

Thank you for your interest in Habitat for Humanity of Greater Nashville's homeownership program. Habitat for Humanity of Greater Nashville ("HFHGN" or "Habitat") is a local non-profit affiliate of Habitat for Humanity International serving *Davidson, Cheatham, Dickson, and Wilson Counties* in Tennessee. Seeking to put God's love into action, Habitat for Humanity brings people together to build homes, communities and hope. To fulfill its mission, Habitat makes homeownership possible for low-income households through affordable 0% APR mortgage loans to purchase homes built or renovated by Habitat. To be eligible, applicants must either be U.S. citizens or permanent residents, meet criminal background check requirements, and have a:

- **Housing Need**
  - **Willingness to Partner with Habitat, and**
  - **Ability to Afford Homeownership**

For more information about the program and qualifications, please visit our website, call or email to request our "Own a Habitat Home" brochure, and call the appropriate office below to sign up for an **Information Meeting** to learn more!

*The Information Meeting is highly recommended prior to completing this Application for Partnership.*

### Habitat for Humanity of Greater Nashville offices:

#### **NASHVILLE/DAVIDSON**

2950 Kraft Drive, Suite 100  
Nashville, TN 37204  
615.254.4663  
Fax: 615.254.4645  
M-F: 8 a.m. to 5:00 p.m.

#### **DICKSON**

223 Dickson Plaza Drive  
Dickson, TN 37055  
615.441.9967  
Fax: 615.441.5778  
M-F: 8:30 a.m. to 5:30 p.m.

#### **WILSON**

606 East Main Street  
Lebanon, TN 37087  
615.453.4539  
Fax: 615.453.4517  
M-F: 8:30 a.m. to 4:30 p.m.

#### **CHEATHAM**

296 Frey Street, #5  
Ashland City, TN 37015  
615.441.9967  
Fax: 615.441.5778  
Hours by appointment

Email us at [homeownerservices@habitatnashville.org](mailto:homeownerservices@habitatnashville.org)

Visit our website at [www.habitatnashville.org/homeownership](http://www.habitatnashville.org/homeownership)



## Steps to Start Your Application:

### **1. Attend an Information Meeting!**

You will learn more about the program, application process, and paperwork. The meeting is required during the application process even if you submit paperwork first. Call the appropriate office listed below to sign up for an upcoming meeting. Please let us know if you need accommodations to attend the meeting.

NASHVILLE/DAVIDSON: 615.254.4663

DICKSON: 615.441.9967

WILSON: 615.453.4539

CHEATHAM: 615.441.9967

### **2. Make sure we are accepting applications.**

Check Habitat's website or call us to ensure that applications are currently being accepted in your county and for the areas you might be interested in. The most current expectation of the locations of homes available will be posted at [www.habitatnashville.org](http://www.habitatnashville.org) and discussed at Information Meetings. This information is subject to change.

### **3. Turn in the Application forms and documents.**

Turn in the application forms and documents listed on the next page (Page C) to the appropriate office (see page A for office locations). **READ CAREFULLY!** You are applying for homeownership and it takes a lot of work. ***Commit to this process!***

### **4. Read pages 22-23 for explanation of what will happen after you submit your application.**

◆ ◆ ◆ ◆ **REQUIREMENTS FOR SUBMITTING YOUR APPLICATION** ◆ ◆ ◆ ◆

If you do not follow these requirements, your application may be returned or declined.

- Turn in ALL items on the checklist below **AT THE SAME TIME**.
- All documents must be COPIES, not your originals. We cannot make copies for you.
- Copies should be on standard 8.5" x 11" sized paper and should be copied on one side only.
- Please be organized and place items in the order of this checklist.
- Do not use staples. Paperclips are fine.
- Fill out all forms in ink, no pencil. Please write clearly.

- Application fee** - \$15 for each applicant is required when you apply. Exact cash, check, or money order only.
- Pages 1-21 of this packet completed** - Read instructions on each page carefully. Some forms must be completed by others (landlords, employers, household members, etc.) and some may not apply to you.
- Paystubs** – Most recent 2 months of paystubs for each job held by any applicant or household member (i.e. 4 paystubs if paid bi-weekly, 8 if paid weekly)
- If you are SELF-EMPLOYED or a 1099 contractor**, you will not have paystubs. Instead, you must create and submit a statement of your monthly gross business income and expenses so far this year. You will then calculate an ending net income for your business. This may be similar to how your income is calculated on your tax return. We recommend consulting an accountant for assistance. We may additionally ask for proof of income like checks from customers, bank deposits, and receipts/invoices for business-related expenses.
- Other income** - If anyone in the household receives SSI, SSDI, SSA, disability, retirement, pension, or other income not listed elsewhere, provide the most recent official documentation of the amount they receive.
- Child support court orders** – required for all open cases, even if it has not been paid recently. (This can be obtained from the court or it may be listed on monthly statements)
- Child support received** - 6 month payment history (even if it shows zero payments on a court order), available online or from the court. If you receive support that is not court ordered, include copies of receipts, bank deposits, or other documentation to show the amount you regularly receive. A notarized statement will NOT work.

**\*\*\*If you do not have any of the below tax documents, see the IRS information included on page 23.\*\*\***

- Last two year's filed tax returns** or IRS tax transcripts for all applicants
- Last two year's W-2's and/or 1099's** or IRS Wage and Income transcripts for all applicants
- Bank Statements** – 3 most recent monthly statements (including ALL pages) for ALL accounts you have (include pre-paid card transaction histories for 3 months if no statements are available)
- Proof of old debt settlements/payoffs** - IF you have already settled any old debt (collections, judgments, charge-offs) that could show up with a balance when we pull your credit. If not, we will assume these still need to be paid.
- Proof of Permanent Legal Residency in the U.S.** for each applicant. Options include: U.S. Birth Certificate, U.S. Passport, Proof of U.S. Citizenship, Permanent Resident Card (green card), or provide the notice from Citizens and Immigration Services that Adjustment of Status to permanent resident has been granted and a card is being issued.
- Social Security Cards** for each applicant.
- State or U.S. Issued Photo Identification** for all adults in the household (age 18 or older)

**PLEASE PRINT CLEARLY. DO NOT USE PENCIL.** Complete all sections and if something does not apply to your situation, please mark through it so that we know that you have considered the question and it does not apply.

## Section A. Household Information:

### Applicant and Co-Applicant Information

A co-applicant is someone who will share ownership of the home, responsibility for the mortgage, and who will also live in the home. Not everyone has a co-applicant. If you are married and intend to live together in the Habitat home, your spouse will be your co-applicant. If separated, please contact Habitat for additional information needed from your spouse.

