



Fall 2023

Dear prospective Habitat homebuyer,

Thank you for your interest in purchasing a house from Habitat for Humanity. This letter provides an overview of the process and what it takes to qualify. Following the letter are application documents.

**We will accept applications for homeownership from September 18 through November 20.**

Our purpose is to build and sell affordable houses to homebuyers with limited income. To qualify for a Habitat home:

- Your household income should fall between 30% and 75% of the median income by household size. See chart for Winona County below.
- You must have a need for affordable housing. Examples include overcrowding, unsafe or unsanitary conditions, accessibility concerns, inadequate heating, or a leaking roof.
- If approved, you must volunteer a minimum of 200 hours of sweat equity in the construction of your home.

Family Size	Min Income	Max Income
One	\$25,000	\$48,600
Two	\$25,000	\$55,500
Three	\$25,000	\$62,475
Four	\$27,750	\$69,375
Five	\$29,970	\$74,925
Six	\$32,190	\$80,475

Application documents follow, and include:

- Homeownership program application
- ECOA Special Purpose Credit Program Notice
- Right to Receive Copy of Appraisal Disclosures
- 4506-T, an IRS form that we use to retrieve tax transcripts
- Privacy policy
- Sample partnership agreement

During the application process, we will verify employment and income, checking and savings balances, rental history, current debt, and run a credit check. The process may also include a home visit.

If approved for a Habitat home, you must:

- Be willing to attend budgeting, home repair, and maintenance classes

- Commit to saving for a down payment
- Have the ability to make monthly house payments

Habitat for Humanity serving Winona County is an equal housing lender and does not discriminate based on race, creed, color, religion, national origin, sex, marital status, family status, age, or disability.

If you have any questions or would like more information, please call (507) 457-0003.

In partnership



Adam Muschler  
Homeowner Services Manager

## Frequently Asked Questions

### **If I qualify, how long will the process take?**

It can take from 9 months to 2 years for a selected homebuyer to move into their house. There are many factors that can affect how quickly your home will be completed, and Habitat makes no guarantees of when construction will be completed.

### **Will I pay for the house?**

Yes, you will have a mortgage. Habitat for Humanity sells houses with affordable mortgages. The length of the mortgage is typically 30 years.

### **What would my responsibility to Habitat be?**

In addition to the above-mentioned classes and sweat equity, Habitat homebuyers are asked to participate in fundraisers, newspaper or TV coverage, and photographs. This is necessary to maintain community involvement, and every effort is made to make the experience comfortable for homebuyers.

After moving in, homebuyers must make monthly mortgage payments on time and maintain the house and yard. Homeowners are totally responsible for their property and monthly utility bills.

### **How are Habitat homes built?**

We follow all state and local building codes and build to the Minnesota Green Communities standard.



EQUAL HOUSING  
OPPORTUNITY



**Habitat**  
for Humanity®  
serving Winona County

**Habitat for Humanity serving Winona County**  
126 N Baker St  
Winona, MN 55987  
507-457-0003 | habitatwinona.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) <b>(Fill out Section 14.)</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) <b>(Fill out Section 14.)</b>																																																
<b>Dependents and others who will live with you:</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Age</th> <th style="text-align: center;">Male</th> <th style="text-align: center;">Female</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>	Name	Age	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"/>	<b>Dependents and others who will live with you (not listed by co-applicant):</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Age</th> <th style="text-align: center;">Male</th> <th style="text-align: center;">Female</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>	Name	Age	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"/>
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Present address (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years: _____	Present address (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years: _____																																																
<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?

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### 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
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
<p><b>Ethnicity (check one or more):</b></p> <p><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></p> <p><input type="checkbox"/> Not Hispanic or Latino  <input type="checkbox"/> I do not wish to provide this information</p>	<p><b>Ethnicity (check one or more):</b></p> <p><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></p> <p><input type="checkbox"/> Not Hispanic or Latino  <input type="checkbox"/> I do not wish to provide this information</p>
<p><b>Sex:</b></p> <p><input type="checkbox"/> Female    <input type="checkbox"/> Male    <input type="checkbox"/> I do not wish to provide this information</p>	<p><b>Sex:</b></p> <p><input type="checkbox"/> Female    <input type="checkbox"/> Male    <input type="checkbox"/> I do not wish to provide this information</p>
<p><b>Race (check one or more):</b></p> <p><input type="checkbox"/> American Indian or Alaska Native —  <i>Name of enrolled or principal tribe:</i>          _____</p> <p><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></p> <p><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></p> <p><input type="checkbox"/> White  <input type="checkbox"/> I do not wish to provide this information</p>	<p><b>Race (check one or more):</b></p> <p><input type="checkbox"/> American Indian or Alaska Native —  <i>Name of enrolled or principal tribe:</i>          _____</p> <p><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></p> <p><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></p> <p><input type="checkbox"/> White  <input type="checkbox"/> I do not wish to provide this information</p>

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

## Equal Credit Opportunity Act (ECOA) Notice

The attached ECOA notice should be provided to all applicants with the application for the Habitat homeownership program in order to communicate the right to require certain income information from applicants for the Habitat program.

