



PRELIMINARY APPLICATION FOR HOMEOWNERSHIP

Name _____ DOB _____ SS# _____
 (Applicant) (Mo./Day/Yr.)

Single (includes Divorced or Widowed) Married (includes Separated)

Are you a citizen of the U.S.? _____ If not, when did you come to the U.S.? _____ Are you a lawful Permanent Resident? _____

Have you ever been convicted of a felony? YES NO if YES, please explain _____

Name _____ DOB _____ SS# _____
 (Co-Applicant) (Mo./Day/Yr.)

Single (includes Divorced or Widowed) Married (includes Separated)

Are you a citizen of the U.S.? _____ If not, when did you come to the U.S.? _____ Are you a lawful Permanent Resident? _____

Have you ever been convicted of a felony? YES NO if YES, please explain _____

Current Address (please include Zip Code): _____

Previous Address (if less than two years): _____

Telephone # (Daytime): _____ Telephone # (Alternate): _____

Email: _____

List **CURRENT** employer(s), start date, and monthly wages for each working member of your household 18 years or older.

<u>Employee's name</u> (who works here?)	<u>Company name and city</u>	<u>Start date</u>	<u>Gross MONTHLY income</u>
_____	_____	_____/_____/_____	_____
_____	_____	_____/_____/_____	_____
_____	_____	_____/_____/_____	_____

List Other Income: (Include AFDC/TANF, Food Stamps, Social Security, SSI, Disability, Alimony, Child Support, Other).
 Please include food stamp amount separately

<u>Name of recipient</u>	<u>Type of income</u>	<u>Amount per month</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**PLEASE COMPLETE BACK SIDE OF APPLICATION
(OVER)**

- Present housing situation: How much do you pay in rent per month? \$ _____ Utilities? \$ _____
- Is this rent subsidized (i.e. Section 8, etc.)? YES NO If YES, please explain: _____
- Number of Bedrooms _____ Number of bathrooms _____ Other rooms _____
- Do you share housing with another family? YES NO If YES, explain: _____
- Do you live in a garage or other similar structure? YES NO If YES, describe: _____
- **Do Not** include applicant or co-applicant. List every person living in your home with you currently (today). Add additional members on a piece of paper.

<u>Name</u>	<u>Age</u>	<u>Sex</u>	<u>Relationship to applicant</u>	<u>Will this person live with you in Habitat House?</u>
/	/	/	/	/
/	/	/	/	/
/	/	/	/	/
/	/	/	/	/
/	/	/	/	/
/	/	/	/	/
/	/	/	/	/
/	/	/	/	/

- Please describe the condition of your current home (why do you need a Habitat for Humanity home)? _____

- How did you hear about Habitat for Humanity and the orientation meeting you just attended? _____

- Have you applied for homeownership through Habitat for Humanity at this affiliate or any other affiliate in the past? If so, please explain where you applied, how many times you applied and what the outcome was after each application. _____



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, gender, physical or mental limitations, familial status, or national origin.

When application is completed please submit your application

Bend Area Habitat for Humanity

1860 NE 4th

Bend, OR 97701

You may call 541.385.5387 x225 and ask to speak with the Family Coordinator if you have any questions or concerns.