HOMEBUYER APPLICATION CHECKLIST (Page 1 of 2)

STOP! Have you attended an information session about the program within the last year? Submitting this application before attending an information session will result in the denial of your application.

- Certificate from DC Habitat Info Session
- Applicant Information Form
- Authorization & Release Form

Verification of Identification for ALL household members
- **For minors:** a Social Security card or birth certificate
- **For adults:** ONE (1) document from List A or ONE (1) document EACH from List B and List C

<table>
<thead>
<tr>
<th>List A</th>
<th>List B</th>
<th>List C</th>
</tr>
</thead>
<tbody>
<tr>
<td>US Passport</td>
<td>Driver’s License</td>
<td>Social Security Card</td>
</tr>
<tr>
<td>Certificate of US Citizenship</td>
<td>Voters Registration Card</td>
<td>Birth Certificate</td>
</tr>
<tr>
<td>Certificate of Naturalization</td>
<td>US Military Card/Draft Record</td>
<td>Certificate of Birth Abroad</td>
</tr>
<tr>
<td>Permanent Resident Alien Card</td>
<td>Native American Tribal Document</td>
<td>Native American Tribal Document</td>
</tr>
</tbody>
</table>

Two Year Employment History Form for ALL adults

Verification of Income for ALL adults
- For all applicants:
  - Signed federal tax returns for the past TWO (2) years
- For all traditional employment income:
  - All pay stubs for the past 30 days for ALL sources of employment
  - W-2 Tax forms for the past TWO (2) years for ALL sources of employment
- For all self-employment income:
  - Schedule C profit and loss statement for the past 2 years from tax returns
  - Profit and loss statement for current year to date
- For all other sources of income (Social Security, child support, etc.):
  - Provide award letter

Verification of Financial Statements for ALL adults
- Statements for the past TWO (2) months for ALL bank accounts, including checking, savings, IRA, 401(k) or other retirement program, stock, and mutual fund accounts with account balances

Verification of Debt Information for ALL adults – For ALL Outstanding Loans & Credit Cards:
- List of monthly payments made by you that would not be included on a credit report, such as alimony, child support, etc.
A tri-merge credit report (with scores from all three credit bureaus) pulled within the last 90 days; OR a money order for $20 per person

**Verification of Residence and Rental History for ALL adults**

- Completed “Verification of Rental History” form
- Copy of current lease
- Proof of payment of rent for the past 12 months

Acceptable Forms of Proof are:
- Record of processed checks from Landlord/ Rental Agency; OR,
- Financial Statements showing history of rent payments

**Need Questionnaire Form**

**National Sex Offender Registry Check Form for ALL adults**

**Government Monitoring Questionnaire Form**

**ADDITIONAL INFORMATION MAY BE REQUESTED**

-----------------------------------------------------------------------------------------------------------------------------------

**APPLICATION PROCESS:**

1. Attend Information Session
2. Gather all necessary documentation and complete forms **(AFTER YOU START THE APPLICATION PROCESS YOU HAVE 45 DAYS TO TURN IN A COMPLETED APPLICATION).** If you are denied for failure to submit a completed application, you may re-apply 90 days after the date of the denial letter.
3. Email, mail, fax or drop off copies of your documents to our office during business hours.
4. Approximately one week after turning in a completed application, DC Habitat will schedule an appointment with you to review your financial analysis:
   a. **IF you do not** meet our basic program requirements, you will be sent a letter stating why. This letter will be sent to you within 30 days of the receipt of your completed application. You may appeal within 30 days of the date of this letter. If the denial stands, you may re-apply 6 months after the date of the denial letter.
   b. **IF you meet** all basic program requirements, we will submit your application to our Board of Directors for final review.
5. Our Board of Directors will review your application.
   a. **IF you have been denied** to our program by our Board of Directors, you will receive a letter within 30 days after the Board makes their decision. You will have another 30 days to file for an appeal. If the denial stands, you may re-apply after 6 months.
   b. **IF you have been accepted** into our program by our Board of Directors, you will receive a letter within 30 days after the Board makes their decision.
6. Once you have been accepted into our program, we will review and execute the Partnership Agreement
7. Work on sweat equity, outlined in the Partnership Agreement
8. Buy a house
9. Move in!
### APPLICANT INFORMATION FORM (Page 1 of 2)