**Purpose and background:** Because Habitat for Humanity homeownership and loan programs qualify as Special Purpose Credit Programs under the Equal Credit Opportunity Act, Habitat can request and consider certain information about income that other lenders may not be allowed to request and consider in connection with their loan programs without providing certain disclosures and options for the applicant to decline to provide that information.

Although federal law allows Special Purpose Credit Programs to request and consider this information to determine eligibility for their programs, the law does not explicitly provide an exemption from the disclosure.

Accordingly, in order to avoid any confusion by Habitat applicants about their rights and obligations to provide this information, we recommend that Habitat affiliates provide the customary disclosure together with the explanation for Habitat's right to consider that information in evaluating applications for the Habitat program. Please see the attached sample ECOA notice.

**Affiliate instructions:** The Habitat affiliate needs to fill in the address for the FTC regional office for the region in which the affiliate is located. To find the appropriate regional office for the FTC, please check the FTC website: [ftc.gov/about-ftc/bureaus-offices/regional-offices](https://ftc.gov/about-ftc/bureaus-offices/regional-offices).

Provide two copies of the ECOA notice to the applicant with the application.

Each applicant and co-applicant, if any, should sign and date the ECOA notice to acknowledge receipt, and return the signed copy to Habitat with the written application.

FOR AFFILIATE USE ONLY

## 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 or 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 the Federal Trade Commission Regional Office for the Midwest region, by phone at 877-FTC-HELP (382-4357), or by mail to the Federal Trade Commission, Equal Credit Opportunity, 600 Pennsylvania Ave. NW, 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 \_\_\_\_\_

X \_\_\_\_\_

Print name: \_\_\_\_\_

Print name: \_\_\_\_\_

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

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

**Request for Transcript of Tax Return**

- ▶ **Do not sign this form unless all applicable lines have been completed.**
- ▶ **Request may be rejected if the form is incomplete or illegible.**
- ▶ **For more information about Form 4506-T, visit [www.irs.gov/form4506t](http://www.irs.gov/form4506t).**

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
<b>2a</b> If a joint return, enter spouse's name shown on tax return.	<b>2b</b> Second social security number or individual taxpayer identification number if joint tax return
<b>3</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
<b>4</b> Previous address shown on the last return filed if different from line 3 (see instructions)	
<b>5</b> Customer file number (if applicable) (see instructions)	

**Note:** Effective July 2019, the IRS will mail tax transcript requests only to your address of record. See **What's New** under **Future Developments** on Page 2 for additional information.

**6 Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ \_\_\_\_\_

**a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .

**b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days . . . . .

**c Record of Account**, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days . . . . .

**7 Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . . . .

**8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days . . . . .

**Caution:** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**9 Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

|   /   /   |   /   /   |   /   /   |   /   /   |

**Caution:** Do not sign this form unless all applicable lines have been completed.

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

**Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T.** See instructions.

Phone number of taxpayer on line 1a or 2a

**Sign Here**

▶ \_\_\_\_\_  
Signature (see instructions) Date

▶ \_\_\_\_\_  
Title (if line 1a above is a corporation, partnership, estate, or trust)

▶ \_\_\_\_\_  
Spouse's signature Date

Section references are to the Internal Revenue Code unless otherwise noted.

## Future Developments

For the latest information about Form 4506-T and its instructions, go to [www.irs.gov/form4506t](http://www.irs.gov/form4506t). Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

The filing location for the Form 4506-T has changed. **Please see Chart for individual transcripts or Chart for all other transcripts** for the correct mailing location.

**What's New.** As part of its ongoing efforts to protect taxpayer data, the Internal Revenue Service announced that in July 2019, it will stop all third-party mailings of requested transcripts. After this date masked Tax Transcripts will only be mailed to the taxpayer's address of record.

If a third-party is unable to accept a Tax Transcript mailed to the taxpayer, they may either contract with an existing IVES participant or become an IVES participant themselves. For additional information about the IVES program, go to [www.irs.gov](http://www.irs.gov) and search IVES.

