



HOME PROGRAM OVERVIEW

Habitat for Humanity Montgomery County helps individuals and families achieve **strength, stability** and **self-reliance** through **shelter**. Acceptance in the Home Program is based on three separate criteria, which is **NEED, INCOME, and WILLINGNESS** to partner with Habitat.

ELIGIBILITY REQUIREMENTS

You must meet the following criteria to be eligible to purchase a home from Habitat for Humanity Montgomery County, TX:

I. NEED for adequate housing (YOU MUST MEET AT LEAST ONE REQUIREMENT BELOW):

- A. Due to living in substandard housing
 1. Problem with structure damage, wiring, heating, bathroom, kitchen, etc.
 2. Inadequate conditions for a person living with disabilities.
 3. Overcrowding: Inadequate number of bedrooms, as determined by the number, ages and gender of household members.
 4. Homelessness: Living with friends or relatives or in temporary housing, including FEMA trailers.
- B. Due to inadequate financial resources
 1. Cost-burdened: Cost of rent is more than 30% of the household's monthly income.
 2. Applicant is unlikely to qualify for a conventional or government-assisted mortgage loan.
 3. Government-subsidized housing (e.g., housing authority or Section 8 housing).
 4. Income range: Gross household income (based on all means of income generated by each adult in the household) should fall below 60% and must never exceed 80% of the area median income for the household size.

II. LOW-TO-MODERATE INCOME - ABILITY TO PAY (YOU MUST MEET ALL SIX REQUIREMENTS BELOW):

1. Fall within the United States Department of Housing and Urban Development's (HUD's) annual income limit guidelines for Montgomery County, Texas (MCTX).

Family Size	1	2	3	4	5
Gross Maximum Income	56,640	64,720	72,800	80,880	87,360

2. Have a record of consistent taxable income through stable employment, or other sources, for at least one year prior to submitting this application.
3. Have enough income to pay the mortgage payment, homeowners' insurance, and property taxes. Property taxes are set by the City of Magnolia and Montgomery County. As a homeowner, you are also responsible for utilities, home maintenance, and repairs. The home mortgage will last for approximately 30 years and have a fixed interest rate.
Disclaimer: *Interest rates are generally focused in the 3–4% range but may vary depending on the lender you choose and are subject to change.*
4. Have monthly expenses that do not exceed 45% of your monthly gross income.
5. All debt obligations, past and present, will be considered by a committee reviewing a recent credit history report. The amount of debt allowed will vary. A previously established credit history will help to support your future payment obligations.
6. Any adult members of the household, 18 and older, are required to pass a background check clearance.

III. WILLINGNESS TO PARTNER WITH HABITAT (YOU MUST MEET ALL FOUR REQUIREMENTS BELOW):

1. Be willing to contribute a minimum of 300 hours of your own labor (known as "sweat-equity"). This will be done by a combination of working on your own home, on houses of other Habitat partner families, taking required homeowner classes, and/or working at the Habitat MCTX ReStore.
2. The applicant Participates in the home visit.
3. Be willing to meet Habitat's requirements by responding promptly to requests for information.
4. The applicant agrees to avoid new consumer debt during this process.
5. Demonstrate honesty and responsibility through your credit history, your references, and the accuracy of information provided on your application. Failure to disclose information requested may result in closing your application.

FOLLOW THESE INSTRUCTIONS TO APPLY

1. **Complete the application fully and honestly.** If Habitat determines that any information contained in your application was materially and/or intentionally inaccurate, you will not be accepted into the Program. All information is confidential and only seen by the Board of Directors, Habitat Family Selection Committee, and staff.
2. The documentation below is required for us to accept your application for review. If these documents are not included, your application will not be accepted. It is important to note that it is your responsibility to make copies of all supporting documentation and to submit them with your application. We will **not** accept original documents. Additionally, we are unable to make copies for you. These items must be submitted with the application:
 - a) **Three (3) pieces of identification:**
 - ☐ State Id/Driver's License
 - ☐ Social Security Card
 - ☐ Birth Certificate OR Permanent Residency Card **for all members of the household, 18 or older**
 - b) **Two (2) months of current pay stubs for each person in the household employed, 18 or older**
If self-employed, you will need the most recent two (2) months of your bank statements for all checking and savings accounts. You must include all pages, including blank pages.
 - c) **Last (2) years W-2 forms for each person age 18 or older in the household**
If you can't obtain all of your W-2's filed on your tax return, you may request a "Wage and Income" transcript from the IRS's website at www.irs.gov.
 - d) **Last two (2) years of tax returns (1040) for each person 18 or older in the household; 3 years if self-employed**
 - e) **Supplemental income documentation for the last 12 months**
 - ☐ Child support
 - ☐ Alimony
 - ☐ SSI Award Letter
 - ☐ Disability
 - ☐ Divorce Decree (if applicable). NOTE: If you are legally married, but separated, your spouse is required to provide income information and all required documentation even if he/she will not live in the house.
3. **Return the completed application and attachments by mail to the address listed on the front page of the application.**

AFTER YOU HAVE APPLIED

The Family Selection Committee will review your application. One of the committee volunteers will call you to set up a meeting to discuss your application. Once your application is reviewed, you will receive a notice of action within one month.