<table>
<thead>
<tr>
<th>1.</th>
<th>APPLICANT #1</th>
<th>APPLICANT #2 (IF APPLICABLE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name (First Middle Last):</td>
<td>Name (First Middle Last):</td>
<td></td>
</tr>
<tr>
<td>Relationship to Applicant #1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Phone:</td>
<td>Home Phone:</td>
<td></td>
</tr>
<tr>
<td>Cell Phone:</td>
<td>Cell Phone:</td>
<td></td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
<td></td>
</tr>
<tr>
<td>Employer #1 Name &amp; Address:</td>
<td>Employer #1 Name &amp; Address:</td>
<td></td>
</tr>
<tr>
<td>Employer #2 Name &amp; Address:</td>
<td>Employer #2 Name &amp; Address:</td>
<td></td>
</tr>
<tr>
<td>Date you attended info session (Date must be within the last year. If you have not attended an info session in the last year, your application will be denied):</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.</th>
<th>HOME ADDRESSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address:</td>
<td>Mailing Address (if different):</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.</th>
<th>OTHER HOUSEHOLD MEMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name (First Middle Last)</td>
<td>Date of Birth</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.</th>
<th>HOW DID YOU HEAR ABOUT DC HABITAT? (CIRCLE ALL THAT APPLY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DC Habitat Homeowner</td>
<td>Housing/Credit Counselor</td>
</tr>
</tbody>
</table>

2115 Ward Ct. NW, Ste. 100 · Washington, DC 20037 · Phone: (202) 882-4600 · Fax: (202) 882-9343 · www.dchabitat.org
Director of Housing Programs: Orlando Velez · Extension: 221 · Housing Programs Associate: Mandy Jansen · Extension: 200
Emails: homeownershipprogram@dchabitat.org or homerepairprogram@dchabitat.org

Habitat for Humanity of Washington, D.C., Inc. does not discriminate on the basis of actual or perceived race, color, religion, national origin, sex, age, marital status, sexual orientation, gender identity or expression, personal appearance, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income, or place of residence or business.

(Revised: 9/11/17)
### Applicant Information Form (Page 2 of 2)

#### 5. Eligibility Questions (Circle all that apply)

<table>
<thead>
<tr>
<th>Question</th>
<th>Applicant #1</th>
<th>Applicant #2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you a first time homebuyer (not owning residential property in past 3 years)?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Are you willing to volunteer 200 to 300 hours?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Are you a veteran or member of the military?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Do you have at least 2 full years worth of documentable employment history?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Do you have any gaps in employment longer than 2 months in your most recent 2 years worth of your work history?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Have you lived in DC for at least 1 year?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Is your credit score at least 620?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Have you been working in DC for at least 2 years?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Do you have unpaid liens, collections or judgments on your credit report?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Have you ever filed for bankruptcy or foreclosure on a home that you owned?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Have you ever applied to the Home Purchase Assistance Program (HPAP)? If yes, when and where did you apply?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Do you have a federal Housing Choice Voucher?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>What is the approximate annual gross income of all program applicants, including yourself? (Total income of all those whose name will be on the mortgage)</td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

#### 6. Signature(s)

I understand that in accordance with Habitat for Humanity International, the parent organization of Habitat for Humanity of Washington, D.C. (DC Habitat), and with the Consumer Financial Protection Bureau, this application may be viewed as a mortgage application as well as an application to DC Habitat. Approval does not guarantee final approval for a mortgage, nor does it guarantee the purchase of a home.