Applicant Information	Co-Applicant Information
<b>Name:</b> _____ <div style="display: flex; justify-content: space-around; width: 100%;"> <span>First</span> <span>Middle</span> <span>Last</span> </div> <b>Preferred Name:</b> _____  <b>Date of Birth (MM/DD/YYYY):</b> _____  <b>Social Security #</b> _____-_____-_____  <b>Marital Status:</b> <input type="checkbox"/> married <input type="checkbox"/> unmarried (incl. single, divorced, widowed)	<b>Name:</b> _____ <div style="display: flex; justify-content: space-around; width: 100%;"> <span>First</span> <span>Middle</span> <span>Last</span> </div> <b>Preferred Name:</b> _____  <b>Date of Birth (MM/DD/YYYY):</b> _____  <b>Social Security #</b> _____-_____-_____  <b>Marital Status:</b> <input type="checkbox"/> married <input type="checkbox"/> unmarried (incl. single, divorced, widowed)
Applicant Contact Information	Co-Applicant Contact Information
<b>Current Home Address:</b>  <div style="display: flex; justify-content: space-between;"> <span>_____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between;"> <span><i>Street address</i></span> <span><i>Apartment #</i></span> </div> <div style="display: flex; justify-content: space-between;"> <span>_____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between;"> <span><i>City</i></span> <span><i>Zip Code</i></span> </div> <b>Mailing Address, if different:</b> _____   <b>Phone numbers: Please check your preferred number.</b> <input type="checkbox"/> cell: ( ) _____ <input type="checkbox"/> work: ( ) _____ <input type="checkbox"/> home: ( ) _____  <b>Best time of day to call:</b> _____ <b>Is it okay to call you at work?</b> <input type="checkbox"/> yes <input type="checkbox"/> no <b>Is it okay for us to send you text messages?</b> <input type="checkbox"/> yes <input type="checkbox"/> no  <b>E-mail address:</b> _____  <b>Do you give consent for us to contact you via email regarding your application?</b> <input type="checkbox"/> yes <input type="checkbox"/> no  <b>What is your preferred language?</b> _____ <b>Are there any special instructions about contacting you? If so please describe:</b> _____	<b>Current Home Address:</b> _____ <b>Same as applicant:</b> <input type="checkbox"/>  <div style="display: flex; justify-content: space-between;"> <span>_____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between;"> <span><i>Street address</i></span> <span><i>Apartment #</i></span> </div> <div style="display: flex; justify-content: space-between;"> <span>_____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between;"> <span><i>City</i></span> <span><i>Zip Code</i></span> </div> <b>Mailing Address, if different:</b> _____   <b>Phone numbers: Please check your preferred number.</b> <input type="checkbox"/> cell: ( ) _____ <input type="checkbox"/> work: ( ) _____ <input type="checkbox"/> home: ( ) _____  <b>Best time of day to call:</b> _____ <b>Is it okay to call you at work?</b> <input type="checkbox"/> yes <input type="checkbox"/> no <b>Is it okay for us to send you text messages?</b> <input type="checkbox"/> yes <input type="checkbox"/> no  <b>E-mail address:</b> _____  <b>Do you give us consent to contact you via email regarding your application?</b> <input type="checkbox"/> yes <input type="checkbox"/> no  <b>What is your preferred language?</b> _____ <b>Are there any special instructions about contacting you? If so please describe:</b> _____

## Other Household Members

List **everyone** (other than the applicant and co-applicant) who will live in your home. You may include children you are expecting.  
**Income limits and number of bedrooms depend on the size and makeup of your household.**

Name	Gender	Date of Birth	Age	Relationship to Applicant	Does this person receive income?
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no
	<input type="checkbox"/> M <input type="checkbox"/> F				<input type="checkbox"/> yes <input type="checkbox"/> no

If you need to list additional household members, please use the back of this page or attach the list.

## Section B. Housing History:

### Housing/Address History

Please provide addresses and dates of residence for everywhere you have lived for the **last three years**.

**Verification of Housing** forms included with this application packet must be completed for each residence in the last three years.  
 In the event that you have lived with friends or relatives during this time, your friend/relative will complete the form.

Applicant	Co-Applicant Information
<p style="text-align: center;"><b>Current Home (Address listed on page 1)</b></p> <p>Move in date (mm/yy): _____</p> <p style="text-align: center;"><input type="checkbox"/> Own    <input type="checkbox"/> Rent    <input type="checkbox"/> Other</p> <p>Do you receive income-based rental assistance?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p style="text-align: center;"><b>Current Home (Address listed on page 1)</b></p> <p><input type="checkbox"/> Same as applicant (if so, skip to the next one)</p> <p>Move in date (mm/yy): _____</p> <p style="text-align: center;"><input type="checkbox"/> Own    <input type="checkbox"/> Rent    <input type="checkbox"/> Other</p> <p>Do you receive income-based rental assistance?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p style="text-align: center;"><b>Previous Home (if less than 3 years at current)</b></p> <p>Address: _____</p> <p style="text-align: center;"><input type="checkbox"/> Own    <input type="checkbox"/> Rent    <input type="checkbox"/> Other</p> <p>Move in (mm/yy): _____ Move out (mm/yy): _____</p> <p>Did you receive income-based rental assistance?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p style="text-align: center;"><b>Previous Home (if less than 3 years at current)</b></p> <p><input type="checkbox"/> Same as applicant</p> <p>Address: _____</p> <p style="text-align: center;"><input type="checkbox"/> Own    <input type="checkbox"/> Rent    <input type="checkbox"/> Other</p> <p>Move in (mm/yy): _____ Move out (mm/yy): _____</p> <p>Did you receive income-based rental assistance?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p style="text-align: center;"><b>Previous Home (if less than 3 years at current)</b></p> <p>Address: _____</p> <p style="text-align: center;"><input type="checkbox"/> Own    <input type="checkbox"/> Rent    <input type="checkbox"/> Other</p> <p>Move in (mm/yy): _____ Move out (mm/yy): _____</p> <p>Did you receive income-based rental assistance?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p style="text-align: center;"><b>Previous Home (if less than 3 years at current)</b></p> <p><input type="checkbox"/> Same as applicant</p> <p>Address: _____</p> <p style="text-align: center;"><input type="checkbox"/> Own    <input type="checkbox"/> Rent    <input type="checkbox"/> Other</p> <p>Move in (mm/yy): _____ Move out (mm/yy): _____</p> <p>Did you receive income-based rental assistance?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>

Please use the back of this page if you need to list more addresses in the last 3 years.

**Section C. Household Income & Resources:**

**Employment History**

Complete this section with information regarding your current employment and any other employment during the last two years (include seasonal or part-time jobs held during your current job).

**Current Employment:** Verification of Employment forms included in this application packet must be completed by all current employers.

**Previous Employment:** Verification of Prior Employment forms included in this application packet must be completed for all jobs worked in the last two years if you are no longer working there.

Applicant	Co-Applicant
<p><b>Current Employer(s): List all jobs you currently hold</b></p> <p><input type="checkbox"/> Check here if you are not currently employed</p> <p>1. Company Name: _____  <i>Is this self-employment or contract work?</i> <input type="checkbox"/> yes <input type="checkbox"/> no                      Hire Date (mm/yy): _____                      Supervisor: _____                      Phone Number: _____</p> <p>2. Company Name: _____  <i>Is this self-employment or contract work?</i> <input type="checkbox"/> yes <input type="checkbox"/> no                      Hire Date (mm/yy): _____                      Supervisor: _____                      Phone Number: _____</p>	<p><b>Current Employer(s): List all jobs you currently hold</b></p> <p><input type="checkbox"/> Check here if you are not currently employed</p> <p>3. Company Name: _____  <i>Is this self-employment or contract work?</i> <input type="checkbox"/> yes <input type="checkbox"/> no                      Hire Date (mm/yy): _____                      Supervisor: _____                      Phone Number: _____</p> <p>4. Company Name: _____  <i>Is this self-employment or contract work?</i> <input type="checkbox"/> yes <input type="checkbox"/> no                      Hire Date (mm/yy): _____                      Supervisor: _____                      Phone Number: _____</p>
<p><b>Previous Employers: List all jobs held in the last 2 years</b></p> <p>Company Name: _____                      Phone Number: _____                      City, State: _____                      Position Held: _____  <input type="checkbox"/> full time <input type="checkbox"/> part time Number of hours/week _____                      Rate of Pay: _____                      Start Date (mm/yy): _____ End Date (mm/yy): _____</p>	<p><b>Previous Employers: List all jobs held in the last 2 years</b></p> <p>Company Name: _____                      Phone Number: _____                      City, State: _____                      Position Held: _____  <input type="checkbox"/> full time <input type="checkbox"/> part time Number of hours/week _____                      Rate of Pay: _____                      Start Date (mm/yy): _____ End Date (mm/yy): _____</p>
<p><b>Previous Employers continued:</b></p> <p>Company Name: _____                      Phone Number: _____                      City, State: _____                      Position Held: _____  <input type="checkbox"/> full time <input type="checkbox"/> part time Number of hours/week _____                      Rate of Pay: _____                      Start Date (mm/yy): _____ End Date (mm/yy): _____</p>	<p><b>Previous Employers continued:</b></p> <p>Company Name: _____                      Phone Number: _____                      City, State: _____                      Position Held: _____  <input type="checkbox"/> full time <input type="checkbox"/> part time Number of hours/week _____                      Rate of Pay: _____                      Start Date (mm/yy): _____ End Date (mm/yy): _____</p>
<p>If needed, use the back of this page to list more current or previous employers.</p>	

