



## APPLICATIONS DUE BY JULY 31, 2024

*Thank you for your interest in the homeownership program of Loveland Habitat for Humanity!*



### DETERMINE ELIGIBILITY

Review the enclosed *Homeowner Qualification Flyer* to determine if you meet eligibility requirements. Note that gross applicant income requirements are for the borrower(s) who are expected to both live in the home and be responsible for the mortgage, which is as long as 30 years.



### RETURN COMPLETED APPLICATION WITH ALL DOCUMENTATION

Be sure to use the checklist to ensure all of the required documents are submitted. Include your application fee of \$30.00, *per applicant*. Applications are accepted in-person daily from 9:00-4:00 pm or by appointment, at 108 W. 29<sup>th</sup> St. Emailed applications are not accepted because of the sensitive nature of documentation.



### REQUIRED ORIENTATION SESSION

If you meet the basic requirements, you will be invited to a mandatory orientation session held in August. There, you will learn more about the homeownership program, the requirements, and we will answer any questions you have about the construction process. All applicants and co-applicants **must** be present for the orientation.



### GET UPDATES EVERY 30 DAYS

After you submit your application, you will be notified every 30 days as to the status. Final determination will be made in December 2024. You will be asked to meet with financial coaches in October and undergo a home visit in November, to determine your eligibility. You will also be asked to work 10 volunteer hours at the ReStore. If you don't meet the requirements, you will receive written notification of why. We encourage you to reapply when you can meet the requirements!

Incomplete or applications that are missing requested documentation or the application fee will **not be considered**. Applications turned in after July 31, will not be considered. If you need assistance, need to make a copy or have questions, call us at 970-669-9769 x105 or email [applications@lovelandhabitat.org](mailto:applications@lovelandhabitat.org).

In partnership,

*Michelle Ackerman*

Michelle Ackerman

Director of Homeowner Services

**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 administers compliance with this law concerning this creditor is the Federal Trade Commission, Washington, DC 20580.



Revised June 2024 LHFH

# Loveland Habitat For Humanity Homeownership




Application Cycle from July 1- July 31,2024

## Applicants must meet the following basic requirements:

1. Have lived or worked in Loveland for at least one year.
2. Have a need for adequate housing. *(examples include, but not limited to: current living conditions overcrowded or unsafe, pay 40% or more of your income for rent, or receive subsidized housing). Need can also mean that because of the lack of housing affordability, homeownership hasn't been possible.*
3. Willing to partner with Habitat by working a set number of volunteer hours (sweat equity) per adult applicant.
4. Are a US citizen or legal permanent resident.

## 2024 INCOME REQUIREMENTS

### ANNUAL INCOME *(Before taxes taken out)*

Number of persons in household						
max	\$78,660	\$78,660	\$87,780	\$96,820	\$104,100	\$111,380
min	\$42,300	\$42,300	\$46,860	\$51,380	\$ 55,020	\$ 58,210

### MONTHLY INCOME *(Before taxes taken out)*

max	\$6,555	\$6,555	\$7,315	\$8,068	\$8,675	\$9,282
min	\$3,525	\$3,525	\$3,905	\$4,282	\$4,585	\$4,850

2024 Income stated above is equal to 40-80% of the Area Median Income (AMI) for Larimer County as determined by the Colorado Housing and Finance Authority (CHFA), plus homeownership expenses such as property taxes, HOA dues, and property insurance. Eligible income is for all loan applicants (borrower and co-borrower). Applicants are expected to both live in the residence and be liable on the Mortgage Loan. Income adjusted annually; as of 5.15.24

Applicant household income can include verifiable employment, social security/pension, SSI/disability, or child support. Unstable or income not expected to continue for the first three years of the mortgage cannot be considered.

We are pledged to the letter and spirit of US policy for the achievement of equal housing opportunity. Loveland Habitat is an equal opportunity builder and complies with the Federal Fair Housing Act in the marketing, sale and purchasing of properties. All qualified applicants will receive consideration for homeownership without regard to Race, Color, Religion, National Origin, Sex, Disability and Familial Status.

Website: [www.lovelandhabitat.org](http://www.lovelandhabitat.org)

Call: Michelle at 970-669-9769 x 105

Email: [mackerman@lovelandhabitat.org](mailto:mackerman@lovelandhabitat.org)



Rev 5.2024 LHFH

# Tips to Prepare for a Habitat Home Application

Here are some suggestions to prepare yourself as you wait for the application cycle to open:

**CREDIT :** While Habitat does not generally have a credit score requirement, we do review how you most recently have been handling your debts and payments. Additionally, old debts such as non-medical collections, liens and judgements must be paid prior to making application. Medical collections must be less than \$2,000. We can also consider non-traditional credit such as a history of payments on rent, utilities, child-care, gym memberships, etc. If you want to know about your own credit, you can go to [annualcreditreport.com](http://annualcreditreport.com) or call 1-877-322-8228 to get a free credit report each year.

If you need assistance in understanding a credit report or need help on how to clear items, contact GreenPath Financial Wellness at [www.greenpath.com](http://www.greenpath.com).

Bankruptcies must have been discharged or dismissed for a minimum of two years at the time of application.

**DEBT:** You must have monthly debt payments not greater than 12% of your gross monthly income. Monthly debt payments include things like car payments, student loan payments, and credit card payments. If you need assistance in calculating your monthly debt to income ratio or have questions about what counts as monthly debt, give us a call at 970-669-9769 x105. If you are not presently making a student loan payment and would like an estimate of what we will use to calculate your future payment for ratio calculation purposes, you can go to <https://studentaid.gov/loan-simulator> [Loan Simulator | Federal Student Aid](#).

**SAVINGS:** Applicants must be able to save approximately \$3500-\$4500 for closing costs within roughly 9-12 months. There may be other savings requirements, depending on your rent amount versus estimated mortgage payments.