## General Instructions

**Caution:** Do not sign this form unless all applicable lines have been completed.

**Purpose of form.** Use Form 4506-T to request tax return information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

**Note:** If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

**Customer File Number.** The transcripts provided by the IRS have been modified to protect taxpayers' privacy. Transcripts only display partial personal information, such as the last four digits of the taxpayer's Social Security Number. Full financial and tax information, such as wages and taxable income, are shown on the transcript.

An optional Customer File Number field is available to use when requesting a transcript. This number will print on the transcript. See Line 5 instructions for specific requirements. The customer file number is an optional field and not required.

**Tip.** Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

**Automated transcript request.** You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

**Where to file.** Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart shows two different addresses, send your request to the address based on the address of your most recent return.

**Line 1b.** Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

**Line 3.** Enter your current address. If you use a P.O. box, include it on this line.

**Line 4.** Enter the address shown on the last return filed if different from the address entered on line 3.

**Note:** If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party — Business.

**Line 5.** Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number **should not** contain an SSN. Completion of this line is not required.

**Note.** If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "999999999" on the transcript.

**Line 6.** Enter only one tax form number per request.

**Signature and date.** Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

**Individuals.** Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

**Corporations.** Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

**Partnerships.** Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

**All others.** See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

**Note:** If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

**Documentation.** For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

**Signature by a representative.** A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service  
Tax Forms and Publications Division  
1111 Constitution Ave. NW, IR-6526  
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.

## Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:	Mail or fax to:
Florida, Louisiana, Mississippi, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301  855-587-9604
Alabama, Arkansas, Delaware, Georgia, Illinois, Indiana, Iowa, Kentucky, Maine, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, North Carolina, Oklahoma, South Carolina, Tennessee, Vermont, Virginia, Wisconsin	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999  855-821-0094
Alaska, Arizona, California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kansas, Maryland, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Dakota, Utah, Washington, West Virginia, Wyoming	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409  855-298-1145

## Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409  855-298-1145
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999  855-821-0094



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

# Privacy Statement and Notice

At Habitat for Humanity serving Winona County, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information.

While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data—such as tax returns, pay stubs, credit reports, employment verifications and payment history—internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

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

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on applications or other forms, such as name, address, social security number, assets, income, etc.
- Information about your transactions with us or others such as your loan balance, payment history, etc.; and
- Information we receive from a consumer reporting agency such as your credit worthiness and credit history.

Habitat for Humanity serving Winona County employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis.

Information is used for lawful business purposes only and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents; and
- Nonprofit organizations, government entities, or other subsidy providers.

If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law).

If you wish to opt out of disclosures to nonaffiliated third parties, you may call Habitat for Humanity serving Winona County at (507) 457-0003.

## Partnership Agreement (Notice of Pre-Approval)

[Date]

[Name and Address of Homebuyer(s)]

Dear \_\_\_\_\_:

Congratulations! You have been selected to participate in the Habitat Homeownership Program (“Program”) with Habitat for Humanity serving Winona County (“Habitat for Humanity”). As such, you have been pre-approved for a home loan up to \$ \_\_\_\_\_, subject to the terms and conditions contained in this Partnership Agreement (“Agreement”), and based on your current financial circumstances as represented in your application.

**This Agreement is not a sales contract or a loan application for the purposes of certain Federal laws, and expressly excludes the following information, which is not yet known:**

- **the address of the house;**
- **the specific plans for the house;**
- **the price of the house;**
- **the estimated value of the house upon completion;**
- **the specific amount of your mortgage or mortgages in favor of Habitat for Humanity;**
- **the specific amount of any direct assistance from third party providers, such as Family Assets Independence Minnesota to help make the purchase affordable; and**
- **the time when construction will be completed.**

If you are not satisfied with any of the terms of the Program, you may withdraw from the Program at any time up to the time of loan closing, although you will not be compensated in any way for any of the “sweat equity” hours you have volunteered, as described in the next section of this Agreement.

(Initial \_\_\_\_\_)

### **YOUR OBLIGATIONS UNDER THE HABITAT HOMEOWNERSHIP PROGRAM**

Your participation in the Program is subject to the performance of all of the following requirements within ten months of execution of this Agreement:

1. **SAVINGS TOWARD CLOSING COSTS, PREPAID EXPENSES AND DOWN PAYMENT:** At Closing, you will be required to pay certain costs to third parties in connection with the home sale and loan Closing (“Closing Costs”), as well as an amount required to ensure your escrow

account is sufficiently funded to cover real estate taxes, homeowners insurance, flood insurance (if applicable), and homeowners' association fees (if applicable) (collectively, "Prepays"), when they become payable over the year following Closing. In addition, at or prior to Closing, you will need to obtain and pay the first year's premium for homeowner's insurance and, if applicable, flood insurance. **These amounts are payable in addition to the sales price of the home.**

You will also be required to make a down payment at a Closing, which will be applied toward the purchase price of the home and reduce the amount of the mortgage loan(s) that will finance the remainder of the purchase price.

