Number in Family</b>	<b>Coles Co. Median</b>	<b>30%</b>	<b>70%</b>
1 Person	\$38,200	\$11,450	\$26,740
2 Persons	\$43,600	\$13,100	\$30,520
3 Persons	\$49,100	\$14,700	\$34,370
4 Persons	\$54,500	\$16,350	\$38,150
5 Persons	\$58,900	\$17,650	\$41,230
6 Persons	\$63,200	\$18,950	\$44,240
7 Persons	\$67,600	\$20,250	\$47,320
8 Persons	\$71,900	\$21,600	\$50,330



### 3. WILLINGNESS TO PARTNER

To be considered for a Habitat home, you and your family must be willing to complete a certain number of "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, or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:

	Applicant:	Yes	No
	Co-applicant:	Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

### 4. PRESENT HOUSING CONDITIONS

Number of bedrooms (please circle) 1 2 3 4 5

Other rooms in the place where you are currently living:

Kitchen     Bathroom     Living Room     Dining Room     Other (please describe) \_\_\_\_\_

If you rent your residence, what is your monthly rent payment? \$ \_\_\_\_\_ /month

(Please supply a copy of your lease or a copy of a money order receipt or cancelled rent check.)

Name, address and phone number of current landlord: \_\_\_\_\_

In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat home?

### 5. PROPERTY INFORMATION

If you own your residence, what is your monthly mortgage payment? \$ \_\_\_\_\_ /month    Unpaid Balance \$ \_\_\_\_\_

Do you own land?  No     Yes    (If yes, please describe, including location) \_\_\_\_\_

Is there a mortgage on the land?  No     Yes    If yes:    Monthly Payment \$ \_\_\_\_\_    Unpaid Balance \$ \_\_\_\_\_

If you are approved for a Habitat home, how should your name(s) appear on the legal documents?

### 6. EMPLOYMENT INFORMATION

Applicant		Co-applicant	
Name and Address of <b>Current</b> Employer	Years on This Job	Name and Address of <b>Current</b> Employer	Years on This Job
	Monthly (Gross) Wages \$		Monthly (Gross) Wages \$
Type of Business	Business Phone	Type of Business	Business Phone
<b>If Working at Current Job Less Than One Year, Complete the Following Information</b>			
Name and Address of <b>Last</b> Employer	Years on This Job	Name and Address of <b>Last</b> Employer	Years on This Job
	Monthly (Gross) Wages \$		Monthly (Gross) Wages \$
Type of Business	Business Phone	Type of Business	Business Phone

**7. MONTHLY INCOME AND COMBINED MONTHLY BILLS**

<b>Gross Monthly Income</b>	<b>Applicant</b>	<b>Co-Applicant</b>	<b><sup>2</sup>Others in Household</b>	<b><sup>3</sup>Monthly Bills</b>	<b>Monthly Amount</b>
<sup>1</sup> Base Employment Income	\$	\$	\$	Rent	\$
AFDC/TANF				Utilities	
Food Stamps				Car Payments	
Social Security				Insurance	
SSI				Child Care	
Disability				School Lunch	
Alimony				Average Credit Card Payment	
Child Support				Student Loans	
Other				Alimony/Child Support	
<b>Total</b>	\$	\$	\$	<b>Total</b>	\$

<sup>1</sup>Self-employed applicant(s) may be required to provide additional documentation such as tax returns and financial statements.

<sup>3</sup>Please attach copies of last month's bills.

<sup>2</sup>List additional household members over 18 who receive income:

Name	Age	Monthly Income
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**8. SOURCE OF DOWNPAYMENT AND CLOSING COSTS**

Where will you be getting the money to pay the down payment and closing costs (for example: savings, parents)? If you are borrowing money to pay these costs, explain how and from whom.

**9. ASSETS**

**List Checking and Savings Accounts Below**

Name and Address of Bank, Savings & Loan, or Credit Union:	Name and Address of Bank, Savings & Loan, or Credit Union:
Account Number: Balance \$	Account Number: Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union:	Name and Address of Bank, Savings & Loan, or Credit Union:
Account Number: Balance \$	Account Number: Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union:	Name and Address of Bank, Savings & Loan, or Credit Union:
Account Number: Balance \$	Account Number: Balance \$

<b>Do you own a:</b>	Yes	No		Yes	No	<b>Do you own a:</b>	Yes	No
Stove	<input type="checkbox"/>	<input type="checkbox"/>	Boat	<input type="checkbox"/>	<input type="checkbox"/>	Car (#1)	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	Mobile Home	<input type="checkbox"/>	<input type="checkbox"/>	Make and Year _____		
Washer	<input type="checkbox"/>	<input type="checkbox"/>				Car (#2)	<input type="checkbox"/>	<input type="checkbox"/>
Dryer	<input type="checkbox"/>	<input type="checkbox"/>				Make and Year _____		

**10. DEBT**

**To Whom Do You and the Co-applicant Owe Money?**

Car	Monthly Payment	Unpaid Balance	Cell Phone Contracts	Monthly Payment	Unpaid Balance
	\$	\$		\$	\$
	Mos. left to pay:			Mos. left to pay:	
Furniture, Appliances and Televisions	Monthly Payment	Unpaid Balance	Name and Address of Company	Monthly Payment	Unpaid Balance
	\$	\$		\$	\$
	Mos. left to pay:			Mos. left to pay:	
Credit Card	Monthly Payment	Unpaid Balance	Alimony/Child Support	\$	/month
	\$	\$	Job-related Expenses	\$	/month
	Mos. left to pay:		(Child Care, Union Dues, etc.)	\$	/month
Medical	Monthly Payment	Unpaid Balance	<b>Column 2: Subtotal of Payments</b>	\$	/month
	\$	\$	<b>Column 1: Subtotal of Payments</b>	\$	/month
	Mos. left to pay:		<b>Total Monthly Expenses</b>	\$	/month
<b>Column 1: Subtotal of Payments</b>	\$ /month			\$	/month

**11. DECLARATIONS**

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

- |  | Applicant                    |                             | Co-applicant                 |                             |
|--|------------------------------|-----------------------------|------------------------------|-----------------------------|
| a. Do you have any debt 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 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 past 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. 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 |

Answering "yes" to questions **a** through **e** does not automatically disqualify you. If you answered "yes" to any question **a** through **e**, however, please explain on a separate sheet of paper.

**12. AUTHORIZATION AND RELEASE**

I understand that by filing this application, I am authorizing 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.

Applicant Signature	Date	Co-applicant Signature	Date
X _____		X _____	

**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 or "C" for Co-applicant.