## IMPORTANT DOCUMENTS THAT YOU CAN GATHER IN PREPARATION FOR YOUR APPLICATION:

1. **Income Tax Documents:** We need physical copies of your last 2 years of tax returns and W-2s or 1099s. You can contact your tax preparer or order copies from the IRS at 800-829-1040.
2. **Proof of Income:** We will request proof of income at the time of application, such as paycheck stubs, SSDI or Social Security award letters, child support disbursement history or any other documentation to demonstrate stable, reliable income.
3. **Bankruptcy Discharge Documentation:** If you have declared bankruptcy, we need the documents showing two or more years since it was discharged.
4. **Lease Agreement:** We will ask for a copy of your lease and proof of the last year of rent payments.
5. **Divorce:** If divorced, it must be finalized, not just separated. You will need copies of the final divorce decree.
6. **Self-Employment Documentation:** If you are self-employed, we will require 2 years of profit and loss statements, in addition to 3 years of taxes (with schedule-Cs) and business bank statements for 24 months.
7. **Proof of Citizenship or Legal Residence:** Please provide copies of 1) Colorado driver's license or ID card 2) social security cards and 3) Birth Certificates or Naturalization Papers or Permanent Residency cards for each member of the household.



Applicant  
Co-applicant

## 2024 My Habitat Application Checklist

**NOTE: INCOMPLETE Applications will NOT be able to move through the selection process.**

### 1. Application and Checklist

- My Habitat Checklist** (this form), completed and signed. Submit letter of explanation, as needed.
- Program Application**, completed and signed, filled in "N/A" for whatever doesn't apply to you
- Homeowner Additional Questions**, completed and signed

### 2. Check or money order made out to *Loveland Habitat for Humanity* (\$30 per applicant) NO CASH

### 3. Residency, ID, and Citizenship

- Copy of valid **Colorado Driver's License** or **Colorado Issued ID** for all applicants
- Copy of **Birth certificates**, **US Passport** or **Legal Permanent resident card** for all applicants

### 4. Employment and Income Information

- COPIES of last 90 days of **paystubs** (for every household member 18 and older).
- COPIES of last **paystub** of 2023 and the first **paystub** of 2024.
- Verification of Employment Form** for each employed applicant. Have your employer complete for each applicant
- DOCUMENTATION OF ALL NON-EMPLOYMENT INCOME:**
  - Proof of **alimony** and/or **child support** (please include Child/Alimony Support Orders and Family Support Registry report to include distributions for the past 12 months and/or deposit records for 12 months)
  - Statement of Disability Income** (if applicable)
  - Statement of Social Security Income** (if applicable)

### 5. Financial Information

- COPIES of **complete bank account statements (ALL pages)** for ALL accounts in the last 3 months
- COPIES of **all current credit card, automobile, and loan statements** (including student loans)
- COPIES of **2023 and 2024 W-2's or 1099 for ALL sources of income**
- COPIES of **2023 and 2024 Federal Tax Returns SIGNED** (Please include all pages)
- COPIES of **2023 and 2024 Tax Transcripts** (instructions on how to obtain these are included in this packet)
- Self-employment** requires 2 years minimum self-employment history and the following documents:
  - 3 previous years Federal tax returns including all applicable schedules.
  - 3 years of profit and loss statements, as well as 24 months of business banking accounts

### 6. Rental Information

- COPY of current **Lease Agreement** (must live or work in Loveland)
- Proof of **Six (6) Months Lease Payment History**
- COPY of most recent **Utility Bills**
- Request for Landlord Reference**, have your landlord complete

### 7. Other Habitat Documents

- Authorization to Obtain Credit Report**, signed and dated for all applicants
- Equal Credit Opportunity Act Notice**, completed and signed (*keep copy of your records*)
- Affidavit and Release of Information**, completed and signed
- Transparent Release and Authorization of Background Check** – separate form must be completed and signed *by everyone in household 18 years and over-please copy the form and use as needed*
- Patriot Act Disclosure**, completed and signed
- Pre-Homeownership Survey**, completed
- Borrower Signature Authorization**, completed and signed
- Right to Receive Appraisal**, signed and dated (*keep copy for your records*)

### 8. Supporting Legal Documentation, *if it applies to you*

- COPY of Divorce Decree** (if applicable)
- COPY of Bankruptcy documents** with dated discharge letter and/or **Foreclosure documents** (if applicable)
- Written explanation of circumstances of Bankruptcy and/or Foreclosure** (if applicable)
- Receipt of Collections Paid and/or most recent hospital bill showing amount due or paid off**



Applicant

Date

Co-Applicant

Date

IF YOU HAVE QUESTIONS, PLEASE CALL OUR HOMEOWNER SERVICES DIRECTOR AT 970-669-9769. **Equal Housing Opportunity Statement:** We are pledged to the letter and spirit of US 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.



APPLICATIONS DUE BY  
JULY 31, 2024

## APPLICATION COVER PAGE

*Loveland Habitat for Humanity applications are only available during the open application period. Please complete this form and include it with your application. Applications received after July 31 will not be considered.*

Applicant Name(s): \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Best Contact Phone Number: \_\_\_\_\_

Secondary Phone Number: \_\_\_\_\_

Best Time to call: \_\_\_\_\_

Email : \_\_\_\_\_

How did you hear about the application availability? \_\_\_\_\_

How many people (*including yourself*) will be living in the home? \_\_\_\_\_

Marital Status (*married, divorced, separated, never married, widowed or domestic partnership*)? \_\_\_\_\_

Do you require Spanish interpretation? \_\_\_\_\_

*Be sure to include \$30.00 for each applicant, to cover a portion of the credit check(s)*



Incomplete applications  
will not be accepted

Sincerely,

*Michelle Ackerman*

Michelle Ackerman

Director of Homeowner Services

[mackerman@lovelandhabitat.org](mailto:mackerman@lovelandhabitat.org) 970-669-9769 x105

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Revised June 2024 LHFH





Loveland Habitat for Humanity  
108 W 29th St. Unit D  
Loveland CO 80538  
applications@lovelandhabitat.org

# 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 for the Habitat for Humanity homeownership program truthfully, completely and accurately. All information you include on this application will be maintained in accordance with our privacy policy.