In order to be prepared to make these payments at a Closing, you must save an amount equal to \$\_\_\_\_\_. You will be required to provide monthly proof of savings to Habitat for Humanity at your monthly check-in meeting. This savings amount is a program requirement and is not the actual amount of Closing Costs, Prepays and down payment that will be required at a closing. Those amounts will be determined closer to the time of any closing.

(Initial \_\_\_\_\_)

2. SWEAT EQUITY: As a condition to any closing, you and your household members must work at least 325 "sweat equity" hours as a Habitat for Humanity volunteer. At least 100 hours of your sweat equity hours must be completed in construction of your own home or the homes of other Habitat for Humanity families, subject to reasonable accommodations as needed for any individuals with disabilities.

**These "sweat equity" hours do not have monetary value and will not reduce the purchase price of your house and, if you decide to withdraw from the Program or your application is otherwise terminated, Habitat for Humanity will not pay or compensate you for any of these hours.**

(Initial \_\_\_\_\_)

3. HOMEOWNER EDUCATION WORKSHOPS: You must attend a series of ten prospective homeowner workshops that will cover topics related to homeownership, including financial and home maintenance training. You must also attend a Homestretch or first-time homebuyer program. Hours spent in these training sessions will be credited to your sweat equity requirement.

(Initial \_\_\_\_\_)



4. COMMUNITY PARTICIPATION: You must interact with volunteers and contributors whenever possible. Your name will be given in promotional publications regarding your home. You will also be expected to participate in media events related to your home.

(Initial \_\_\_\_\_)

#### **HABITAT FOR HUMANITY’S RIGHT TO REVOKE YOUR ACCEPTANCE IN THE PROGRAM**

Your acceptance into the Program is based on the information contained in your application and successful completion of all Program requirements, as defined in this Agreement. Habitat for Humanity reserves the right to terminate your acceptance into the Program as a prospective homeowner if **any** of the following occurs:

1. You experience a material adverse change in your financial situation, such as the loss of employment, existing sources of income, or new debts, and we determine that you can no longer financially qualify to purchase a Habitat for Humanity house according to our policy. If your financial situation significantly changes, you must notify Habitat as soon as possible. It may be possible for Habitat to work with you to preserve your participation in the Program if you provide updated information as requested.
2. Habitat for Humanity determines that you made any material misrepresentation or committed fraud in connection with your application.
3. You fail to complete a minimum of 75 hours of sweat equity within any three-month period or you fail to complete all of your sweat equity hours within ten months of this Agreement.
4. You fail to attend the required homebuyer workshops within ten months of this Agreement.
5. You fail to save all required monthly amounts for down payment, Prepays and/or Closing Costs payment within ten months of the date of this Agreement.
6. You or a household member have been registered in a sexual offender database since the time of your initial application and we determine that the offense is grounds for de-selection according to our policy. Our Sex Offender Registry Policy is available by request.
7. You fail to complete **any** of the conditions required by the Program within ten months of this Agreement, which timeframe may be extended only by Habitat for Humanity at its sole discretion.

(Initial \_\_\_\_\_)

## HOUSE CONSTRUCTION

After you fulfill all of the conditions contained in this Agreement, we will begin to review with you the estimated sales price of the house, your estimated mortgage payments, construction schedule and specific house plans, and other details regarding the construction and sale of the house.

Houses constructed by Habitat for Humanity are built with a combination of skilled labor, unskilled volunteer labor and the labor of you and your household members. In addition, many materials and a significant portion of the money used to build your house will be donated and/or subject to funding contingencies.

While we will make reasonable efforts to complete the house generally in accordance with the attached basic house description and more specific house plans to be shown to you at a future date, **because of changes in circumstances and availability of donations, we are unable to promise that your house will be built according to the original plan, or that it will be built at all. In addition, if the house is built, we cannot guarantee a completion date or the sales price of the house.**

You may not move into the house until after closing. You may choose to have additional work done on the house after closing at your own expense.

