

application packet



apply now to build & buy a home with habitat



do any of these words resonate with you or speak to you?
if yes, turn the page to see how to get started.



LET'S GET STARTED!!!

(APPLICATION STARTS ON PAGE 4)

STEP 1: DON'T PUT OFF APPLYING! If you are concerned, or unsure if you qualify, please don't assume you are not qualified. Even if you apply, and your application is denied, you will be provided with the reason(s) for the denial so you can, possibly, reapply in the future. You will never know if you are eligible, unless you apply.

STEP 2: REVIEW HABITAT'S THREE CRITERIA FOR QUALIFYING

- 1) Must have Need for Adequate Housing:** Must be living in substandard or inadequate housing that does not meet your needs, in subsidized housing or current housing expenses exceeds 30% of monthly income. We encourage you to apply and let us determine if you meet this criteria.
- 2) Must have Ability to Pay Estimated Monthly Mortgage of \$550.00:** This estimated amount includes closing costs, taxes, and insurance. The ability to pay criteria are listed as part of Step 4.
- 3) Must be Willing to Partner:** This is a public partnership with many responsibilities and expectations for each Habitat for Humanity homebuyer. At Habitat, we often say we give away nothing to homebuyers, but an opportunity. To be considered to build and purchase a Habitat for Humanity home, you must be willing to invest "**sweat equity**" hours. You earn sweat equity hours by working to help in building your home and the homes of others, attending homeownership classes, working in the Habitat ReStores or other approved activities.

HOW MANY HOURS MUST BE EARNED?

250 Sweat Equity Hours- One Applicant Households where only one person is officially purchasing the home must earn 250 hours of sweat equity.

500 Sweat Equity Hours- Two applicant (applicant and co-applicant) households must earn 500 hours of sweat equity.

NOTE: Must be comfortable with friends and family knowing you are purchasing a home with Habitat. This is a public partnership that can involve news coverage, social media coverage and information about homebuyers and build sites are shared on the Habitat website.

STEP 3: CONFIRM YOUR HOUSEHOLD MEETS THE BELOW INCOME REQUIREMENTS

INCOME GUIDELINES TO QUALIFY FOR A HFHGC HOME

(Household must be between 30% and 80% of the area's median income for the Cincinnati Metro area as established by HUD, income limits current as of APRIL 2021)

Family Size	Minimum Monthly Gross Income	Maximum Monthly Gross Income
1	\$1,496	\$3,987
2	\$1,708	\$4,554
3	\$1,921	\$5,125
4	\$2,208	\$5,691
5	\$2,587	\$6,150
6	\$2,965	\$6,604
7	\$3,343	\$7,058
8	\$3,722	\$7,516

STEP 4: CONFIRM YOU MEET THE FOLLOWING REQUIREMENTS

- 1) **No bankruptcy within the past three years** (must be three years from date of discharge)
- 2) **No eviction within the past 12 months**
- 3) **Must be a first-time homebuyer** an individual, or family, who has not owned a home during the three-year period prior to purchase of a Habitat home, some exceptions apply.
- 4) **No felony convictions for anyone in household, over age 18, within past five years**
- 5) **No open judgments or liens**
- 6) **Debt/Income ratio cannot exceed 40% of monthly income spent on estimated monthly mortgage payment of \$550 and monthly debt combined.**
- 7) **No more than \$2,000 in uncollected past due, bad debt. Example:** If a credit card has a \$3,000 balance and payments are current, this is not considered a "bad" debt. However, if the credit card is in default and is in collection that would be considered a "bad" debt.
- 8) **You can check your credit by visiting www.annualcreditreport.com.** You are entitled to receive one **free** copy from each of the three credit reporting agencies one time per year by visiting this website.

NOTE: Married applicants can apply individually, but spouse must be listed on application as member of household, provide all income and asset information, consent to a background check and agree to sign a release of dower rights at time of home purchase. The spouse who is not an applicant will not have their income or debts counted when determining if the applicant meets the ability to pay criteria, but their income and assets will be considered to determine if the household income is within Habitat's guidelines.

STEP 5: DETERMINE IF YOU ARE WILLING TO BUILD WHERE HFHGC IS CURRENTLY BUILDING.

The last page of this application is the current list of available build sites.

IMPORTANT: If you would like to be considered for any of the build sites (last page of this application), your completed application, with **ALL** requested documentation for each household member (listed on Page 9 of application), must be received by **FRIDAY, FEBRUARY 4TH**. **Habitat is not responsible if a mailed application is received after this date.**

If you are not interested in any of the build sites, then you are encouraged to keep checking our website at www.habitatcincinnati.org the 10th of each month for updated list of build sites.