- Type of credit**
- ☐ I am applying for **individual credit**.
- ☐ I am applying for **joint credit**. Total number of borrowers: \_\_\_\_\_
- ☐ Each borrower intends to apply for joint credit. **Your initials:** \_\_\_\_\_

1A. APPLICANT INFORMATION																																																	
Applicant	Co-applicant																																																
<b>Applicant's name:</b> _____ <b>Alternative and former names:</b> _____	<b>Co-applicant's name:</b> _____ <b>Alternative and former names:</b> _____																																																
Social Security number _____ Home phone (____) _____ Cell phone (____) _____ Work phone (____) _____ Age _____ Date of birth (mm/dd/yyyy) _____ <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.)	Social Security number _____ Home phone (____) _____ Cell phone (____) _____ Work phone (____) _____ Age _____ Date of birth (mm/dd/yyyy) _____ <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.)																																																
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<b>If you have lived at your present address for less than two years, complete the following, for all addresses during the past two years:</b>																																																	
Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years: _____	Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years: _____																																																
<b>FOR OFFICE USE ONLY — DO NOT WRITE IN THIS SPACE</b>																																																	
Date received: _____ Date of notice of incomplete application letter: _____ Date of adverse action letter: _____	Date of selection committee approval: _____ Date of board approval: _____ Date of partnership agreement: _____																																																

## 1B. MILITARY SERVICE

Did you (or your deceased spouse) serve, or are you currently serving, in the United States Armed Forces?

(Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, Reserve or National Guard) ☐ Yes ☐ No

If yes, check all that apply:

- ☐ Currently serving on active duty with projected expiration date of service/tour \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)
- ☐ Currently retired, discharged, or separated from service
- ☐ Only period of service was as a non-activated member of the Reserve or National Guard
- ☐ Surviving spouse

Is anyone else in your household serving, or did they serve, in the United States Armed Forces? ☐ Yes ☐ No

If yes, check all that apply:

- ☐ Currently serving on active duty with projected expiration date of service/tour \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)
- ☐ Currently retired, discharged, or separated from service
- ☐ Only period of service was as a non-activated member of the Reserve or National Guard

## 2. WILLINGNESS TO PARTNER

To be considered for the Habitat homeownership program, you and your household members must be willing to complete a certain number of "sweat-equity" hours, which may include hours spent helping to build your home and the homes of others, attending homeownership classes, and/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"/>

## 3. PRESENT HOUSING CONDITIONS

Currently, are you: ☐ Renting ☐ Rent-free ☐ Own

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

Other rooms in the place where you are currently living: ☐ Kitchen ☐ Bathroom ☐ Living room ☐ Diningroom

Other (please describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

**If you rent your current residence, please supply a copy of your lease and a copy of the most recent money order receipt, bank statement or canceled rent check to evidence rent payment.**

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

## 4. PROPERTY INFORMATION

☐ I do not own any real estate (move to Section 5).

If you own your residence, what is your monthly mortgage payment (including taxes, insurance, etc.)?

\$ \_\_\_\_\_/month Unpaid balance \$ \_\_\_\_\_

Do you own land other than your residence? ☐ No ☐ Yes

Monthly payment (including taxes, insurance, etc.)

\$ \_\_\_\_\_

If you wish your property to be considered for building your Habitat home, please attach the deed, any existing appraisal and information about any liens.

**Note:** A separate approval process will apply with respect to any such requests, as each parcel of land is unique and may not be suitable for building on through the Habitat program.

**5. EMPLOYMENT INFORMATION**

Applicant		Co-applicant	
<input type="checkbox"/> Does not apply.		<input type="checkbox"/> Does not apply.	
Name and address of <b>CURRENT</b> employer:	Start date (mm/dd/yyyy):	Name and address of <b>CURRENT</b> employer:	Start date (mm/dd/yyyy):
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
<b>If working at current job less than one year, complete the following information.</b>			
Name and address of <b>PREVIOUS</b> employer:	Years on this job:	Name and address of <b>PREVIOUS</b> employer:	Years on this job:
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
<input type="checkbox"/> <b>Check if you are the business owner or are self-employed.</b> <input type="checkbox"/> I have an ownership share of less than 25%. <input type="checkbox"/> I have an ownership share of 25% or more. Monthly income (or loss) \$_____			<b>PLEASE NOTE:</b> Self-employed applicants will be required to provide additional documents such as tax returns and financial statements.

**6. MONTHLY INCOME**

Income source	Applicant	Co-applicant	Others in household	Total
Salary/wages (gross)	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Housing voucher (e.g., Section 8)	\$	\$	\$	\$
Unemployment benefits	\$	\$	\$	\$
VA compensation	\$	\$	\$	\$
Retirement (e.g., pension)	\$	\$	\$	\$
Military entitlements	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

**HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE**

Name	Income source	Monthly income	Date of birth



## 7. SOURCE OF DOWN PAYMENT AND CLOSING COSTS

Where will you get the money to make the down payment or pay for closing costs (for example, savings or gifts from family member or others; any grants for which you have or intend to apply)? If you borrow the money, whom will you borrow it from, and how will you pay it back?


## 8. ASSETS

Type of asset and name of bank, savings and loan, credit union, retirement account, etc. (Do not include land here.)	Address	City, state	ZIP	Account number	Current balance/ value/vested amount (if applicable)
					\$
					\$
					\$
					\$
					\$
					\$
					\$

## 9. LIABILITIES AND EXPENSES

TO WHOM DO YOU OWE MONEY?	Applicant			Co-applicant		
Account	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Auto loan	\$	\$		\$	\$	
Installment (e.g., boat, personal loan)	\$	\$		\$	\$	
Lease (e.g., furniture, appliances — includes rent-to-own)	\$	\$		\$	\$	
Alimony/separate maintenance	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Revolving (e.g., credit cards)	\$	\$		\$	\$	
Student loan debt	\$	\$		\$	\$	
Open 30 days (balance paid monthly, e.g., travel card)	\$	\$		\$	\$	
Medical debt	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
<b>Total</b>	<b>\$</b>	<b>\$</b>		<b>\$</b>	<b>\$</b>	

## MONTHLY EXPENSES

Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities (electricity, water, gas)	\$	\$	\$
Insurance (rental, car, health, etc.)	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$