## Monthly Household Income and Resources

Please indicate monthly amounts that the applicants or anyone in the household receives for the types of income below. It is extremely important to disclose and document all household income. Under certain circumstances, we may not have to count certain sources of income, but we need to be aware of it. Our income limits are strict due to the nature of our program and funding sources. Therefore, if undeclared income is discovered, the application will be declined.

**Note:** Court ordered child support and alimony must be included in this section (even if it is not paid).

Income Source	Applicant	Co-Applicant	Other Household Members	Additional Questions/Explanation
Jobs – Base Salary/Earnings (before taxes and deductions)	\$	\$	\$	Are any of these household members who earn income also enrolled as full-time students? <input type="checkbox"/> yes <input type="checkbox"/> no If so, who? _____
Jobs - Overtime, Bonuses, Commissions	\$	\$	\$	Explain:
Child Support (total for all children)	\$	\$	\$	Is this court-ordered? <input type="checkbox"/> yes <input type="checkbox"/> no How much is the monthly court order? \$ _____
Alimony	\$	\$	\$	Is this court-ordered? <input type="checkbox"/> yes <input type="checkbox"/> no How much is the monthly court order? \$ _____
Social Security	\$	\$	\$	When did this income begin?
SSI	\$	\$	\$	When did this income begin?
Disability	\$	\$	\$	When did this income begin?
TANF/Families First	\$	\$	\$	When will this income end?
Food Stamps	\$	\$	\$	Next recertification date: _____
Regular financial support from others	\$	\$	\$	Explain:
Other	\$	\$	\$	Explain:

**If needed, use the back of this page to list other sources of income.**

### Other Assets - Answer the following regarding valuable assets that you or the co-applicant own.

<b>Do you currently own any of the following:</b>		<b>Do you own automobiles?</b> (Cars, Trucks, Vans, etc.) <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>Home, Land, or Property</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	Please list each vehicle with year, make, and model (i.e. 1999 Toyota Camry) 1. _____ 2. _____ 3. _____	
<b>Mobile Home</b>	<input type="checkbox"/> yes <input type="checkbox"/> no		
<b>Recreational vehicle (boat, ATV, motorcycle)</b>	<input type="checkbox"/> yes <input type="checkbox"/> no		
<b>Timeshare</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	<b>Do you have any other assets of significant value (gold, cash at home, inheritance, etc.)?</b> <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>Washer/Dryer</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	Please explain each below.	
<b>A business (even as a part owner)</b>	<input type="checkbox"/> yes <input type="checkbox"/> no	Type _____ Value \$ _____	
		Type _____ Value \$ _____	

**If needed, use the back of this page to list other vehicles or assets.**

## Financial/Bank Accounts

List all of the accounts of the applicant and co-applicant whether individual or joint accounts. Include joint accounts with others or children. Include all bank accounts (checking and savings), Certificates of Deposit, retirement savings, and escrow or Individual Development Account (IDA). **If you receive income on a prepaid card, please list the card as an “account”.**

**Note:** An “escrow” or “IDA” account is a special matched savings account set up through certain programs to provide assistance with education, business start-up, or homeownership. Not everyone has one of these accounts.

Check here if you have no accounts or prepaid cards and manage your income solely in cash.

Type of Account (for example: checking, savings, CD, retirement, prepaid, escrow/IDA, etc.)	Name of Bank or Financial Institution	All names on the account	Account Number	Current Balance
				\$
				\$
				\$
				\$
				\$

If needed, use the back of this page to list other accounts.

## Section D: Household Expenses & Debts

### Current Monthly Bills and Expenses

For each expense that your household has, please list a monthly estimate of what each item costs your household. Some of these expenses are not true monthly expenses, for example, you may not have medical or clothing expenses each month. In this situation, we ask that you make a yearly estimate of what your family has to spend on this item and then divide that number by twelve (12) to figure a monthly budget amount. Debts and loan payments will be listed on the next page.

<u>Regular Bills</u>	<u>Monthly Amount</u>	<u>Other Expenses</u>	<u>Monthly Amount</u>
Rent	\$	Groceries	\$
Water	\$	Household supplies (cleaning, diapers, etc.)	\$
Electricity	\$	Clothing	\$
Gas (for your home)	\$	Eating Out	\$
Home Phone	\$	Personal (haircuts, nails, etc)	\$
Cell Phones	\$	Laundry/Dry Cleaning	\$
Cable or other TV services	\$	Cigarettes	\$
Internet	\$	Entertainment	\$
Security System	\$	Pet Care (food, veterinarian, etc.)	\$
Renter’s Insurance	\$	Gifts (birthdays, holidays, etc.)	\$
Car Insurance	\$	School tuition or supplies	\$
Life Insurance	\$	Vacation/Travel	\$
Health Ins. (if not at work)	\$	Gasoline (for your cars)	\$
Childcare (include summer)	\$	Regular vehicle maintenance	\$
Gym memberships	\$	Car repairs	\$
Dues/Subscriptions	\$	Bus pass/paying a friend for transportation	\$
Other - _____	\$	Medical (medicine, vision, doctor visits, etc.)	\$
Other - _____	\$	Giving (church, charity, etc.)	\$
Other - _____	\$	Other - _____	\$
Other - _____	\$	Other - _____	\$



## Debts, Loans, and other Credit Accounts

List all debts, loans, and credit accounts that the applicant **and** co-applicant have including loans you have co-signed with anyone else, whether or not you make the actual payment. You can list multiple similar loans in the same box, just write more than one balance and monthly payment within the box or use the back of this page (i.e. two car loans).

This also includes old debts such as collections, charged-off accounts, repossessions (with a balance owed), judgments, and liens. You may not be aware of all of your old debts unless you have reviewed your credit report.

Type of Debt	Name of Lender/s, Creditor/s	Current Balance	Estimated Payoff Date (MM/YY)	Regular Payment Amount (if any)	How Often Paid?
Car Loans		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Credit Cards		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Student Loans (including deferred)		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Other Loans – (cash, payday, personal, title, furniture rental, etc.)		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Child Support (that you pay)		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Alimony (that you pay)		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Garnishments		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Collections, Charged-off, Repossessions		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Judgments/Liens		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other
Other		\$		\$	<input type="checkbox"/> monthly <input type="checkbox"/> bi-weekly <input type="checkbox"/> other

**HFHGN requires that all old, bad debt (judgments, liens, collections, charged off accounts, repossessions, etc.) be settled before an applicant can become a homeowner.** If you have old debts, what is your plan for settling this debt within approximately 12 months? (Note: Under \$2000 of medical collections may be accepted if on a payment plan.)