WHAT IF UNABLE TO SUBMIT APPLICATION BY FRIDAY, FEBRUARY 4TH. Please continue to check the website the 10th of each month to see if new build sites have been listed. As soon as a site is listed that you would like to be considered, please apply at that time.

NOTE: Tour of homes, review of building plans, or additional specifics on these build sites, etc. are not available until an applicant has completed the application process and HFHGC has determined you are eligible for our program. **At that time, Habitat will host a meeting with all qualified applicants to review, in detail, the list of available build sites and answer any questions.**

STEP 6: GATHER REQUIRED DOCUMENTATION AND COMPLETE YOUR APPLICATION. COMPLETED APPLICATIONS MUST BE RECEIVED BY FRIDAY, February 4th. PLEASE MAKE SURE TO SEND IN ALL REQUIRED DOCUMENTATION WITH YOUR APPLICATION OR IT COULD BE DENIED FOR BEING INCOMPLETE.

Note: Please review the list of required documentation on Page 9 of the application and turn in all information that applies to your household. If you do not submit any item of the documentation listed that applies to your household, your application may be considered Incomplete and be denied. List of documents required are on Page 9 of this application.

STEP 7: TURN IN YOUR APPLICATION AND DOCUMENTATION

APPLICATIONS ARE NOT ACCEPTED BY EMAIL OR FAX, PLEASE MAIL THE APPLICATION TO OUR OFFICE AT HFHGC, 4910 PARA DRIVE, CINCINNATI, OHIO 45237. Applications can also be dropped off at our office Monday through Friday, 10:00 AM to 1:00 PM or contact me directly for alternate time. Any questions, email is the best way to connect at helen.spieler@habitatcincinnati.org or call 513-482-5604.



Application for Housing

MAIL TO: HFHGC, 4910 PARA DRIVE, CINCINNATI, OHIO 45237

Call Helen Spieler if you have questions at 513-482-5604. Email is the easiest way to connect: helen.spieler@habitatcincinnati.org

Dear Applicant(s): You need to complete this application for HFHGC to determine if you qualify for a Habitat for Humanity house. Please fill out the application completely and accurately as possible. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act.

How did you hear about Habitat? _____ (Habitat homeowner, mailing, community agency, employer, website, craigslist, event)

If Habitat homeowner referred you, please write their name here: _____ **Have you applied before?** Please circle YES or NO

Completed by HFHGC, Office Use Only) Date Received _____

APPLICANT INFORMATION					
Applicant			Co-Applicant		
Applicant's Full Name (with middle initial)			Co-Applicant's Full Name (with middle initial)		
Social Security Number		Date of Birth	Social Security Number		Date of Birth
Phone Number		Cell Phone	Phone Number		Cell Phone
Email Address			Email Address		
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)			Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)		
ADDRESS INFORMATION					
Applicant Current Address			Co-Applicant Current Address		
STREET ADDRESS _____			STREET ADDRESS _____		
APT. # _____			APT. # _____		
NAME OF APARTMENT COMPLEX _____			NAME OF APARTMENT COMPLEX _____		
City		State	City		State
		Zip Code			Zip Code
Number of years living at this address:		<input type="checkbox"/> Rent <input type="checkbox"/> Own	Number of years living at this address:		<input type="checkbox"/> Rent <input type="checkbox"/> Own
Applicant Previous Address if living at Current Address for less than one (1) year			Co-Applicant Previous Address if living at Current Address for less than one (1) year		
Street			Street		
City		State	City		State
		Zip Code			Zip Code
Number of years living at this address:		<input type="checkbox"/> Rent <input type="checkbox"/> Own	Number of years living at this address:		<input type="checkbox"/> Rent <input type="checkbox"/> Own
DEPENDENTS and others who will live with you in home (additional can be listed on next page)					
Name			Social Security Number		
Relationship to Applicant/Co-Applicant			Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Name			Social Security Number		
Relationship to Applicant/Co-Applicant			Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Name			Social Security Number		
Relationship to Applicant/Co-Applicant			Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female

Name	Social Security Number		
Relationship to Applicant/Co-Applicant	Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Name	Social Security Number		
Relationship to Applicant/Co-Applicant	Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Name	Social Security Number		
Relationship to Applicant/Co-Applicant	Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Name	Social Security Number		
Relationship to Applicant/Co-Applicant	Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female
Name	Social Security Number		
Relationship to Applicant/Co-Applicant	Age	Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female