Land line	\$	\$	\$
Business expenses	\$	\$	\$
Union dues	\$	\$	\$
Transportation expense (gas, bus pass, vehicle upkeep, etc.)	\$	\$	\$
Food and essential supplies	\$	\$	\$
Entertainment	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

## 10. DECLARATIONS

Please check the box beside the word that best answers the following questions for you and the co-applicant.	Applicant	Co-applicant
a. Are there 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 declared bankruptcy within the past seven years? If YES, identify the type(s) of bankruptcy: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had any property foreclosed upon in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you party to a lawsuit in which you potentially have any personal financial liability?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Have you conveyed title to any property in lieu of foreclosure or completed a pre-foreclosure sale or short sale (where the lender agreed to accept less than the outstanding mortgage balance due) within the past seven years?	<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 a co-signer or guarantor on any debt of loan that is not disclosed on this application?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. 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
<b>Note:</b> If you answered "yes" to any question a through g, or "no" to Question h, please explain on a separate piece of paper.		

## 11. AUTHORIZATION, AGREEMENT AND RELEASE

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

I understand that the evaluation will include personal visits, a credit check and employment verification (if applicable). I have answered all the questions on this application truthfully and accurately, and if any of the information provided changes after I submit this application, I will supplement this application, as applicable. I understand that if I have not answered the questions truthfully, accurately or completely, or fail to supplement this application as necessary to maintain its accuracy and completeness, my application may be denied, and that even if I have already been selected to receive a Habitat home, I may be disqualified from the program and forfeit any rights or claims to a Habitat home. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

If this application is created as (or converted into) an "electronic application," I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable federal and/or state electronic transaction laws. I intend to sign and have signed this application either using my: (a) electronic signature or (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.

I also understand that Habitat for Humanity 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.

<b>Applicant signature</b>	<b>Date</b>	<b>Co-applicant signature</b>	<b>Date</b>
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.

## 12. RIGHT TO RECEIVE COPY OF APPRAISAL

This is to notify you that if you qualify for the homeownership program and complete the program requirements, we may order an appraisal to determine the value of a home that you may be eligible to purchase, 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** \_\_\_\_\_

### 13. DEMOGRAPHIC INFORMATION

#### PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW:

**The purpose of collecting this information** is to help ensure that all applicants are being treated fairly, that the housing needs of communities and neighborhoods are being fulfilled, and to otherwise evaluate our programs and report to our funders. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex and race) in order to monitor our compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to provide this information but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." **The law provides that we may not discriminate** on the basis of this information or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, federal regulations require us to note your ethnicity, sex and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

Applicant	Co-applicant
<b>Ethnicity (check one or more):</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino – <i>Origin:</i> _____ <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information	<b>Ethnicity (check one or more):</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino – <i>Origin:</i> _____ <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i> <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information
<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information	<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information
<b>Race (check one or more):</b> <input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe:</i> _____ <input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian — <i>race:</i> _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i> <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander — <i>race:</i> _____ <i>For example: Fijian, Tongan, and so on.</i> <input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information	<b>Race (check one or more):</b> <input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe:</i> _____ <input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian — <i>race:</i> _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i> <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander — <i>race:</i> _____ <i>For example: Fijian, Tongan, and so on.</i> <input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information

To be completed only by the person conducting the interview		
Was the ethnicity of the Borrower collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was the sex of the Borrower collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was the race of the Borrower collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
This application was taken by: <input type="checkbox"/> Face-to-face interview (included electronic media w/video component) <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	Interviewer's name (print or type) _____ Interviewer's signature _____	Interviewer's phone number _____ Date _____

## 14. UNMARRIED ADDENDUM

### FOR BORROWER SELECTING THE UNMARRIED STATUS

**Lender instructions for using the Unmarried Addendum:** The lender may use the Unmarried Addendum only when a borrower selected "Unmarried" in Section 1 and the information collected is necessary to determine how state property laws directly or indirectly affecting creditworthiness apply, including ensuring clear title. For example, the lender may use the Unmarried Addendum when the borrower resides in a state that recognizes civil unions, domestic partnerships or registered reciprocal beneficiary relationships or when the property is located in such a state. "State" means any state, the District of Columbia, the Commonwealth of Puerto Rico, or any territory or possession of the United States.

**If you selected "Unmarried" in Section 1:**

Is there a person who is not your legal spouse but who currently has real property rights similar to those of a legal spouse? ☐ No ☐ Yes

If YES, indicate the type of relationship and the state in which the relationship was formed. For example, indicate if you are in a civil union, domestic partnership, registered reciprocal beneficiary relationship, or other relationship recognized by the state in which you currently reside or where the property is located.

☐ Civil union ☐ Domestic partnership ☐ Registered reciprocal beneficiary relationship

☐ Other (explain): \_\_\_\_\_

**State:** \_\_\_\_\_



## Homeowner Application Additional Questions

### **TAX RETURNS**

1. How does your name appear on your last 2 years of tax returns?  
Borrower: \_\_\_\_\_  
Co-Borrower: \_\_\_\_\_  
What names have you used in the past 7 years (maiden/former/alias other)  
\_\_\_\_\_
2. What is the address on your most recently filed tax returns?  
Borrower: \_\_\_\_\_  
Co-Borrower: \_\_\_\_\_
3. If married, how did you file on your last 2 years of tax returns?  
☐ Jointly ☐ Separately
4. Did you write off un-reimbursed business expenses (Form 2106) on your last 2 years of tax returns?  
Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No
5. Does your last year's tax return have any additional business income or loss other than what you have already disclosed (Sole Proprietorship, LLC Partnership, Sub Chapter or Corporation)?  
Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

### **EMPLOYMENT**

6. Do you have an ownership interest in your place of employment?  
Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No  
If yes, please indicate percentage of ownership: \_\_\_\_\_ %
7. Are you related to your employer?  
Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No



## Homeowner Application Additional Questions

### **ASSETS**

8. Do you have any other assets you have not disclosed on your application?  
Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, indicate: ☐ 401K ☐ Trust Fund ☐ Valuable Personal Property

☐ Savings ☐ Mobile home ☐ Other: (explain) \_\_\_\_\_

### **LIABILITIES**

9. Do you have any loans or debts being deducted from your paycheck?

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

10. Have you acquired any new debt within the last 30 days?

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

11. Do you have any additional loan or debts not reported on your credit report?

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

### **REAL ESTATE**

12. Do you own vacant land or any other real estate property?

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

13. Do you own a timeshare?

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, explain \_\_\_\_\_

14. Are you on title to any property with or without another person regardless of financial liability? (Trust, Partnership, LLC, Inheritance, etc.?)