Applicant 1 Signature: [Signature]  
Date: [Date]

Applicant 2 Signature (if applicable): [Signature]  
Date: [Date]
AUTHORIZATION AND RELEASE CERTIFICATION

The undersigned certify the following:

1. I/we am/are authorizing Habitat for Humanity of Washington, D.C., to evaluate my/our actual need for a Habitat home, my/our ability to repay the loan and other expenses of homeownership, as well as my/our willingness to be a partner family. I/we understand that the evaluation may include a home visit, and verification on the National Sex Offender Registry. I/We am/are providing Habitat for Humanity of Washington, D.C. with verbal and/or written authorization to order a consumer credit report and verify all other credit information, including past and present employment, mortgage and landlord references in connection with my/our application for this program.

2. I/we understand that if I/we have not answered the questions truthfully, my/our application may be denied, and that even if I/we have already been selected to purchase a Habitat home, I/we may be deselected from the program. In applying for entry into the program, I/we completed an application packet containing information on my/our income, assets and liabilities. The original or a copy of this application will be retained by Habitat for Humanity of Washington, D.C. even if the application is not approved. I/we understand that Habitat for Humanity of Washington, D.C. and staff or volunteers associated with Habitat for Humanity of Washington, D.C. cannot accept monetary donations or other gifts from an applicant to our program for any reason.

Applicant 1 - Print Name ____________________________
Sign Name ____________________________
Date ____________________________

Social Security Number ____________________________
Date of Birth ____________________________

Applicant 2 - Print Name ____________________________
Sign Name ____________________________
Date ____________________________

Social Security Number ____________________________
Date of Birth ____________________________
AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for Habitat for Humanity of Washington, D.C.’s (Habitat for Humanity of Washington, D.C.) homeownership program. As part of the application process, Habitat for Humanity of Washington, D.C. and the mortgage guaranty insurer (if any), may verify information contained in my/our loan/housing application and in other documents required in connection with the loan/housing, either before the loan is closed or as part of its quality control program.

2. I/We authorize you to provide to Habitat for Humanity of Washington, D.C., and to any investor to whom Habitat for Humanity of Washington, D.C. may sell my mortgage, and to the mortgage guaranty (if any), any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.

3. I/We further authorize Habitat for Humanity of Washington, D.C. to order a consumer credit report and verify other financial information, including past and present mortgage and landlord references.

4. Habitat for Humanity of Washington, D.C. or any investor that purchases the mortgage, or the mortgage guaranty insurer (if any), may address this authorization to any party named in the loan application.

5. A copy of this authorization may be accepted as an original.

6. Your prompt reply to DC. and/or the investor that purchased the mortgage, or the mortgage insurer (if any) is appreciated.

______________________  ___________________  ___________________
Applicant 1 - Print Name   Sign Name   Date

______________________  ___________________  ___________________
Applicant 2 - Print Name   Sign Name   Date
TWO YEAR EMPLOYMENT HISTORY

Please provide information about your most recent two years of employment.

Applicant 1: _________________________

<table>
<thead>
<tr>
<th>Current Employer</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer Name:</td>
<td>Position Held:</td>
<td></td>
</tr>
<tr>
<td>Date Hired:</td>
<td>Date Terminated:</td>
<td></td>
</tr>
<tr>
<td>Salary/Wage at Termination Per (Year) (Month)(Week):</td>
<td>Reason for Leaving:</td>
<td></td>
</tr>
<tr>
<td>Supervisor’s Name:</td>
<td>Supervisor’s Phone number:</td>
<td></td>
</tr>
<tr>
<td>Supervisor’s Email Address:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Previous Employers</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer Name:</td>
<td>Position Held:</td>
<td></td>
</tr>
<tr>
<td>Date Hired:</td>
<td>Date Terminated:</td>
<td></td>
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<tr>
<td>Salary/Wage at Termination Per (Year) (Month)(Week):</td>
<td>Reason for Leaving:</td>
<td></td>
</tr>
<tr>
<td>Supervisor’s Name:</td>
<td>Supervisor’s Phone number:</td>
<td></td>
</tr>
<tr>
<td>Supervisor’s Email Address:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Employer Name:          Position Held:          
Date Hired:              Date Terminated:        
Salary/Wage at Termination Per (Year) (Month)(Week): Reason for Leaving: 
Supervisor’s Name:       Supervisor’s Phone number: 
Supervisor’s Email Address: 

I certify that the information I provide is accurate and complete to the best of my knowledge. I allow you to contact my previous employers to verify that it is correct.