WILLINGNESS TO PARTNER

Applicants with a co-applicant must complete 500 hours of "sweat equity" and applicants with no co-applicant must complete 250 hours. Your help in building your home and the homes of others is called "sweat equity." As part of partnering with Habitat for Humanity, you are committing to the following:

- Earn a minimum of 8 hours of sweat equity per month UNTIL your home begins construction
- 100 of your total sweat equity hours must be worked on home construction
- Working on your construction site each Saturday while your home is under construction
- Attend Financial Peace University classes available through HFHGC
- Attend Home Ownership classes covering topics such as maintenance, lawn care and purchase process
- Attending monthly Habitat Homebuyer Group meetings

By checking "YES" below, I commit to partner with Habitat for Humanity of Greater Cincinnati and complete 250 or 500 (whichever is applicable) hours of "sweat equity". I commit to fulfilling all the requirements listed above.

Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No	Co-Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • You are responsible for paying up to \$800 towards the first-year homeowner's insurance premium. Example: If the premium is \$500, then you must pay the full \$500. If the premium is \$1200, then you must pay \$800 and Habitat will pay the difference of \$400 and then add that amount to the purchase price of your home. Future insurance premiums are due in full once per year and will be paid through your monthly mortgage payment. • I agree to pay up to \$800 towards the first year of homeowner's insurance 			
Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No	Co-Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No

PRESENT HOUSING CONDITIONS: (DO NOT LEAVE ANY BLANKS, IT IS IMPORTANT TO WRITE DOWN WHY YOU THINK YOUR PRESENT HOME IS INADEQUATE)

Number of bedrooms (please circle)	1	2	3	4	5	Number of bathrooms (please circle)	1	1.5	2	2.5	3
Does your rent include utilities? <input type="checkbox"/> Yes <input type="checkbox"/> No						If your utilities are included, we need a current statement from Duke Energy or your local utility company verifying that you can have utilities in your name.					

Amount of your monthly rent? _____ Is your rent subsidized? Yes No

Give examples of why you think your present home is inadequate for your family's needs: (USE EXTRA PAGE, IF NEEDED, DON'T LEAVE BLANK)

LANDLORD INFORMATION (MUST BE FILLED IN COMPLETELY)

Applicant Current Landlord			Co-Applicant Current Landlord		
Current Landlord Name	Current Landlord Phone		Current Landlord Name	Current Landlord Phone	
Current Landlord Street Address			Current Landlord Street Address		
City	State	Zip Code	City	State	Zip Code

If living at Current Address for less than one (1) year, please complete the following:

Applicant Previous Landlord			Co-Applicant Previous Landlord		
Prior Landlord Name	Current Landlord Phone		Current Landlord Name	Prior Landlord Phone	
ADDRESS OF FORMER RESIDENCE			ADDRESS OF FORMER RESIDENCE		
City	State	Zip Code	City	State	Zip Code

EMPLOYMENT INFORMATION (Self-employed applicants must provide 2 years of Federal 1040 Tax Returns. Verification must also be provided for all self-employment income for YTD income earned)

Applicant			Co-Applicant		
Is applicant currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many jobs does the applicant currently have? _____	Is the applicant self-employed? (see above) <input type="checkbox"/> Yes <input type="checkbox"/> No	Is applicant currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many jobs does the applicant currently have? _____	Is the applicant self-employed? (see above) <input type="checkbox"/> No <input type="checkbox"/> Yes
Name of <u>Current</u> Employer			Name of <u>Current</u> Employer		
Street Address			Street Address		
City	State	Zip Code	City	State	Zip Code
Start Date	Monthly Gross (before taxes) Wages		Start Date	Monthly Gross (before taxes) Wages	

If working at job less than one (1) years, list previous employers for last three (3) years below:
If there are additional employers within the past three (3) years, please list on a separate sheet.

Applicant			Co-Applicant		
Name of <u>Previous</u> Employer OR SECOND JOB			Name of <u>Previous</u> Employer OR SECOND JOB		
Street Address			Street Address		
City	State	Zip Code	City	State	Zip Code
Type of Business	Business Phone		Type of Business	Business Phone	
Start Date	End Date	Monthly Gross (before taxes) Wages	Start Date	End Date	Monthly Gross (before taxes) Wages

LEGAL DOCUMENTS

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

Applicant:

Co-Applicant:

MONTHLY INCOME INFORMATION (Continued on next page)

All income listed must be verified. Please see list of required income documentation on page 6 of this application.