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No





## Homeowner Application Additional Questions

If yes, explain: \_\_\_\_\_

15. Have you co-signed on a mortgage?

Borrower ☐ Yes ☐ No Co-Borrower ☐ Yes ☐ No

If yes, explain: \_\_\_\_\_

### **OTHER**

16. Do you Live in Loveland? ☐ Yes ☐ No If yes, for how long? \_\_\_\_\_

17. Do you work in Loveland? ☐ Yes ☐ No If no, what city do you work in? \_\_\_\_\_

18. Do you have a Section 8 voucher? ☐ Yes ☐ No If yes, for how much? \_\_\_\_\_

19. You understand that you are required to attend a mandatory in-person orientation session when invited, if you meet the basic requirements? ☐ Yes ☐ No

20. You understand that you will be required to save money while in the program? The amount of the savings varies based on your personal circumstances and will be described to you at the mandatory orientation. ☐ Yes ☐ No

21. You understand that you can choose not to move forward in the program at any time? ☐ Yes ☐ No

22. You understand that the construction time for homes varies from twelve (12) months to as long as three (3) years? ☐ Yes ☐ No

23. You understand that the income you disclose that was used to qualify for the program must continue for a minimum of the first three years of the mortgage. This means that if your total income drops below the minimum required income, you will need to replace that income to continue in the program. ☐ Yes ☐ No *More information will be provided at the mandatory orientation*

24. You understand that you will be required to do 200 sweat equity hours per adult applicant, which includes classes, the construction site, and the ReStore ☐ Yes ☐ No *More information will be provided at the mandatory orientation.*

25. You understand that you should use the provided checklist and include all of the requested documentation. You should provide a letter of explanation if you don't have the requested item. Incomplete applications will not be forward in the process. ☐ Yes ☐ No

### **SIGNATURES**

Borrower \_\_\_\_\_ Date: \_\_\_\_\_

CO-Borrower \_\_\_\_\_ Date: \_\_\_\_\_



## Affidavit and Release Of Information

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this application for housing through Loveland Habitat for Humanity is true and complete. I understand that any false information or omission may disqualify me from further consideration for housing and may result in dismissal of my application if discovered at any later date.

#### **Fair Credit Reporting Act Disclosure and Authorization**

As an applicant for housing through Loveland Habitat for Humanity, you are a consumer with rights under the Fair Credit Reporting Act. For the purpose of determining your qualification for this housing program, Loveland Habitat for Humanity may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you

#### **Disclosure Regarding Background Report**

I understand that Loveland Habitat for Humanity may conduct an extensive and thorough background investigation for any adult member of the household. All information will be kept strictly confidential. Background checks will be provided by Transparent Information Services, 400 S. McCaslin Blvd, Suite 121, Louisville, CO 80027, 303-217-8747, or toll free 877-778-8747 and they will perform their search of the National Criminal Database, and County and District Courts and their search will go back for a period of 7 years, unless they find a match in which case the search may go back further into time. Additionally, there will also be a search of the sexual offender data base. There is no fee to you for this check. We will perform the check during your application process, prior to submittal to the Board of Directors for approval and if approved will perform it again prior to closing. Consenting to the background check is a condition of your application and failure to provide the written authorization for the background check will result in denial of the application for a lack of willingness to partner. If accepted, consenting to the background check is a condition of your agreement and failure to provide written authorization again prior to close will result in deselection for lack of willingness to partner.

#### **Authorization to Obtain Background Report**

I authorize Loveland Habitat for Humanity and/or any of its agents to verify and investigate any or all statements contained in this application. I also authorize any person, school, current employer (except as previously noted), past employers, law enforcement authorities, motor vehicle record agency, credit bureau, court, data repository and organizations named in this application to provide and release any information and opinions concerning my background. I release such persons and organizations from any legal liability for any damage whatsoever for making such statements.

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE INITIALING AND SIGNING

\_\_\_\_\_ I (we) acknowledge receipt of a copy of the Consumer Financial Protection Bureau's "**A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT.**" *Please keep for your records*

\_\_\_\_\_ I (we) acknowledge receipt of a copy of the **PRIVACY NOTICE**, which describes what Loveland Habitat for Humanity does with your private information. *Please keep for your records.*

\_\_\_\_\_ I (we) acknowledge receipt of a copy of the **EQUAL CREDIT OPPORTUNITY ACT NOTICE**, which describes the terms of the Special Purpose Credit Program offered.



## Affidavit and Release Of Information

\_\_\_\_\_ I (we) acknowledge receipt of a copy of the **MORTGAGE FRAUD IS INVESTIGATED BY THE FBI** notification. Providing false, misleading, or the omission of information is a crime. *Please keep for your records*

\_\_\_\_\_ I (we) authorize Loveland Habitat for Humanity to conduct a **CREDIT HISTORY CHECK** for both Applicant and Co-Applicant. All information will be kept strictly confidential.

\_\_\_\_\_ I (we) acknowledge receipt of the **RIGHT TO RECEIVE APPRAISAL** disclosure. *One is signed, one is for your records.*

\_\_\_\_\_ I (we) acknowledge that the material provided by you will become property of Loveland Habitat for Humanity and **WILL NOT** be returned to you. Therefore, please do not submit originals.

\_\_\_\_\_ I (we) authorize Loveland Habitat for Humanity to conduct an extensive and thorough **BACKGROUND HISTORY CHECK** for every household member 18 and older. All information will be kept strictly confidential.

\_\_\_\_\_ I (we) authorize Loveland Habitat for Humanity to conduct a search on the **SEX OFFENDER REGISTRY** for every household member 18 years of age and older. All information will be kept strictly confidential.