IF YOU ARE SELECTED

If your family qualifies to purchase a home, you will begin to build a relationship with Habitat by becoming partners in every stage of the planning and construction of your new home.

If you have any questions about your eligibility or need assistance with this application, please call the Habitat Office at 936-441-4663 or email familyservices@habitatmctx.org.

Please take a moment to let us know how you heard of Habitat for Humanity Montgomery County

Home Program:

- Word of mouth ☐
- Website ☐
- Social Media ☐
- Church ☐

Other:

Application

Habitat Homeownership Program

We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status or national origin.



Dear Applicant: Please complete this application to determine if you qualify for the Habitat for Humanity Montgomery County homeownership program. Please fill out the application as completely and accurately as possible. **PRIVACY NOTICE:** All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act.

1. APPLICANT INFORMATION

Applicant	Co-applicant
Applicant's name	Co-applicant's name
	Relationship to applicant _____
Social Security number _____	Social Security number _____
Home phone _____ Birth Date _____	Home phone _____ Birth Date _____
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widowed	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widowed
Email address _____	Email address _____
Dependents and others who will live with you (not listed by co-applicant)	Dependents and others who will live with you (not listed by applicant)
Name & Relationship to applicant Birth Date Male Female	Name & Relationship to co-applicant Birth Date Male Female
_____ _____ <input type="checkbox"/> <input type="checkbox"/>	_____ _____ <input type="checkbox"/> <input type="checkbox"/>
_____ _____ <input type="checkbox"/> <input type="checkbox"/>	_____ _____ <input type="checkbox"/> <input type="checkbox"/>
_____ _____ <input type="checkbox"/> <input type="checkbox"/>	_____ _____ <input type="checkbox"/> <input type="checkbox"/>
_____ _____ <input type="checkbox"/> <input type="checkbox"/>	_____ _____ <input type="checkbox"/> <input type="checkbox"/>
_____ _____ <input type="checkbox"/> <input type="checkbox"/>	_____ _____ <input type="checkbox"/> <input type="checkbox"/>
Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent	Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent
_____	_____
Number of years _____	Number of years _____
If you have lived at your present address for less than two years, complete the following:	
Last address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent	Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent
_____	_____
Number of years _____	Number of years _____

2. FOR OFFICE USE ONLY — DO NOT WRITE IN THIS SPACE

Date received: _____	Date of board approval: _____
Date of adverse action letter: _____	Date of partnership agreement: _____

3. WILLINGNESS TO PARTNER

To be considered for Habitat Montgomery County homeownership, you and your family must be willing to complete a certain number of "sweat-equity" hours. Your help in building your home and the homes of others is called "sweat equity" and may include clearing the lot, painting, helping with construction, working in the Habitat Montgomery County office, attending homeownership classes or other approved activities.

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

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

4. PRESENT HOUSING CONDITIONS

Number of bedrooms: ☐ 1 ☐ 2 ☐ 3 ☐ 4 or more

Other rooms in the place where you are currently living:

☐ Kitchen ☐ Bathroom ☐ Living room ☐ Dining room

☐ Other (please describe) _____

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

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

Name, address and phone number of current landlord: _____

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

5. EMPLOYMENT INFORMATION

5. EMPLOYMENT INFORMATION			
Applicant		Co-applicant	
Name and address of CURRENT employer	Years at this job Date of hire	Name and address of CURRENT employer	Years at this job Date of hire
How often are you paid? <input type="checkbox"/> Weekly <input type="checkbox"/> Every 2 weeks <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____	Monthly (gross) wages \$	How often are you paid? <input type="checkbox"/> Weekly <input type="checkbox"/> Every 2 weeks <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____	Monthly (gross) wages \$
Your Job Title	Employer phone	Your Job Title	Employer phone
If you are working at a second job OR have been at your current job less than one year, complete the following information			
Name and address of LAST or SECOND employer. <input type="checkbox"/> Last Employer <input type="checkbox"/> Second Employer	Years at this job Date of hire	Name and address of LAST or SECOND employer. <input type="checkbox"/> Last Employer <input type="checkbox"/> Second Employer	Years on this job Date of hire
How often are you paid? <input type="checkbox"/> Weekly <input type="checkbox"/> Every 2 weeks <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____	Monthly (gross) wages \$	How often are you paid? <input type="checkbox"/> Weekly <input type="checkbox"/> Every 2 weeks <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other _____	Monthly (gross) wages \$
Your Job Title	Employer phone	Your Job Title	Employer phone

6. MONTHLY INCOME

Income source	Applicant	Co-applicant	Others in household	Total
Wages	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Section 8 housing	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
Total	\$	\$	\$	\$

PLEASE NOTE:

Self-employed

applicants may be required to provide additional documentation such as tax returns and financial statements.

HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE

Name	Income source	Monthly income	Date of birth

7. ASSETS					
Name of bank, savings and loan, credit union, etc.	Address	City, state	ZIP	Account number	Current balance
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$

8. DEBT						
	TO WHOM DO YOU AND THE CO-APPLICANT(S) OWE MONEY?					
	APPLICANT			CO-APPLICANT		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Other motor vehicle	\$	\$		\$	\$	
Boat	\$	\$		\$	\$	
Furniture, appliance, TVs (includes rent-to-own)	\$	\$		\$	\$	
Alimony	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Total medical	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
Total	\$	\$		\$	\$	

MONTHLY EXPENSES

Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities	\$	\$	\$
Insurance	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$
Land line	\$	\$	\$
Business expenses	\$	\$	\$
Union dues	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Total	\$	\$	\$

9. DECLARATIONS

Please check the box beside the word that best answers the following questions for you and the co-applicant

	Applicant	Co-applicant
a. Do you have any outstanding judgments because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Have you been declared bankrupt within the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had property foreclosed on or deed in lieu of foreclosure in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Are you paying alimony or child support or separate maintenance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Are you a co-signer or endorser on any loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. 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

If you answered "yes" to any question a through h, or "no" to question i, please explain on a separate piece of paper.

10. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity Montgomery County to evaluate my actual need for the Habitat Montgomery County homeownership program, my ability to repay an affordable loan and other expenses of homeownership, and my willingness to be a partner through sweat equity.

I understand that the evaluation will include personal visits, a credit check and employment verification. Habitat Montgomery County uses a third party (Merchant Credit Bureau) to pull credit reports therefore, Habitat will not show as performing a credit inquiry. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to receive a Habitat Montgomery County home, I may be disqualified from the program and forfeit any rights or claims to a Habitat Montgomery County home. The original or a copy of this application will be retained by Habitat for Humanity Montgomery County even if the application is not approved.

I also understand that Habitat for Humanity Montgomery County screens all applicants on the sex offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

Applicant signature _____

Date _____

Co-applicant signature _____

Date _____

X _____ X _____

PLEASE NOTE: If more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application. Please mark your additional comments with "A" for applicant or "C" for co-applicant.

11. RIGHT TO RECEIVE COPY OF APPRAISAL

This is to notify you that we may order an appraisal in connection with your loan and we may charge you for this appraisal. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close.

Applicant's name _____ Co-applicant's name _____

DOCUMENTS YOU WILL NEED TO SUBMIT WITH YOUR APPLICATION

f) Three (3) pieces of identification:

- ☐ State Id/Driver's License
- ☐ Social Security Card
- ☐ Birth Certificate OR Permanent Residency Card **for all members of the household, 18 or older**

g) Two (2) months of current pay stubs for each person in the household employed, 18 or older

If self-employed, you will need the most recent two (2) months of your bank statements for all checking and savings accounts. You must include all pages, including blank pages.

h) Last (2) years W-2 forms **for each person age 18 or older in the household**

If you can't obtain all of your W-2's filed on your tax return, you may request a "Wage and Income" transcript from the IRS's website at www.irs.gov.

i) Last two (2) years of tax returns (1040) for each person 18 or older in the household; 3 years if self-employed

j) Supplemental income documentation for the last 12 months

- ☐ Child support
- ☐ Alimony
- ☐ SSI Award Letter
- ☐ Disability
- ☐ Divorce Decree (if applicable). NOTE: If you are legally married, but separated, your spouse is required to provide income information and all required documentation even if he/she will not live in the house.

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation or surname.

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

To be completed only by the person conducting the interview	
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	Interviewer's name (print or type)
	Interviewer's signature Date
	Interviewer's phone number

13. EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices at: FTC Regional Office for the Southwest Region, 1999 Bryan Street, Suite 2150 Dallas, TX 75201 or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support, and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete, and we will be unable to invite you to participate in the Habitat program.

Applicant(s):

Applicant's name _____

Co-applicant's name _____

Applicant signature

Date

Co-applicant signature

Date

X _____

X _____