Have you ordered a copy of your own credit report?  yes  no (You do not need to provide this to Habitat.)  
 Are you working with a financial counselor?  yes  no If so, who? \_\_\_\_\_

**Please use the back of this page to list additional debts, loans, or credit accounts.**

## **Section E: Housing Need**

### **Housing Need**

Having a demonstrated housing need is one of Habitat's three primary selection criteria. Your housing need will be verified during a home visit by our Homeowner Selection Committee once other aspects of your application have been reviewed. This is not a surprise visit and will be discussed and scheduled with you first.

#### **Please answer the following questions about your current home.**

Do you currently live in temporary home such as an emergency shelters or transitional housing programs?  yes  no  
Are you facing eviction or the nonrenewal of your lease?  yes  no  
Do you currently live with anyone other the people listed on this application?  yes  no  
In the last year, have you applied for other housing programs or a mortgage loan?  yes  no  
If so, were you approved?  yes  no

#### **Privacy / Sleeping Space:**

Number of bedrooms you have in your current home (circle one): 1 2 3 4 5

Do more than two persons have to share a bedroom?  yes  no

Do children of the opposite gender have to share a room?  yes  no

Does anyone have to sleep in space other than a bedroom?  yes  no

#### **Condition of the Home:**

Does your home have any problems that you consider to be hazardous to your health or safety (examples: mold, bugs, electrical problems, broken stairs, etc.)?  yes  no

Are your home's mechanical and weatherproofing systems functioning properly (examples: plumbing, heating/cooling, refrigeration, roofing, windows, etc.)?  yes  no

Does your landlord respond to requests for maintenance within an appropriate time frame?  yes  no

#### **Special Housing Needs / Functional Issues:**

Do you or a family member have accessibility needs that are not met by your current house (for example, you need hand rails, ramps, wider doors and other aids)?  yes  no

If you need custom accessibility features for your home, are you willing and able to provide a doctor or other professional's statement so that the construction feasibility and associated cost may be evaluated?  yes  no  not applicable

#### **Neighborhood/Safety:**

Do you have concerns about safety in your neighborhood?  yes  no

If so, please explain:

**Overall, please describe why you have a need for Habitat homeownership.** How would owning a Habitat home improve your life? Use the back or attach an additional page if necessary.

**Section F. Ability and Willingness to Partner with Habitat for Humanity:**

**Ability and Willingness to Partner**

The **willingness to partner** is a foundational element of the Habitat for Humanity of Greater Nashville program. While housing need and ability to afford homeownership are important factors in the process of earning a home, the willingness to partner is also a critical element to becoming a successful Habitat homeowner. The relationships that develop between potential homeowners, volunteers, staff, sponsors and the agency relate directly to our long-term ability to provide quality, affordable homeownership. The future of HFHGN lies within these unique and wonderful alliances. A good partnership is one where all involved understand their respective roles and fulfill them wholeheartedly with honesty and integrity.

**Sweat equity** is Habitat’s most valuable tool in building the partnership between potential homeowners, Habitat staff and volunteers. The term **sweat equity** refers to the actual hands-on involvement of potential homeowners in the construction of their own homes, as well as participation in homeownership classes and other Habitat and community activities. Sweat equity represents a potential homeowner’s physical and emotional investment in the mission of Habitat. Sweat equity is not a simple programmatic requirement, nor is it in any way meant to be a test for potential homeowners to pass or fail. Rather, sweat equity is an exciting cornerstone to the Habitat ministry, designed to meet three important goals – 1) partnership, 2) pride in homeownership, and 3) development of skills and knowledge.

**Willingness to Partner** during the selection process is demonstrated by fully agreeing to the statements below, attending an Information Meeting, completing your application timely and within the deadlines given, completing an interview with Habitat staff, allowing the Homeowner Selection Committee to conduct a home visit, meeting criminal background and sex offender requirements, cooperating positively, and not intentionally omitting or giving false information during the selection process. It also means serving as an ambassador for Habitat and establishing a positive, interactive, appreciative relationship with Habitat staff, sponsors, volunteers, and other families to promote Habitat’s mission.

The following is a list of questions that need a response from both the applicant and co-applicant. If you have concerns about these, we recommend attending an Information Meeting to learn more before you fill out this section.

	<b>Applicant</b>	<b>Co-Applicant</b>
<b>Are you willing to earn sweat equity?</b> This includes attending a specific number of classes, working with a budget coach, volunteering, and building yours and other’s homes. Single applicants will earn a total of 200 hours and households with two or more applicants will earn a minimum of 280 hours.	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
<b>Are you able to earn sweat equity?</b> Classes are generally held on Tuesday and Thursday evenings from 5:30 – 7:30 p.m. and will take several months to complete the full schedule of classes (different schedules may exist for Dickson, Cheatham, and Wilson Counties). Construction generally occurs on weekends (both Saturdays and Sundays). All applicants will be required to attend these if selected for partnership. Given your employment and/or other life responsibilities, is it possible for you to participate in these activities? (consider your employment flexibility and childcare needed)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
<b>Homes Available</b> – Habitat only has homes available in certain areas and you may be matched with either a new or renovated home. This decision will be based upon availability of homes in the next 12 months, affordability, and Habitat’s funding sources. Are you willing to accept that you may not choose the location of the home, its size or features, and whether it is new or renovated?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
<b>Accommodations</b> – If you are unable to complete the standard sweat equity requirements due to physical or other limitations including conditions that may endanger the health and safety of others, are you willing to provide reasonable documentation of the limitation (i.e. doctor’s note) and work with Habitat to create an alternate plan for earning sweat equity hours?	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

**Closing Costs:** HFHGN requires applicants to pay a portion of the closing costs on their mortgage loans which is approximately \$2500. What is your plan for paying the closing costs on your loan within approximately 12 months? (i.e. savings, tax refund, monthly payment, IDA/escrow account, etc.) **Please explain in the space below.** If monthly payment, what is reasonable in your budget? You may be required to make at least \$50 monthly payments during partnership.

**Section G. Declarations:**

**Declarations**

The following is a list of questions that need a response from both the applicant and co-applicant.

**If you answer “yes” to any of these questions, it does not necessarily mean that you do not qualify, it means that certain rules may apply and we may request further documentation after reviewing your application.**

	<b>Applicant</b>	<b>Co-Applicant</b>
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
Have you applied for a Habitat home before? If yes, when and where? _____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you ever owned a Habitat home? If yes, when and where? _____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you owned any home or held a mortgage within the last three years? <b>Note:</b> This includes being a co-signer on a mortgage loan.	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
If you owned a home before, was it foreclosed upon? If so, when? _____	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a
Have you ever been evicted from your home? Month / Year: _____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you filed bankruptcy in the last 7 years? <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 13	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you ever been, or are you now, involved in a lawsuit? If yes, indicate: <input type="checkbox"/> Involved now <input type="checkbox"/> Not involved now, but was before	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you had property repossessed (car, furniture, etc.) in the last 7 years? If so, indicate month and year: _____	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
If you are receiving child support, alimony, or separate maintenance income, do you wish for it to be considered when evaluating your ability to repay a mortgage loan?	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a

**Section H. Marketing:**

<p><b>How did you hear about the Habitat for Humanity program?</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Habitat Homeowner</li> <li><input type="checkbox"/> Friend or Family Member</li> <li><input type="checkbox"/> Internet</li> <li><input type="checkbox"/> TV, Newspaper, Magazine</li> <li><input type="checkbox"/> Another Agency</li> <li><input type="checkbox"/> Other</li> </ul>	<p><b>Where did you get your application?</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Habitat for Humanity Office</li> <li><input type="checkbox"/> Mailed to me from Habitat Office</li> <li><input type="checkbox"/> Internet</li> <li><input type="checkbox"/> Friend or Family Member</li> <li><input type="checkbox"/> Another Agency</li> <li><input type="checkbox"/> Other</li> </ul>
<p><b>If you were referred by a current Habitat homeowner, please tell us their name so we can thank them!</b></p> <p>_____</p>	
<p><b>If you were referred by another agency, case manager, or social worker, please tell us who.</b></p> <p>_____</p>	

We are pledged to the letter and spirit of the 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.