Income Source	Applicant (DO NOT LEAVE BLANK, WRITE IN \$0 OR N/A IF YOU DO NOT RECEIVE THAT TYPE OF INCOME)	Co-Applicant (DO NOT LEAVE BLANK, WRITE IN \$0 OR N/A IF YOU DO NOT RECEIVE THAT TYPE OF INCOME)	Additional household members over 18 who receive income (Must list income below for EVERYONE IN HOUSEHOLD OVER AGE 18)	
Wages	\$	\$	Name	\$
Veteran's Administration/Military Benefits	\$	\$	Name	\$
Social Security	\$	\$	Name	\$
SSI/Social Security	\$	\$	Name	\$
Disability	\$	\$	Name	\$
Alimony	\$	\$	Name	\$
Child Support	\$	\$	Name	\$
TANF	\$	\$	Name	\$
Periodic Payments from trusts, annuities, inheritance, retirements or pension?	\$	\$	Name	\$
Income from personal or real property	\$	\$	Name	\$
Other	\$	\$	Name	\$
TOTAL MONTHLY INCOME	\$	\$	\$	\$

CURRENT MONTHLY BILLS (AGAIN, PLEASE DO NOT LEAVE BLANKS, WRITE IN 0, IF IT DOESN'T APPLY TO YOU)

Please list bills only once. Do not duplicate if same for Applicant and Co-Applicant.

Monthly Expense	Applicant	Co-Applicant
Car Payments	\$	\$
Average Total Credit Card Payments How many credit cards?	\$ How many credit cards? _____	\$ How many credit cards? _____
Student Loan Payments	\$	\$
Alimony	\$	\$
Child Support (If you pay child support, list here)	\$	\$
Other Debt:	\$	\$
Other Debt:	\$	\$

ASSETS

List checking and savings accounts, real estate, stocks, bonds, whole life insurance, retirement accounts, pensions, etc. for each person in household over age 18.

Does the applicant have a checking account? <input type="checkbox"/> Yes <input type="checkbox"/> No How many checking accounts? _____	Does the co-applicant have a checking account? <input type="checkbox"/> Yes <input type="checkbox"/> No How many checking accounts? _____
Does the applicant have a savings account? <input type="checkbox"/> Yes <input type="checkbox"/> No How many savings accounts? _____	Does the co-applicant have a savings account? <input type="checkbox"/> Yes <input type="checkbox"/> No How many savings accounts? _____
Does the applicant have any other assets: ex. IRA, Stocks, Retirement, pensions, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does the co-applicant have any other assets: ex. IRA, Stocks, Retirement, pensions, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does any other member in household over age 18 Have any of the above assets? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please provide information requested below or on attached sheet of paper with information for each account.	Does any other member in household over age 18 Have any of the above assets? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please provide information requested below or on attached sheet of paper with information for each account.
Name of Bank, Savings & Loan or Credit Union	TYPE OF ACCOUNT Balance \$
Name of Bank, Savings & Loan or Credit Union	TYPE OF ACCOUNT Balance \$
Other Asset (s) - Such as real estate property or personal property (not including vehicles) If you own any property, home, land, etc., it should be listed here. Have you ever owned a home? If yes, please list below the address and years owned. ADDRESS _____ YEARS OWNED _____	Value \$ <input type="checkbox"/> Yes <input type="checkbox"/> No
Have the applicant or the co-applicant disposed of assets (given away money or assets) for less than the fair market value in the past two years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the applicant or co-applicant have income assets or sources other than those listed above? If Yes, please list below.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Asset	Value \$

DECLARATIONS

Questions:	Applicant	Co-Applicant
a. Do you have any outstanding judgments because of court decision?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Have you declared bankruptcy within the last three (3) years? (It must be three years from date of discharge for HGHGC to consider application)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you ever been evicted? If yes, please list month/year _____	<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? If yes, please provide a printout of the prior 12-month payment history	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you a U.S. citizen or do you have permanent resident status in the U.S.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Is anyone in household a U.S. Veteran, or currently serving, in the Armed Forces?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Has anyone in household, over age 18, been convicted of a felony? (Felony convictions within 5-years, will disqualify an application)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please attach a separate sheet of paper with detailed explanation if you answered "YES" to any question or "NO" to question F.