If you are not satisfied for any reason with specific details about the house plans or features, location, price, construction schedule or any other matter, you may withdraw from the Program at any time prior to Closing, although you will not be compensated for the value of your "sweat equity" hours, as described under the "Sweat Equity" section of this Agreement.

(Initial \_\_\_\_\_)

## FINANCE OF HOUSE

After you fulfill all of the conditions contained in this Agreement, we will begin to review with you the estimated terms and conditions of an affordable mortgage loan to finance the home purchase. Subject to eligibility requirements that will be explained prior to the mortgage process, the mortgage loan may be originated by Habitat for Humanity or another lender. Traditionally, the term of such an affordable mortgage is approximately 30 years, but may change depending on the lender and other factors.

There also may be additional mortgages in favor of Habitat for Humanity or other providers of down payment assistance to make the home purchase affordable to you. The terms of these loans may provide for principal reduction over time, if certain conditions are met or may be repayable upon certain events, depending on the source of the assistance. Because of these and other

variables, your mortgage loan(s) may not be the same as other Habitat for Humanity homebuyers. Details regarding the terms of your house sale, loan, and related documentation will be discussed after completion of all conditions contained in this Agreement.

Your mortgage will also require you to pay, throughout the term of the mortgage loan, certain expenses related to the property, including real estate taxes, property insurance (including flood insurance, if applicable), and any homeowners association fees. These amounts will change based on actual amounts due each year. Before Closing, Habitat for Humanity will discuss required insurance coverage amounts with you and may identify possible insurance agents; however, any list of agents is provided for convenience. You will not be required to purchase insurance from any particular agent or carrier.

If you are not satisfied with proposed terms of house financing for any reason, you may withdraw from the Program any time prior to loan closing, although you will not be compensated for the value of “sweat equity” hours, as described under the “Sweat Equity” section of this Agreement.

(Initial \_\_\_\_\_)

#### **OCCUPANCY / RESALE POLICIES**

If you fulfill all of the conditions contained in this Agreement and proceed with a home purchase with a Habitat mortgage loan, then your house purchase and loan documents will include, but not be limited to, the following requirements:

1. The house that you purchase must remain owner-occupied for the term of the mortgage. That is, you must live in the house until the mortgage is paid in full.
2. If you want to sell the house, you will be free to sell the house on the open market, subject to any resale restrictions, which may be required by Habitat for Humanity or third parties providing homebuyer assistance, as separately described to you prior to closing. **Habitat for Humanity will have the right of first refusal, allowing Habitat to match the offer price of the highest bidder. Habitat may choose not to exercise this right.**
3. There may be multiple mortgages on the home. One or more of these will have regular, monthly payments due; others represent subsidies to make the purchase affordable and may not have regular payments, but payment will be triggered if certain events (e.g., sale, refinance, default) occur. The outstanding balance of all mortgages on the home are typically payable in full if you sell the house.
4. All persons expected at the time of application to live in the home must be included in the application. The exceptions to this are any children born before closing, or a spouse. Any

other persons expected to live in the home must be requested and approved in writing by Habitat for Humanity. If circumstances change during the term of this Agreement and before Closing, you must notify Habitat promptly. No reasonable request will be denied.

If you are not satisfied with the proposed terms of your house purchase documents for any reason, you may withdraw from the Program at any time prior to loan closing, although you will not be compensated for the value of your "sweat equity" hours, as described under the "Sweat Equity" section of this Agreement.

(Initial \_\_\_\_\_)

### **WILLINGNESS TO PARTNER**

An applicant's "willingness to partner" is a critical component of our relationship. Applicants to the homeownership program will evidence a "willingness to partner" by full participation in the application process, participation in and attendance at any required homeownership information and/or education sessions, prompt responses to any communication from staff and/or committee, completion of sweat equity and agreeing to meet all other obligations outlined in this Agreement.

This Agreement outlines the requirements of the Program. By signing this Agreement, you are indicating that you understand the Program, are willing to partner with Habitat for Humanity, intend to complete the requirements described in this Agreement, and understand that if you are unable to meet these requirements, your participation in the Program will be terminated.

By signing this Agreement, Habitat for Humanity is indicating its intent to partner with you to develop a plan for the construction, sale, and finance of a house to be used as your principal residence, pursuant to the Program and subject to requirements described in this Agreement.

Sincerely,  
HABITAT FOR HUMANITY SERVING  
WINONA COUNTY

By: \_\_\_\_\_  
[Name]  
[Title]

Read, understood and accepted this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

Prospective homeowner: \_\_\_\_\_

Prospective homeowner: \_\_\_\_\_

**ATTACHMENTS**

Basic House Description

SAMPLE