## AGREEMENT AND AUTHORIZATION

**Please read carefully. Both applicant and co-applicant are required to read and sign this page in order for the application to be considered.**

- I understand that in signing this application, I am authorizing Habitat for Humanity of Greater Nashville (HFHGN or Habitat) to evaluate my ability to afford a monthly mortgage payment and other expenses of homeownership, my need for a Habitat home, and my willingness to partner with HFHGN according to its partnership requirements.
- I understand that the evaluation will include a credit check; verification of household income, employment, and residence; a criminal background check on all household members age 18 and older; sex offender registry check on all household members age 14 and older, and requests for other pertinent information about me and **hereby give my consent for relevant parties to release this information to HFHGN.**
- I understand that if I knowingly or willingly provide false information or omit material information, during the selection or partnership processes, my application will be declined or I may be de-selected from Habitat partnership. Material information includes but is not limited to statement of household members, marital status, income sources, assets, expenses, debts, and criminal/juvenile delinquent history.
- I understand that if I fail to report changes, during the selection or partnership process, to my marital status, income, debt, expenses, household members, criminal/juvenile delinquent history of household members, or any other material information in a timely manner, the application may be declined or I may be de-selected from Habitat partnership.
- I have answered all the questions on this application truthfully.
- I have disclosed all of the household income and assets owned by the applicant and co-applicant.
- I understand that HFHGN reserves the right to refuse to partner with any individual, as recommended by the Homeowner Selection Committee or the Executive Committee of HFHGN’s Board of Directors.
- **I understand that this application and all supporting documents turned in will become the property of HFHGN and will not be returned to me, and that HFHGN will keep the original application on file for 25 months, whether or not it is approved. I understand this application and accompanying documents will not be reused for future applications if I am declined or withdraw my application.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant Signature

\_\_\_\_\_  
Date



Under The Federal Equal Credit Opportunity Act, Fair Housing Law and Consumer Credit Protection Act: We do not discriminate on the basis of race, sex, color, age, disability, religion, national origin, family status or marital status, or because all or part of income is derived from any public assistance program.

### RIGHT TO RECEIVE COPY OF APPRAISAL

We may order an appraisal or other property valuation to determine the property’s value and charge you for this appraisal. Upon completion of the appraisal or other valuation, we will promptly provide a copy to you, even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost. Based on the HFHGN application and program processes, an appraisal is not ordered until a property is identified and assigned to you and is in the process of being built or renovated. This typically occurs months after selection for partnership.

## Attachment A: Applicant Voluntary Information

### Habitat for Humanity of Greater Nashville

#### INFORMATION FOR GOVERNMENT MONITORING PURPOSES

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 the 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 not furnish it. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname.

If you do not wish to furnish the above information, please check the box below. (Lender reviews the information on this form to assure that disclosures satisfy all statutory lender requirements.)

Applicant	Co-Applicant
<input type="checkbox"/> I do not wish to furnish this information.	<input type="checkbox"/> I do not wish to furnish this information.
<b>Race:</b> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black or African American & White <input type="checkbox"/> American Indian/Alaska Native & Black/African American <input type="checkbox"/> Other Multi-Racial (specify) _____	<b>Race:</b> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black or African American & White <input type="checkbox"/> American Indian/Alaska Native & Black/African American <input type="checkbox"/> Other Multi-Racial (specify) _____
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non Hispanic or Latino	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non Hispanic or Latino
<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
<b>Marital Status:</b> <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (including single, divorced, and widowed)	<b>Marital Status:</b> <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (including single, divorced, and widowed)

For office use only; to be completed by Habitat for Humanity of Greater Nashville:	
This application was taken: <input type="checkbox"/> In Person <input type="checkbox"/> By Mail <input type="checkbox"/> By Telephone	Received by (print or type name): _____ Signature: _____ Date: _____

## **Attachment B: Privacy Statement**

At Habitat for Humanity of Greater Nashville we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, tenant, and homeowner data – such as tax returns, pay stubs, credit reports, employment verifications and payment history – internal controls are maintained throughout the process to ensure security and confidentiality. We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us, our affiliates or others; and
- Information we receive from a consumer-reporting agency.

Habitat for Humanity of Greater Nashville employees and volunteers are subject to a written policy regarding confidentiality and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. Habitat for Humanity of Greater Nashville has no affiliates or marketing experts with whom we share personal information.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant Signature

\_\_\_\_\_  
Date



## **Attachment C: Notice of Sex Offender Registry and Criminal Background Check Policies**

As a ministry, Habitat for Humanity of Greater Nashville (HFHGN) values the safety of children, our employees, volunteers, and the families we serve. We want to take prudent measures to protect our human and material resources. Therefore, HFHGN has set a policy to require sex offender registry and criminal background checks of all applicants and household members who may be selected to become Habitat partner families and homeowners. This Sex Offender Registry and Criminal Background Check Policy considers an applicant's history that may have an impact on the applicant's ability to pay, willingness to partner, or that may pose a risk to HFHGN, its staff, volunteers, contractors, agents, or others in the community.

### **Notice to Applicants and Household Members:**

- All applicants and household members age 14 and older are subject to sex offender registry checks.
- All applicants and household members age 18 or older are subject to criminal background checks. While only adults may be screened through a third party criminal background screening service, juvenile adjudications (that are open to public inspection) for any applicant or household member, whether currently a minor or adult, are covered under this policy. *Juvenile adjudications* that are open to public inspection in Tennessee include first degree murder, second degree murder, rape, aggravated rape, rape of a child, aggravated robbery, especially aggravated robbery, kidnapping, aggravated kidnapping, or especially aggravated kidnapping and the attempt to commit those offenses, but juvenile adjudications open to public inspection from any state are relevant to this policy. HFHGN has the right to conduct criminal background checks on any member of the applicant household over the age of 14.
- Any applicant or household member who does not consent to a sex offender registry or criminal background check will disqualify the entire household from being selected for partnership with HFHGN.
- Unless a divorce is proven imminent, an applicant's separated spouse is considered a household member and is subject to sexual offender registry checks and criminal background checks in the same manner as household members.
- All applicants and household members **must disclose** convictions, diversions, guilty and nolo contendere pleas, and/or juvenile adjudications (that are open to public inspection) occurring *at any time in the past*. Failure to disclose these will disqualify an application.
- All applicants and household members **must disclose** arrests, charges, petitions and/or active probations or parole statuses in the last 12 months. Failure to disclose these will disqualify an application.
- HFHGN's policy determines what conditions render an application ineligible including, but not limited to, the list below. Full policy information is available upon request.
  - Presence on a *sex offender registry* or convictions, adjudications, diversions, guilty or nolo contendere pleas for an offense that would constitute a *Class A felony* in the State of Tennessee.
  - Convictions, adjudications, diversions, guilty or nolo contendere pleas for *felony offenses other than Class A* that have occurred in the last ten years.
  - Convictions, adjudications, diversions, guilty or nolo contendere pleas for an offense that would constitute a *Class A misdemeanor* in the State of Tennessee that have occurred in the last five years.
  - Convictions, adjudications, diversions, guilty or nolo contendere pleas for misdemeanors other those considered Class A in the State of Tennessee that have occurred in the last five years may be disqualifying if HFHGN determines, in its sole discretion, that the offense has the potential to affect the right to peaceful enjoyment of the neighborhood by others living in the applicant's prospective community or that threatens the health, safety, or welfare of HFHGN, its staff, volunteers, partner families, contractors, and agents, or others living in the applicant's prospective community.
  - Arrests, charges, or petitions against any member of the applicant household, whether convicted, adjudicated, or not, involving any of the offenses listed above, and occurring in the last twelve months.
  - Probation or parole sentences must have been completed satisfactorily for one year. Documentation may be required.
  - Failure to disclose any of the above will disqualify an application.
- This policy remains in effect throughout the HFHGN partnership, from selection to the purchase of the home.