AUTHORIZATION AND RELEASE

I understand that by filing out this application and signing below, I am authorizing Habitat for Humanity of Greater Cincinnati to evaluate my actual need for the Habitat homeownership program, my ability to repay the no-interest loan or (zero-interest equivalent loan) and other expenses of home ownership, and my willingness to be a Partner Family through sweat equity.

I understand that the evaluation will include a home interview with my family at our current home, credit check from all three credit reporting agencies, rental verification, employment verification, a check against the Specially Designated Nationals list and a criminal background check. Habitat for Humanity of Greater Cincinnati also screens all potential staff, board members, and applicant families on the sexual offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that completing this application, I am submitting myself to a criminal background check.

I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, the application may be denied, even if I have already been selected to build and buy a Habitat home, and I may be disqualified from the program. The original copy of this application will be retained by Habitat for Humanity of Greater Cincinnati, even if the application is not approved, for at least a period of three years.

APPLICANT SIGNATURE _____ **DATE** _____

CO-APPLICANT SIGNATURE _____ **DATE** _____

RIGHT TO RECEIVE COPY OF APPRAISAL -HFHGC is required to notify you that if you were approved to build and buy a home with HFHGC, we will order an appraisal in connection with your loan. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close.

APPLICANT SIGNATURE _____ **CO-APPLICANT SIGNATURE** _____

The following information is needed for EACH person in household over age 18.

- Require ALL paystubs for **EACH** person in household over age 18 for the prior three months.
- A signed copy of last year’s Federal Income 2019 & 2020 Tax Return & W-2 forms.
- Public assistance records stating the current monthly amount received (TANF, Social Security, SSI, Disability, etc.) for any person in household receiving such assistance, including minors.
- Child Support Information- For each child under age 18 on the application, require a 12-month payment history, even if not paid, or verification that there is no order in place.
- Copy of utility bills for previous month
- Rent receipts for last 3 months & **Completed Landlord Reference Form on Page 12.**
- Prior 3 months of statements of ANY checking accounts for each household member
- Current statement for ANY savings account, for each household member
- Current statement for retirement accounts such as 401K, IRA, stocks, life insurance, etc.
- Statements for outstanding debts (credit cards, child support, auto loans, student loans, etc.)
- If you have any “bad” debts reported or listed on credit report, you will need to provide a current statement and a written payment plan to bring that debt current.

Application will not be considered if over \$2,000.00 in uncollected, past-due debt.

- Copies of two (2) of the following documents each for the applicant and co-applicant: driver’s license, Permanent Resident Card (Green Card), Social Security Card, state photo ID, passport

Check yes or no if you will give permission to HFHGC to share your contact information (Applicants' names, address, phone number and email) with SmartMoney, a member agency of CityLink, if a referral for financial and money management training is considered beneficial.

Yes No

Applicant

Co-Applicant

We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin. Habitat for Humanity of Greater Cincinnati does not discriminate against any person on the basis of race, ethnicity, age, religion, sex, gender, sexual orientation, gender identity, gender expression, national origin, physical or mental ability, genetic information, military status, marital status, medical condition, or any category identified by state or local government in their operations or delivery of serve.

REMEMBER: Attach all documentation for your household as requested on the Items Needed List on Page 9

**Mail completed applications, to be received
by FRIDAY, FEBRUARY 4TH:**

Habitat for Humanity of Greater Cincinnati
4910 Para Drive
Cincinnati, Ohio 45237



Equal Housing Opportunity
Equal Housing Lender

NOTE: [You can drop off your application at our office at 4910 Para Drive, Monday – Friday, 10:00 AM to 1:00 PM. Please note that we do not make copies of required documentation and are not able to review your application, while you wait. If you would like to discuss an alternate time to drop off, please call or email.](#)

APPLICATIONS ARE NOT ACCEPTED BY EMAIL OR FAX

IF YOU HAVE ANY QUESTIONS: Contact Helen Spieler, the Director of Homebuyer Services at HFHGC, at 513-482-5604 or by email (the easiest way to connect) at helen.spieler@habitatcincinnati.org.

[DO NOT EMAIL or FAX YOUR APPLICATION, SEE ABOVE IF YOU ARE DROPPING OFF APPLICATION AT OFFICE.](#)

NEXT STEPS:

Habitat will respond by mail within 30 days of receiving your application with one of the following:

1. **INTERVIEW NOTIFICATION- INVITATION TO PRE-INTERVIEW MEETING**– If you attend Pre-Interview meeting and confirm interest in available build site(s), we will discuss your current need for housing and your willingness to partner during a home interview with you, and your entire household, at your residence as the final step in the application process.
2. **NOTICE OF ADVERSE ACTION**- Application has been denied with details of the reason(s) so that you may be able to address any issues and reapply.