\_\_\_\_\_ I (we) authorize any **person, school, CURRENT AND PAST EMPLOYERS, CURRENT AND PAST LANDLORDS, courts, law enforcement authorities, and organizations** named in this application to provide and release any information and opinions concerning our background. I (we) release such persons and organizations from any legal liability for any damage whatsoever for making such statements.

\_\_\_\_\_ I (we) authorize Loveland Habitat for Humanity and/or any of its agents to verify and investigate any or all statements contained in this application.

\_\_\_\_\_ I (we) understand that this application does not create a contract for housing.

\_\_\_\_\_ I (we) further certify that I (we) have read and understand the instructions, conditions and other information provided in this document.

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

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

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

Co-Applicant Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

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



## Request for Landlord Reference

Section 1 to be completed by applicant:	
Applicant Name:	Landlord Name:
Co-Applicant Name:	Address:
Address:	
	Phone:
	Email:
	Fax:
I AUTHORIZE YOU TO RELEASE THE FOLLOWING INFORMATION TO LOVELAND HABITAT FOR HUMANITY	
Applicant Signature	Date
Co-Applicant Signature	Date

Section 2 to be completed by landlord and returned to Habitat by landlord:	
<p>The above signed applicant has applied for a Habitat home. Please return this completed form <b>by mail or email to:</b> Loveland Habitat for Humanity, PO Box 56, Loveland, CO 80539 or email <a href="mailto:mackerman@lovelandhabitat.org">mackerman@lovelandhabitat.org</a>. Please call with questions: 970-669-9769 x105.</p>	
Applicant's payment history:	<input type="checkbox"/> Excellent <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory
Rental period (give dates):	From _____ to _____
Amount of monthly rent: \$	_____
Any further comments:	_____
Landlord Signature	Date

## AUTHORIZATION TO OBTAIN CREDIT REPORT

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### FACTUAL DATA

---

APPLICANT(S) Several of your creditors may require your original signature(s) for the release of information. Please sign and date as indicated.

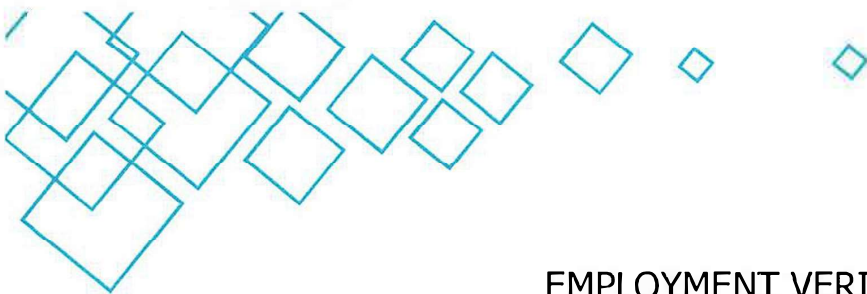
I hereby authorize the release of all information including credit information contained in my (our) account file to FACTUAL DATA. I am willing that a photocopy of the authorization be accepted with the same authority as the original.

**BORROWER'S SIGNATURE X** \_\_\_\_\_

**CO-BORROWER'S SIGNATURE X** \_\_\_\_\_

**DATE** \_\_\_\_\_





**CONTACT PERSON:**  
**Michelle Ackerman**  
**970-669-9769**  
**mackerman@lovelandhabitat.org**

## EMPLOYMENT VERIFICATION

### Agreement to Release Information

I, \_\_\_\_\_ authorize the release of the following information to Loveland Habitat for Humanity for use in determining eligibility for the Habitat for Humanity homeownership program.

\_\_\_\_\_  
**Applicant/Employee Signature**

\_\_\_\_\_  
**Date of Birth**

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

To whom it may concern:

The person named below is applying for housing through the Loveland Habitat for Humanity homeownership program. We would appreciate your help in answering the following questions. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Thank you for your assistance.

Sincerely,

Loveland Habitat for Humanity

### TO BE COMPLETED BY EMPLOYER **ONLY**

Company/Employer Name: \_\_\_\_\_

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

1. Employee's Current Position/Title: \_\_\_\_\_

2. Date Employment Began: \_\_\_\_\_

3. Current gross base pay

Amount: \$ \_\_\_\_\_ Annually: \$ \_\_\_\_\_ Per hour: \$ \_\_\_\_\_ Salaried? Yes No

4. Scheduled hours per week: \_\_\_\_\_

5. Earnings: Calendar year to date \$ \_\_\_\_\_ Last calendar year \$ \_\_\_\_\_

6. Does this person regularly receive overtime or bonuses? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, average number of overtime hours per month: \_\_\_\_\_

If yes, bonus type, payment schedule and average amount: \_\_\_\_\_

7. Additional comments:

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

Name of person filling out form: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_



## 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 Western region, Federal Trade Commission, 901 Market Street, Suite 570, San Francisco, CA 94103 or Federal Trade Commission, 10877 Wilshire Blvd., Suite 700, Los Angeles, California 90024 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):

X \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_

X \_\_\_\_\_  
Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_



**COPY – Retain for your records**

**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 Western region, Federal Trade Commission, 901 Market Street, Suite 570, San Francisco, CA 94103 or Federal Trade Commission, 10877 Wilshire Blvd., Suite 700, Los Angeles, California 90024 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.

**COPY – Retain for your records**





**HABITAT FOR HUMANITY LOVELAND CO**  
**SUBJECT RELEASE AND AUTHORIZATION**

Transparent Information Services, LLC (TIS) is hereby authorized to conduct a background investigation on me in the course of consideration for possible employment or volunteer work by Habitat For Humanity Loveland. I voluntarily and knowingly authorize, without reservation, any duly authorized agent of TIS to obtain from any law enforcement agency, drug screening firm state, county or federal agency, present employer or supervisor, landlord, past employer or supervisor, finance bureau/office, credit bureau, collection agency, college, university or other institute of learning or certification, private business, military branch or the National Personnel Records Center, personal reference and/or other persons, and voluntarily and knowingly authorize the same to give, records or information that they may have concerning my criminal history, motor vehicle history, earnings history, credit history, character, employment records, record of attendance and earned degrees or certificates, or any other information requested, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I voluntarily, knowingly and unconditionally release all such persons, including any named or unnamed informant, from any and all liability resulting from the furnishing of this information. A photographic, faxed or e-mailed copy of this authorization shall be as valid as the original.