**Definition of Household:**

- For the purposes of Sex Offender and Criminal Background Check Policy used for selection into the Habitat program, household member is defined as those listed on the Application for Housing who intend to reside in the Habitat home and separated spouses whether or not they intend to live in the Habitat home. If selected into the Habitat program, applicants must immediately notify HFHGN of any household changes prior to the purchase of the home. Applicants who provide false information regarding household members at any point in the selection process or Habitat partnership will be declined.
- When an applicant is selected and successfully completes the Habitat program, they will purchase the home and sign deeds of trust that will contain language regarding default (foreclosure) if there is criminal or juvenile delinquent activity. *In summary*, the deeds of trust state that it is a default if any member of the Borrower’s (or homeowner’s) household, a guest, or other person under the Borrower’s control commits criminal or juvenile delinquent activity or engages in abuse of alcohol or controlled substances in a manner that threatens the health, safety or right to peaceful enjoyment of the neighborhood by others residing in homeowner’s neighborhood. (Complete Deed of Trust language is available upon request.)
- Per the deeds of trust, household is defined as, “any dependent, family member, spouse, boyfriend/girlfriend, or any other person whom Lender [HFHGN] reasonably believes to be residing on the Property. Factors that Lender shall consider when determining whether someone is a member of Borrower’s household shall include, but are not limited to: (1) the persons’ subjective or declared intent to remain in the household either permanently or for an indefinite or unlimited period of time; (2) the formality or informality of the relationship between the person and the other members of the household; (3) whether the place where the person lives is in the same house or in the same neighborhood; (4) whether the person asserting residence in the household has another place of lodging; and (5) the age and self-sufficiency of the person alleged to be a resident of the household. A person “under Borrower’s control” is any person whom Borrower has permitted access to the Property. *See Department of Housing v. Rucker*, 535 U.S. 125, 122 S. Ct. 1230 (2002), which upheld a federal statute.

I/we acknowledge receipt of this Notice regarding HFHGN’s Sex Offender and Criminal Background Policies used during the selection process for Habitat partnership as well as notice regarding criminal and juvenile delinquent activity default language in the deeds of trust should I/we be selected and complete the purchase of a Habitat home. I/we acknowledge that I have notified all household members age 14 and older of these policies. I/we have truthfully disclosed all persons who intend to live in our Habitat home at this time. Should I/we be selected for partnership, I/we will notify HFHGN immediately upon any changes to our household and consent to any applicable sex offender or criminal background checks before the purchase of the home.

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Co-Applicant Name (print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co- Applicant Signature



**Attachment D: Sex Offender Registry and Criminal Background Check Consent and Disclosure Form**

*This form must be completed individually for each applicant and household member **age 14 or older**. Please make copies of the blank form for additional applicants or household members.*

Have you ever had a conviction, diversion, or juvenile adjudication for a felony or misdemeanor offense or plead guilty or nolo contondere (no contest) to a felony or misdemeanor offense? Please note that some traffic offenses and DUI's are misdemeanors.

Yes  No  Unsure

Have you been arrested, charged, or petitioned against in the last 12 months?

Yes  No  Unsure

Have you been on probation or parole within the last 12 months?

Yes  No  Unsure

Are you a registered sex offender?

Yes  No  Unsure

I understand that as a part of my application or the application of my household member or spouse to Habitat for Humanity of Greater Nashville's (HFHGN) homeownership program that I am subject to Sex Offender Registry and Criminal Background Checks. I hereby give my consent to such checks and acknowledge that I have answered the above questions truthfully and completely to the best of my knowledge. I understand that failure to consent to such checks or misrepresentation of the above information may disqualify the application. I further agree to inform HFHGN if the answer to any of the questions above changes at any time before the purchase of the Habitat home.

\_\_\_\_\_  
Applicant or Household Member Name (print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant or Household Member Signature

If this form is for a minor household member age 14-17, their legal guardian must sign acknowledging the above information.

\_\_\_\_\_  
Legal Guardian Name (print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Legal Guardian Signature





### Attachment E: ESA Background Check Release

All applicants and household members **age 18 or older** must complete this form. Please make copies of the blank form as needed.

#### APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

Habitat for Humanity of Greater Nashville (HFHGN) (The "Company") requires, as a condition of qualifying for its homeownership program that all applicants and household members age 18 or older consent to and authorize a verification of the information submitted with their application. Please read this statement carefully.

I, the undersigned applicant or household member of an applicant, do hereby certify that the information provided by me for the purpose of qualification to purchase a home through HFHGN is true and complete to the best of my knowledge. I understand that if I or the applicant is selected for partnership with HFHGN, any false statements will be considered as cause for possible dismissal from the program.

This release and authorization acknowledges that HFHGN may now, or at any time during the partnership and before the home purchase, conduct a verification of my criminal record history information which may be in the files of any Federal, State or Local criminal justice agency in any state, and/or other information as deemed necessary to become a HFHGN homeowner.

I authorize Employment Screening Associates and any of its agents and/or employees to disclose verbally and in writing the results of this verification process to the designated authorized representatives of HFHGN. The results will be used to determine eligibility under HFHGN'S homeownership qualifications.

I have read and understand this release and consent, and I authorize the background verification. I authorize persons, schools, current and former employers, and other organizations and Agencies to provide Employment Screening Associates with all information that may be requested, and I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I do hereby agree to forever release and discharge HFHGN, its agent, Employment Screening Associates, and their associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from the retrieving and reporting of information. According to the Federal Fair Credit Reporting Act, I am entitled to know if my application was denied based on information obtained by HFHGN, and to receive, upon written request, a disclosure of the public record information and of the nature and scope of the investigative report. If I am a resident of Minnesota, California or Oklahoma only and would like a copy of the investigative report, I will check here .

#### **Please provide all requested information and provide addresses for the last seven- (7) years**

\_\_\_\_\_  
(Applicant or Household Member's Name, Printed - Last, First, Middle) (Maiden Or Other Name(s) Used)

\_\_\_\_\_  
(Current Address - Street, City, State, Zip) (How Long)

\_\_\_\_\_  
(Previous Addresses – Please list at least city, state or zip code for seven years' address history) (How Long)  
Use the back of this form if more space is needed.