Signature:                  Date:                   

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(Revised: 8/2/16)
# YEAR-TO-DATE PROFIT AND LOSS STATEMENT (if applicable)

Applicant Name: ______________________________________________

Business Name: ______________________________________________

Business Address: ___________________________________________

<table>
<thead>
<tr>
<th>Month 1</th>
<th>Month 2</th>
<th>Month 3</th>
<th>Month 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expenses: $________________</td>
<td>Expenses: $_______________</td>
<td>Expenses: $_______________</td>
<td></td>
</tr>
<tr>
<td>Profit/(Loss) $_______________</td>
<td>Profit/(Loss) $_______________</td>
<td>Profit/(Loss) $_______________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Month 5</th>
<th>Month 6</th>
<th>Month 7</th>
<th>Month 8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expenses: $_______________</td>
<td>Expenses: $_______________</td>
<td>Expenses: $_______________</td>
<td></td>
</tr>
<tr>
<td>Profit/(Loss) $_______________</td>
<td>Profit/(Loss) $_______________</td>
<td>Profit/(Loss) $_______________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Month 9</th>
<th>Month 10</th>
<th>Month 11</th>
<th>Month 12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expenses: $_______________</td>
<td>Expenses: $_______________</td>
<td>Expenses: $_______________</td>
<td></td>
</tr>
<tr>
<td>Profit/(Loss) $_______________</td>
<td>Profit/(Loss) $_______________</td>
<td>Profit/(Loss) $_______________</td>
<td></td>
</tr>
</tbody>
</table>

Year-To-Date

| Income: $_______________ | Expenses: $_______________ | Profit/(Loss) $_______________ |

I understand that this information will be used to determine my eligibility for approval with DC Habitat. I certify that all of the information above is to the best of my knowledge and belief true, correct and complete.

Applicant Signature: _________________________________________
YEAR-TO-DATE PROFIT AND LOSS STATEMENT (if applicable)

Using your business bank statements

1.) **Income:** use the balance on that month bank statement.
2.) **Expenses:** Add up all your business cost per the month’s bank statement.
3.) Subtract expenses from bank statement
4.) **Profit & Loss:** If there is a Profit add a plus (+) and the $ amount, if there is a Loss and a – and the amount on the profit and loss line.
5.) Continue steps 1 – 4 until most recent month
6.) **Year-To-Date:** Total Income for each month, Total Expenses for each month
7.) Profit & Loss: If there is a Profit add a plus (+) and the final $ amount, if there is a Loss, add a negative (-) and the $ amount on the profit and loss line.
VERIFICATION OF RENTAL HISTORY

Proof of Rental History (REQUIRED)

I have attached a copy of my current lease: □ Yes □ No □ NA
I have attached proof of rent payments for the past 12 months: □ Yes □ No □ NA

Applicant Information

Applicant Name: Co-applicant Name:

Current Address:

Currently I am: □ Renting □ Staying with Friends/Family □ Staying in a shelter
□ Living in Transitional Housing □ Other

Current Landlord/Rental Agency/Shelter/Relative Information:

Name: Mailing Address:

Email: Phone: Fax:

Previous Landlord/Rental Agency Information (Only fill out if you've been at your current place for less than 2 years)

Name: Agency Mailing Address:

Email: Phone: Fax:

Move in Date: Move out Date:

Current Rental Payment Information

Move In Date: Lease Completion Date, if applicable:

Current Rent Amount (without subsidy): $ Are Utilities Included?
□ Yes □ No If no, Utility Amount: $ Is Rent Subsidized?
□ Yes □ No Amount of Subsidy: $ Subsidy Paid By:
NEED QUESTIONNAIRE

Check off and give an explanation to all that apply to your current living situation.