**Transparent Information Services, LLC is only an information provider and does not make hiring decisions**

**PROVIDE THE FOLLOWING INFORMATION / PLEASE WRITE LEGIBLY AND IN BLACK INK**

**FULL NAME:** \_\_\_\_\_

**FORMER/MAIDEN/ALIAS/OTHER NAMES USED:** \_\_\_\_\_

**POSITION FOR WHICH YOU ARE APPLYING:** \_\_\_\_\_ Homeownership \_\_\_\_\_

**ADDRESS HISTORY FOR THE MOST RECENT 7 YEAR PERIOD (USE AN ADDITIONAL SHEET IF NEEDED):**

ADDRESS	CITY/STATE/ZIP CODE	COUNTY	DATES OF RESIDENCE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**DRIVER'S LICENSE NUMBER:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**NAME AS IT APPEARS ON LICENSE:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**DATE OF BIRTH (MANDATORY):** \_\_\_\_\_ **SEX:** \_\_\_\_\_ **RACE:** \_\_\_\_\_

**\*\*THE INFORMATION PROVIDED ABOVE IS FOR THE PURPOSES OF INITIATING A BACKGROUND CHECK AND WILL NOT BE USED BY THE PROSPECTIVE EMPLOYER IN THE HIRING DECISION\*\***

I understand that the information that I have provided is for the purposes of a background check only and that TIS, LLC is not the Employer but a background screening company, not owned or operated by the Employer. I further acknowledge that my date of birth, sex and race are to be used for investigative purposes by TIS, LLC where this search criteria may be required by certain agencies listed in the top paragraph of this form and shall not be used for the purpose of making a hiring decision.

☐ **CALIFORNIA, OKLAHOMA, and MINNESOTA RESIDENTS ONLY:** If you are a current California, Oklahoma, or Minnesota resident and would like to request a copy of your Consumer Report or Investigative Report, please check the box. This report may include character and reputation information obtained through personal interviews.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



P.O. Box 56  
Loveland, CO 80539

Phone: 970-669-9769  
[www.lovelandhabitat.org](http://www.lovelandhabitat.org)

## **NOTICE TO APPLICANT OF RIGHT TO RECEIVE COPY OF APPRAISAL REPORT**

The Equal Credit Opportunity Act (Regulation B) requires creditors to provide applicants with a copy of the appraisal report used in conjunction with their loan application.

Pursuant to the Appraiser Independence Requirements, you are entitled to receive a copy of any appraisal report that is obtained on your behalf, concerning your subject property, at least three business days prior to the closing of your loan. A copy of any and all such appraisal reports will be delivered to you, or may have already been delivered to, allowing you at least three business days to review the appraisal prior to closing of your loan.

---

**Applicant Signature**

---

**Date**

---

**Co-Applicant Signature**

---

**Date**

**NOTICE TO APPLICANT OF RIGHT  
TO RECEIVE COPY OF APPRAISAL REPORT**

The Equal Credit Opportunity Act (Regulation B) requires creditors to provide applicants with a copy of the appraisal report used in conjunction with their loan application.

Pursuant to the Appraiser Independence Requirements, you are entitled to receive a copy of any appraisal report that is obtained on your behalf, concerning your subject property, at least three business days prior to the closing of your loan. A copy of any and all such appraisal reports will be delivered to you, or may have already been delivered to, allowing you at least three business days to review the appraisal prior to closing of your loan.

**COPY**  
**RETAIN FOR YOUR RECORDS**

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## Summary of rights under FCRA

The federal Fair Credit Reporting Act (**FCRA**) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy to creditors, employers, landlords, and other businesses. You can find the [complete text of the FCRA](#), 15 U.S.C. §§1681-1681u. The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

**You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.

**You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

**You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

**Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.

**You can dispute inaccurate items with the source of the information.** If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

**Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

**Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

**Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.



**You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

**You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING	PLEASE CONTACT
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center- FCRA Washington, DC 20580 * 202-326-3761
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 * 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 * 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington D.C. 20552* 800- 842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 * 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 * 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 * 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator-GIPSA Washington, DC 20250 * 202-720-7051

## **MORTGAGE FRAUD IS INVESTIGATED BY THE FBI**



**Mortgage Fraud is investigated by the Federal Bureau of Investigation and is punishable by up to 30 years in federal prison or \$1,000,000 fine, or both. It is illegal for a person to make any false statement regarding income, assets, debt, or matters of identification, or to willfully overvalue any land or property, in a loan and credit application for the purpose of influencing in any way the action of a financial institution.**

*Some of the applicable Federal criminal statutes which may be charged in connection with Mortgage Fraud include:*

- 18 U.S.C. § 1001 - Statements or entries generally
- 18 U.S.C. § 1010 - HUD and Federal Housing Administration Transactions
- 18 U.S.C. § 1014 - Loan and credit applications generally
- 18 U.S.C. § 1028 - Fraud and related activity in connection with identification documents
- 18 U.S.C. § 1341 - Frauds and swindles by Mail
- 18 U.S.C. § 1342 - Fictitious name or address
- 18 U.S.C. § 1343 - Fraud by wire
- 18 U.S.C. § 1344 - Bank Fraud
- 42 U.S.C. § 408(a) - False Social Security Number

*Unauthorized use of the FBI seal, name, and initials is subject to prosecution under Sections 701, 709, and 712 of Title 18 of the United States Code. This advisement may not be changed or altered without the specific written consent of the Federal Bureau of Investigation, and is not an endorsement of any product or service.*