\_\_\_\_\_  
(Drivers License Number and State of Issuance) (Email Address)

\_\_\_\_\_  
(Social Security Number) (Date of Birth - for confirmation of ID only)

\_\_\_\_\_  
(Signature) (Date)

<b>Criminal History</b>	
Have you been convicted or plead guilty to a crime in the last 7 years? [ ] Yes [ ] No	
• Brief description of crime: _____	Misdemeanor / Felony <small>Please Circle</small>
• Date: _____ Place of conviction: _____	City State County
List additional convictions: _____	

**Attachment F: Applicant Affidavit**

*All applicants must complete this form and have it notarized.  
Please make a copy of the blank form for additional applicants.*

STATE OF TENNESSEE

COUNTY OF \_\_\_\_\_

Personally appeared before me, the undersigned officer duly authorized to administer oaths,  
\_\_\_\_\_ (“Affiant”), who being duly sworn according to law, deposes and says on oath as follows:

- (1) Affiant is completing the Habitat for Humanity of Greater Nashville (“Habitat”) Application for Housing (the “Application”), and the Habitat Homeownership Eligibility Questionnaire (the “Questionnaire”);
- (2) Affiant meets the Habitat eligibility criteria set forth in the Questionnaire;
- (3) Affiant is: \_\_\_\_ married; or  
\_\_\_\_ unmarried;
- (4) Affiant is currently present in the United States, and meets one of the following criteria:
  - (a) Citizen of the United States;
  - (b) Lawful Permanent Resident of the United States (recipient of a “Green Card”);
  - (c) Approved by the U.S. Citizenship and Immigration Services to receive Lawful Permanent Resident Status (“Green Card”), but have not yet received an official “Green Card”;
- (5) Affiant will be present in Nashville, Tennessee at the time of closing on the Habitat home if selected as a Habitat Partner Family. Affiant will personally execute all closing documents required for the purchase of the Habitat home, and will not permit documents to be executed by another individual through a Power of Attorney;
- (6) All information provided by Affiant on the Application and the Questionnaire is true, correct, and complete;
- (7) This Affidavit is made to induce Habitat to consider Affiant for selection as a Habitat Partner Family.

Sworn to and subscribed before me,  
this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Applicant Signature

My Commission Expires:  
\_\_\_\_\_

\_\_\_\_\_  
Applicant Printed Name

[Notary Seal]



## Verification of Housing/Rent

### Requested by: Habitat for Humanity of Greater Nashville

*This form must be completed by landlords for all residences of the applicants in the last three years.*

*Please make copies as needed.*

**Applicant – Please complete the top section of this form and then give it to the landlord.**

Name of all Lease Holders (print): \_\_\_\_\_

Current/Former (circle one) Address being verified: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Signature

\_\_\_\_\_  
Date

---

***The remainder of this form should be completed by the landlord only:***

This current/former tenant has applied to build a home in partnership with Habitat for Humanity of Greater Nashville. As part of the application process, his/her residency and rent payment history have to be verified. If the applicant were to be invited to participate in the program for homeownership, he/she would have 6-12 months before considering moving. **His/her signature on this form grants permission to release the requested information to us.**

Please provide the information requested and **attach your business card to this form.** You may return the completed document to the tenant or fax or email directly to Habitat at the number below. If you fax, please include a copy of your business card. If you have questions, please contact us.

Phone: (615) 254-4663, Fax: (615) 254-4645, Email: [homeownerservices@habitatnashville.org](mailto:homeownerservices@habitatnashville.org)

Landlord/Property Manager Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Landlord/Property Manager Address: \_\_\_\_\_

Are you a friend or relative of the applicant?  yes  no

Tenant Move-in Date: \_\_\_\_\_ Still in residence?  yes  no If no, move-out date: \_\_\_\_\_

Total Amount of Monthly Rent Paid: \$ \_\_\_\_\_

Does/did this tenant consistently pay rent on time?  yes  no

If no, number of delinquent payments since move-in: \_\_\_\_\_ In last 12 months: \_\_\_\_\_

Are rent payments current now?  yes  no If no, amount of past due rent and penalties owed: \_\_\_\_\_

Has this tenant been a good addition to your neighborhood?  yes  no

Based on your experience with this tenant, would you recommend them for Habitat's homeownership program?

yes  no  maybe

Please explain and add any additional comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Landlord/Property Manager Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name and Title



## Verification of Employment

### **Requested by: Habitat for Humanity of Greater Nashville**

*This form must be completed by current employers for all applicants. Please make copies as needed.*

**Applicant – Please sign the top section of this form and provide it to your employer.**

I have applied to purchase a home in partnership with Habitat for Humanity of Greater Nashville. Please accept my signature below as permission to release my employment information to Habitat for Humanity of Greater Nashville.

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Employee Name (print)	Employee Signature	Date
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***This section should be completed by an employer representative only:***

Please provide the information requested below. If your company uses an automated verification system, please provide the necessary information to your employee for retrieving employment and income information and have a supervisor answer the last question regarding the employee's participation in Habitat's program as this cannot be assessed through a verification system. Please also attach or include a copy of your business card. You may return the completed document to the employee, or fax or email directly to Habitat. If you have questions, please contact us.

**Phone: (615) 254-4663, Fax: (615) 254-4645, Email: [homeownerservices@habitatnashville.org](mailto:homeownerservices@habitatnashville.org)**

**Employer Name (include all names used):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor's name and phone number:** \_\_\_\_\_

**Hire date:** \_\_\_\_\_ **Current position:** \_\_\_\_\_

**Type of employment (check all that apply):**  full-time  part-time  seasonal  temporary  PRN  other

**Current base pay:** \$ \_\_\_\_\_  hourly  monthly  annually  weekly  bi-weekly  semi-monthly  other

**Average hours worked/week:** \_\_\_\_\_ **Date and amount of last pay increase:** \_\_\_\_\_ \$ \_\_\_\_\_

**Date and amount of next pay increase (if known):** \_\_\_\_\_ \$ \_\_\_\_\_

**Pay schedule is:**  weekly  bi-weekly  semi-monthly  monthly  other \_\_\_\_\_

**Total gross earnings YTD (all income):** \$ \_\_\_\_\_ **Through (date):** \_\_\_\_\_

**Total overtime YTD:** \$ \_\_\_\_\_ **If overtime is applicable, is continuance likely?**  yes  no

**Total bonuses YTD:** \$ \_\_\_\_\_ **If bonuses are applicable, is continuance likely?**  yes  no

**Frequency of bonus payouts:** \_\_\_\_\_ **Last bonus payout date and amount:** \_\_\_\_\_ \$ \_\_\_\_\_

**Please explain any non-base pay earnings or other important information:** \_\_\_\_\_

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If this employee is approved for a Habitat home, s/he will be required to attend classes that occur during evenings typically starting at 5:30 p.m. on Tuesdays and Thursdays for approximately 4-5 months and that s/he must be available to build homes with Habitat and volunteers all day Saturday and Sunday for 4 consecutive weekends that are scheduled in advance. A few daytime appointments will also be needed as the purchase of the home nears. Please indicate your company's **willingness to work with employee to accommodate Habitat's program requirements:**

- We will work with him/her to accommodate Habitat's requirements.
- We **cannot** work with him/her to accommodate the requirements.
- Evenings and/or weekends will not be a problem because s/he is not scheduled to work evenings or weekends.

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**Employer Representative's Signature**

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**Print Name and Title**

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**Date**

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**Phone Number**

**Verification of Prior Employment**

**Requested by: Habitat for Humanity of Greater Nashville**

*This form must be completed by previous employers during the last two years for all applicants. Please make copies as needed.*

*If not applicable, do not complete this form.*

**Applicant – Please sign the top section of this form and provide it to your former employer. Alternatively, you may provide a separation notice with dates of employment with last paystub if you worked there any during the current year.**

I have applied to purchase a home in partnership with Habitat for Humanity of Greater Nashville. Please accept my signature below as permission to release my employment information to Habitat for Humanity of Greater Nashville.

Employee Name (print)	Employee Signature	Date
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***This section should be completed by the former employer only:***

Please provide the information requested below. If your company uses an automated verification system, please provide the necessary information to your employee for retrieving employment and income information. Please also attach or include a copy of your business card. You may return the completed document to the employee, or fax or email directly to Habitat. If you have questions, please contact us.