☐ Currently homeless (including living with friends and extended family); If yes, please explain.

☐ Currently residing in temporary, transitional or supportive housing; If yes, where and for how long?

☐ Currently rent burdened (Paying more than 30% of your income on rent); If yes, how much of your household income goes to pay rent?

☐ Current dwelling is overcrowded; If yes, please explain size of dwelling and number of people:

☐ Currently receiving public housing assistance; If yes, please explain situation and amount:

☐ You are currently working in DC, with a significant commute to/from your home; If yes, how long is the commute and from where to where?

☐ Unsafe/unsanitary neighborhood, unsuitable for human habitation; If yes, where?

Does the home that you are currently living in have any of the following problems? Check all that apply.

☐ Broken/missing windows
☐ Leaking roof
☐ Structural problems
☐ Inadequate electrical/plumbing system
☐ Lack of proper egress
☐ Unsafe or no formal heating system, family isn’t able to control heat
☐ Unhealthy conditions of pest or mold infestations
☐ Inoperable kitchen or bathroom
☐ Landlord doesn’t respond to reports of problems or responds very slowly
☐ Broken or inadequate locks on doors

Note: A home visit may be required to verify your living situation, particularly if your family’s Area Median Income (AMI) is above 50%.
NATIONAL SEX OFFENDER REGISTRY CHECK

To be completed and returned by each household member over 18 years of age.

Habitat for Humanity of Washington, D.C. ("DC Habitat") requires that sex offender registry checks must be conducted for all potential partner families. DC Habitat reserves the right to recheck sex offender status at any time during the partnership process.

The information obtained during the sex offender registry check will be solely for the purpose of determining eligibility to participate in the program and will remain confidential.

Presence on the National Sex Offender Registry may be interpreted as an unwillingness to partner and may be grounds for denial. However, before such a determination is made, the individual will have an opportunity to review and challenge the factual accuracy of the check’s result.

I hereby authorize DC Habitat to conduct a sex offender registry check, using the information provided below, on the Department of Justice National Sex Offender Registry (www.nsopr.gov).

Applicant 1  Signature  Date

Current address __________________________________________________
City_________________________  State________________________
Country_____________________  Zip_____________________

If residency at current address is less than one year, please provide previous address.

Address __________________________________________________
City_________________________  State________________________
Country_____________________  Zip_____________________
GOVERNMENT MONITORING QUESTIONNAIRE

Please read this statement before proceeding. The following information is required by the federal government for loans related to the purchase of homes in order to monitor the lender’s compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.) Note: This form is separated from the application and maintained in a separate file.

Applicant 1 (Print): _______________________________ Date: __________

___ I do not wish to furnish this information

Race/National Origin (Check all that apply)

___ American Indian or Alaskan Native
___ Native Hawaiian or other Pacific Islander
___ Black/African American
___ Caucasian
___ Asian
___ Other (specify) ______________________________

Ethnicity

___ Hispanic
___ Non-Hispanic

Sex

___ Female
___ Male
___ Other ______________________________

Marital Status

___ Married
___ Separated
___ Civil Union
___ Unmarried (includes single, divorced, widowed)
GOVERNMENT MONITORING QUESTIONNAIRE

Please read this statement before proceeding. The following information is required by the federal government for loans related to the purchase of homes in order to monitor the lender’s compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.) Note: This form is separated from the application and maintained in a separate file.

Applicant 2 (if applicable) (Print): ________________________ Date: __________

___ I do not wish to furnish this information

Race/National Origin (Check all that apply)
___ American Indian or Alaskan Native
___ Native Hawaiian or other Pacific Islander
___ Black/African American
___ Caucasian
___ Asian
___ Other (specify) ________________________________

Ethnicity
___ Hispanic
___ Non-Hispanic

Sex
___ Female
___ Male
___ Other ________________________________

Marital Status
___ Married
___ Separated
___ Civil Union
___ Unmarried (includes single, divorced, widowed)