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<b>FACTS: WHAT DOES LOVELAND HABITAT FOR HUMANITY, INC DO WITH YOUR PERSONAL INFORMATION?</b>		
<b>Why?</b>	Financial companies, including Loveland Habitat for Humanity, Inc. as a mortgage lender, choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.	
<b>What?</b>	The types of personal information we collect and share depend on the product or service you have with us. This information can include: <ul style="list-style-type: none"> <li>➤ Social Security number and income</li> <li>➤ Account balances and payment history</li> <li>➤ Credit history and credit scores</li> </ul>	
<b>How?</b>	All financial companies need to share consumers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their consumers' personal information; the reasons Loveland Habitat for Humanity, Inc. chooses to share; and whether you can limit this sharing.	
<b>Reasons we can share your personal information</b>	<b>Does Loveland Habitat for Humanity, Inc. share?</b>	<b>Can you limit this sharing?</b>
For our everyday business purposes - such as to process your transactions, maintain your accounts(s), respond to court orders and legal investigations, or to report to credit bureaus	Yes	No
<b>For our marketing purposes</b> – to offer our products and services to you	Yes	No
<b>For joint marketing with other financial companies</b>	No	We don't share
<b>For our affiliates' everyday business purposes</b> – information about your transactions and experiences	Yes	No
<b>For our affiliates' everyday business purposes</b> – information about your creditworthiness	Yes	No
<b>For our affiliates to market to you</b>	No	We don't share
<b>For non-affiliates to market to you</b>	No	We don't share
<b>QUESTIONS?</b>	Call 970-669-9769	Or go to <a href="http://www.lovelandhabitat.org">www.lovelandhabitat.org</a>

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Who we are	
Who is providing this notice?	Loveland Habitat for Humanity, Inc
What we do	
How does Loveland Habitat for Humanity, Inc. protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Loveland Habitat for Humanity, Inc. collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> <li>➤ Show your driver's license</li> <li>➤ Apply for a residential mortgage loan or provide your employment history</li> <li>➤ Make payments to your mortgage</li> </ul> <p>We also collect your personal information from others, such as credit bureaus, affiliates, and other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you, the consumer, the right to limit only</p> <ul style="list-style-type: none"> <li>➤ Sharing for affiliates' everyday business purposes – information about your creditworthiness</li> <li>➤ Affiliates from using your information to market to you</li> <li>➤ Sharing for non-affiliates to market to you</li> </ul> <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies.
Non-affiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies.
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

# Borrower Signature Authorization

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. Seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 Et. Seq., or 7 USC, 1921 et. Seq. (if USDA/FmHA).

## Part I – General Information

1. Borrower (s)		2. Name and address of Lender/Broker Loveland Habitat for Humanity PO Box 56 Loveland, CO 80539	
3. Date	4. Loan number N/A		

## Part II – Borrower Authorization

I hereby authorize the Lender/Broker to verify my past and present employment earnings records, bank accounts, stock holdings, and any other asset balances that are needed to process my mortgage loan application I further authorize the Lender/Broker to order a consumer credit report and verify other credit information, including past and present mortgage and landlord reference. It is understood that a copy of this form will also serve as authorizations.

The information the Lender/Broker obtains is only to be used in the processing of my application for qualification to the program and a mortgage loan.

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Date

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Date

# PATRIOT ACT INFORMATION DISCLOSURE

Applicant Name

Co-Applicant Name

Present Address

Mailing Address

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

I/we acknowledge that I/we received a copy of this disclosure.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date



## **Pre-homeownership Survey**

***To gauge the impact of safe, decent, affordable homeownership we would like to ask a couple of questions about your current circumstances. We appreciate you taking some time to answer the following questions:***

**Do you personally feel safe where you live? Would you say...**

Very safe / A little safe / Not safe / or / Don't know

**Do you feel your children are safe where you live? Would you say**

Very safe / A little safe / Not safe or / Don't know

**Do you personally have to go to the doctor? Would you say**

Very often / Occasionally / Rarely or just for checkups / or Don't know

**Have other household members had to go to the doctor? Would you say**

Very often / Occasionally / Rarely or just for checkups / or Don't know

**How are your children's grades in school? Would you say**

Excellent / Very good / Good fair or / Poor / n/a

**How about your children's study habitats? Would you say their study habitats are**

Excellent / Very good / Good fair or / Poor / n/a

**Have you personally started or completed higher education or training programs? Would you say** Yes / No, but plan to / No

**If so, what programs have you started or completed?**

High School / GED / Community college or technical school / 4-year college or university /  
Master's degree / PhD / Other

**Do you feel positive or negative about the future?**

Very positive / A little positive / not very positive / A little negative / negative / Don't know

**Do you use any of the following public or government assistance programs?**

Food bank, food stamps or food assistance

Welfare assistance or family and children services (MFIP, TANF, AFDC)

Medicaid

Energy assistance programs (LEAP)

Rent assistance (section 8, subsidized housing)

n/a



Taxpayer Assistance Center

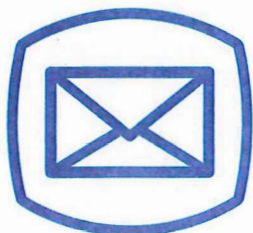
# Need a Tax Return Transcript?

We offer 3 Easy Options



1

**Online** — Go to [IRS.gov/transcript](https://www.irs.gov/transcript) to download a copy of your tax return transcript immediately.



2

**Mail** — You can use the Get Transcript by Mail online at [IRS.gov/transcript](https://www.irs.gov/transcript) or complete **Form 4506-T** to request your tax account transcript or **Form 4506T-EZ** to get your tax return transcript and mail it to the IRS. **Form 4506-T** is available at [IRS.gov/form4506t](https://www.irs.gov/form4506t). **Form 4506T-EZ** is available at [IRS.gov/form4506tez](https://www.irs.gov/form4506tez).



3

**Call** — **800-908-9946** and follow the voice prompts.

Transcripts sent to your home address will be mailed free of charge. Please allow 5 - 10 calendar days from the time the IRS receives the request for delivery.

You can order an exact copy of a previously filed and processed tax return, including attachments and **Form W-2**, by completing **Form 4506, Request for Copy of Tax Return**. Mail the completed form with \$50 for each tax year requested to the address in the instructions. **Form 4506** is available at [IRS.gov/form4506](https://www.irs.gov/form4506). Generally copies are available for the current year and the past six years. Either spouse can submit and sign **Form 4506** to request copies of jointly filed tax returns. Allow 75 calendar days to receive your copies.