**Phone: (615) 254-4663, Fax: (615) 254-4645, Email: [homeownerservices@habitatnashville.org](mailto:homeownerservices@habitatnashville.org)**

**Company Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Employer contact phone number:** \_\_\_\_\_

**Hire Date:** \_\_\_\_\_ **Termination or Last Date of Employment** \_\_\_\_\_

**Position Held:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**What type of employment was this (check all that apply)?**  full-time  part-time  seasonal  temporary  PRN

**Base Pay at Termination:** \$ \_\_\_\_\_  hourly  monthly  annually  weekly  bi-weekly  semi-monthly

other, explain \_\_\_\_\_

**Average Hours Worked/Week:** \_\_\_\_\_

**If employed anytime during the current calendar year, please provide the following:**

**Total gross earnings YTD:** \$ \_\_\_\_\_

\_\_\_\_\_  
**Employer Signature**

\_\_\_\_\_  
**Print Name and Title**

\_\_\_\_\_  
**Date**



**Certification of No Income**  
**for Habitat for Humanity of Greater Nashville**

*This form must be completed by any applicant or household member age 18 or older who does not receive income. Please make copies as needed. If not applicable, do not complete this form. This form requires a notary signature.*

Applicant or Household Member's Full Name (print): \_\_\_\_\_

Address: \_\_\_\_\_

I do not presently receive any income from any source, including, but not limited to, the following:

- Employment
- Unemployment Insurance Benefits
- Compensation
- Disability
- Social Services
- Child Support
- Veteran's Benefits
- Supplemental Security Income

\_\_\_\_\_  
Applicant or Household Member Signature

\_\_\_\_\_  
Date

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***This section should be completed by a notary only:***

STATE OF TENNESSEE

COUNTY OF \_\_\_\_\_

Before me, \_\_\_\_\_, a Notary Public of the state and county mentioned, personally appeared \_\_\_\_\_, the within named bargainer (applicant or household member), with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that he/she executed the foregoing instrument for the purposes therein contained.

Witness my hand and seal, at office, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_





## What will happen after I turn in my application?

- 1. Initial Review:** Habitat staff will review your application and obtain your credit report within 30 days and take one of the following actions:
  - The application will be declined\* if it did not include the application fee or the items listed on page C.
  - If our initial review indicates that the application is potentially eligible, we will request additional documents as listed on **page 23** to further determine if qualified. You will have 30 days to turn these in.
  - If we determine the application is not eligible at any point in this process, it will be declined.\*
- 2. Additional Review:** Once you submit your additional documents, we will determine whether your application should be moved to an interview or be declined.\*
- 3. Interview:** *You must have attended an Information Meeting before the interview.* The interview will be scheduled with Habitat staff during our regular office hours. The purpose of the interview is to clarify and review the financial aspects of your application and owning a Habitat home. We will discuss your housing need and willingness to partner with Habitat. It is also a time for you to ask questions. After the interview, we will inform you whether your application is moving forward to the next steps or whether the application is being declined.\*
- 4. Verifications/Criminal Background:** Prior to the home visit, we will perform background and other verifications.
- 5. Home Visit:** Two volunteer members of the Homeowner Selection Committee will schedule a home visit with you. The purpose of the home visit is to meet your household, understand your housing need, and confirm your willingness to partner and participate in the Habitat program. You will receive more information about the home visit should your application reach this stage.
- 6. Homeowner Selection Committee Vote:** The Homeowner Selection Committee will vote to select/pre-approve or decline\* your application in the month following your home visit.
- 7. Partnership Selection/Pre-Approval:** If the Committee selects/pre-approves your application, you will receive and sign a Partnership Agreement/Notice of Pre-Approval and attend an Orientation to Habitat to learn details of how you will accomplish all requirements to fully qualify for Habitat's mortgage loan. An exact home location will not yet be known. From partnership selection to mortgage approval and home purchase generally takes 6-18 months.

\*If your application is declined, you will receive an Adverse Action Notice by mail. This notice will explain the reasons for the decline and may include resources to help you address these for a future application. However, we cannot guarantee that addressing these specific decline reasons alone will make a future application eligible as our criteria and your situation may change over time. If you believe the decline reason is not accurate or do not understand it, we are happy to discuss this with you.

### Application Completion

Applicants are responsible for completing all paperwork, attending an Information Meeting, and participating in the steps listed above in a timely manner. Habitat will complete its reviews, as explained above, as quickly as possible, but applicant volume will determine how quickly this happens. All steps above are required for an application to reach final completion and approval. We will remain in regular contact with you during this process, mainly by mail.

### Information Changes

Since the selection process may take time, please make sure to provide us with updated information such as changes in your contact information. You should immediately inform us if there are changes to your application including but not limited to marital status, household members, income amounts, sources of income, job changes or additions, expenses/loans, criminal/juvenile delinquency history (e.g. arrests or charges), and assets/savings.

## **Additional Documents to be Requested:**

If you submit everything on the Page C checklist and we determine that you might be eligible, you will receive a letter in the mail requesting additional documents that must be turned in within 30 days, so be prepared! Below is the list of items that will be requested. In some cases, items other than those listed below may be requested due to your individual circumstances.

- Proof of identity and age for all other household members under age 18. (birth certificates, passports, etc.)
  - More recent paystubs, bank statements, or income documents
  - Printout or letter with current benefits received including food stamps, Families First, Medicare, etc
  - Bills – two months’ bills for all of the following items you pay: electric, water, gas, cell phones, home phones, internet, cable, childcare, life insurance, health insurance, storage, other recurring bills
  - Letter of Credit from electric, water, and gas companies. Obtained by contacting their customer service.
  - Auto insurance – proof of coverage and premium amount paid
  - Credit Card Statements – 3 most recent monthly statements for each open account
  - Loans statements with the balance, payment, and 12 month history of payment. (includes car, student, personal, furniture, etc)
  - Section 8 or rental assistance documentation that shows your portion and the housing authority’s portion of your rent
  - Divorce Decrees
  - Proof of previous homeownership ending date (sale of the home, payoff, foreclosure date)
  - Documents from a separated spouse including identification, income sources, and background consent forms.
- 

## **How to Get Tax-Related Documents**

**Tax Return Transcripts:** Transcripts do not look like the tax form you filed, but they contain all of the information we need. Transcripts are FREE and if you request them by phone or internet, they will arrive by mail in about two weeks. You do not need the version that you would have to pay for.

**W-2s and 1099s or Transcript:** Are the Wage and Tax Statements provided by your employer each January or Income Statements from various other sources of income that you use to file your taxes. If you did not keep copies, your employer should have them; employers are required to keep these on file. If you prefer, you may request them from the IRS, just follow the instructions below. **From the IRS, you will request a transcript of your W-2s.**

**Verification of Non-Filing:** There are many reasons people are not required to file taxes. If you did not file taxes, we need a letter from the IRS that says they have no record of your filing.

### **Ways to request these documents from the IRS:**

- **Internet** – [www.irs.gov](http://www.irs.gov) – Follow the links to get a copy of your return and then follow the instructions to get a transcript. You do not need to pay for an original copy. You will need your Social Security Number, Date of Birth, and Address that was listed on your last return unless you have changed your address with an official post office change of address form. If you filed jointly, use the first person’s Social Security Number.
- **Phone** – **1-800-908-9946** – You will need the same information as listed above in the internet option.
- **In Person – Local IRS Office** – 801 Broadway (Federal Courthouse Building, Downtown Nashville beside the Frist Center for the Arts), hours are Monday – Friday, 8:30 – 4:30, for an appointment, call 1-844-545-5640.