GOVERNMENT MONITORING INFORMATION

Applicant Name (Printed)	Co-Applicant Name (Printed)
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Please read the following statement before completing the information below:

The following information is requested by the Federal Government for loans related to the purchase of homes, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. 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 this information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.)

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.		
Ethnicity			Ethnicity		
<input type="checkbox"/> Hispanic or Latino			<input type="checkbox"/> Hispanic or Latino		
<input type="checkbox"/> Not Hispanic or Latino			<input type="checkbox"/> Not Hispanic or Latino		
Race/National Origin			Race/National Origin		
<input type="checkbox"/> American Indian or Alaskan Native			<input type="checkbox"/> American Indian or Alaskan Native		
<input type="checkbox"/> Native Hawaiian or other Pacific Islander			<input type="checkbox"/> Native Hawaiian or other Pacific Islander		
<input type="checkbox"/> Black/African American			<input type="checkbox"/> Black/African American		
<input type="checkbox"/> White/Caucasian			<input type="checkbox"/> White/Caucasian		
<input type="checkbox"/> Asian			<input type="checkbox"/> Asian		
<input type="checkbox"/> Other (specify):			<input type="checkbox"/> Other (specify):		
Sex			Sex		
<input type="checkbox"/> Female	<input type="checkbox"/> Male		<input type="checkbox"/> Female	<input type="checkbox"/> Male	
Date of Birth			Date of Birth		
Marital Status			Marital Status		
<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (single, divorced, widowed)	<input type="checkbox"/> Married	<input type="checkbox"/> Separated	<input type="checkbox"/> Unmarried (single, divorced, widowed)

Combined Annual Income: \$
Total Number of Dependent Children:

To Be Completed by the Person Conducting the Interview	
This application was taken by:	<input type="checkbox"/> face-to-face interview <input checked="" type="checkbox"/> mail <input type="checkbox"/> telephone
Interviewer's Name (print or type)	
NO INTERVIEWER, APPLICATION COMPLETED SOLELY BY APPLICANT AND RETURNED TO HABITAT OFFICE FOR REVIEW	
Interviewer's Signature NO INTERVIEWER AS STATED ABOVE, APPLICATIONS ARE NOT TAKEN BY INTERVIEW, BUT COMPLETED BY APPLICANT(S) AND RETURNED TO HABITAT OFFICE FOR REVIEW	Date
Interviewer's Phone Number NON-APPLICABLE...THERE IS NO INTERVIEWER	



LANDLORD REFERENCE FORM

A tenant, past or prior, has applied for housing through the Habitat for Humanity of Greater Cincinnati homeownership program and has given us written permission to contact you for a landlord reference. We would appreciate your help in answering the following questions. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated. Thank you very much for your assistance.

PLEASE RETURN FORM TO: MAIL: HFHGC, 4910 Para Drive, Cincinnati, Ohio 45237 or FAX: to 513-621-6869 or EMAIL: to helen.spieler@habitatcincinnati.org

TENANT(S) NAME _____
ADDRESS: _____

When did the tenant rent from you? Please list month and year _____ to _____

Amount of monthly rent \$ _____

Is monthly rent subsidized? Please circle YES or NO. If yes, what is their portion? \$ _____

Applicant's payment history (circle one): Excellent Satisfactory Unsatisfactory

Landlord's Name _____ Address of Landlord _____

Phone number of Landlord _____

Does tenant owe any money at this time toward a past due amount? If so, how much? \$ _____

ADDITIONAL COMMENTS:

SIGNATURE OF LANDLORD _____ DATE _____

If you have any questions, please contact Helen Spieler,
HFHGC Homebuyer Services Manager at 513-482-5604.

HABITAT FOR HUMANITY OF GREATER CINCINNATI

BUILD SITE LIST-UPDATED JANUARY 10, 2022

ADDRESS	CITY	STATE	COUNTY	ZIP CODE	TYPE OF HOME	BEDS	BATH	LEVELS	FOUNDATION
4121 CHAMBERS (ATTACHED TOWNHOME)	CINCINNATI (NORTHSIDE)	OHIO	HAMILTON	45223	REHAB OF EXISTING HOME	3	1.5	2	UNFINISHED BASEMENT