



## Habitat Homeownership Program Application Packet



Thank you for considering Habitat for Humanity as a path to homeownership! Read the following information carefully. We have requirements that must be met for your application to be considered.

We are currently accepting applications for one available home in Chatfield, MN. The home is a 3 bedroom/1 bathroom twin home.

Included with this letter is the application form and accompanying documents for you to complete and submit to our office by the application deadline.

### **Application Instructions:**

1. Fill out the application packet and accompanying forms **completely**. Anything left blank will result in an incomplete application that cannot be processed until all materials are received.
2. Gather and include copies of required materials as listed on the supporting materials checklist (pg 2).  
**Our office is unable to make copies of your materials, please visit the public library for use of printers.**
3. Include all materials in a packet and drop off or mail to our office.

Completed application packets must be received by **12 PM, December 31** for your application to be considered.

Completed application packets will be reviewed by TRHH staff, and you will be notified of your application status within 30 days of receipt of the complete packet.

Mail or hand-deliver all documents to:  
Two Rivers Habitat for Humanity  
1530 Greenview Dr SW, Suite 107  
Rochester, MN 55902

Office hours are generally Monday-Friday; 8:00 am – 4:00 pm. Documents can be left in the drop box in the door. If you have questions or require assistance with completing the application packet, please contact me at [apply@tworivershabitat.org](mailto:apply@tworivershabitat.org) or call 507-361-4012.

Sincerely,  
Homeowner Services Manager

**Along with your completed application packet, please include:**

1. \$30 fee (money order or check only) for background verification for each applicant - **Nonrefundable**
2. Copy of residency document for each applicant (see list below of acceptable documentation)
3. 2022 and 2023 State and federal tax returns- full packet
4. Paystubs/Income received- 2 most recent months (paycheck, SSI, unemployment, pension, etc)
5. Utility Bills (2 most recent months for each utility you pay)
6. Copy of current lease (if you aren't renting, please explain in section 3 of application)
7. Bank statements (3 most recent statements for each account you hold)

**The following items only need to be included if it applies:**

1. Credit Card statements- 2 most recent months
2. Loan contracts or statements- 2 most recent months ( car, student loans, etc)
3. Documentation of child support or alimony being received
4. Childcare payments- 2 most recent months
5. Vehicle insurance costs- 2 most recent months

\*Anyone in the home over the age of 18 who is NOT an applicant must provide residency documents, signed authorization forms and proof of income as well.

**Acceptable forms of Residency Documents**

- Valid, unexpired US Passport
- Certificate of Citizenship (N-560, N-561, N-645)
- Certified of Naturalization (N-550, N-570, N-578)
- Re-entry Permit/Refugee Travel Document (I-327, I-571)
- Alien Registration Receipt Card
- Certified Birth Certificate (state issued)
- Certificate of Birth Abroad (FS-240, FS-545, DS-1350)
- Certified adoption certificate from a US court
- Permanent Resident Card (Form I-551)



# Habitat Homeownership Program Information Summary



Qualified applicants enter into a partnership to build a decent, affordable home, which is sold to our homebuyer at the appraised value through affordable mortgage financing. Homebuyers meet criteria in three areas: need for housing, ability to pay, and willingness to partner. The application process is completed in multiple steps over several months, which includes selection and disqualification for some applicants.

## Minimum Eligibility Requirements:

- Applicants must live or work in our 5-county service area (Steele, Waseca, Dodge, Olmsted, Wabasha) or in a neighboring county not served by another Habitat affiliate.
  - Applicants and household members (age 18+) must submit to criminal background and sex offender registry studies.
- Gross income should fall between minimum and maximum limits for total household size. Calculate the annual gross income of all household members, ages 18 and over, and compare it to the chart below. \* This is a guideline only. Falling outside these income limits will not immediately exclude you from consideration. \*

Household Size	1	2	3	4	5	6	7	8
Minimum Income	\$24,612	\$26,956	\$31,058	\$35,160	\$38,000	\$40,800	\$43,600	\$46,400
Maximum Income	\$65,632	\$75,008	\$84,384	\$93,760	\$101,261	\$108,762	\$116,262	\$123,763

## Selection Criteria:

### *Need for Housing*

Examples include but are not limited to:

- Housing costs are over 30% of gross income
- Overcrowded household
- Inadequate heat or water
- Structural issues and/or maintenance problems
- Health hazards (presence of asbestos, mold, lead-based paint)
- Unsafe living conditions

### *Ability to Pay*

- Gross income is within the parameters identified on the chart.
- Applicants demonstrate an ability to pay a monthly mortgage (including escrow for property taxes and homeowner insurance). Mortgage payment will not exceed 30% of gross income.
- Applicants demonstrate ability to pay \$4,000-6,000 in closing costs.

### *Willingness to Partner*

Applicants agree to:

- Complete sweat equity hours in the construction of their home. (300 hours)
- Participate in public relations appearances and related activities to promote the mission of Two Rivers Habitat for Humanity.
- Complete designated homeowner education classes.
- Complete the USDA Rural Development 502 Loan application.

## The Application Process:

### *Application:*

The full application is available online or in person. All applicants will also be required to submit an application for home purchase financing through the US Department of Agriculture (USDA) Rural Development Home Loan Program. Applicants showing greatest need will be invited to continue in the process.

*Family Interview:* During this interview, we will review your current housing situation, discuss your need for Habitat homeownership and ability to pay an affordable mortgage, and review documentation provided throughout the application process. We will also discuss the expectations of your willingness to partner.

*Final Decision:* The Homeowner Selection Committee will review the information gathered and develop a recommendation for the Board of Directors, who make the final approval. Once chosen, the applicant will be notified and asked to complete a Homeowner Program Agreement outlining the partnership between the homeowner and Habitat for Humanity.

*Home Building Begins:* We build affordable homes that will meet or exceed Energy Star and Green Communities Standards, ensuring that the home will be energy efficient and affordably sustainable.



Two Rivers Habitat for Humanity  
 1530 Greenview Dr SW, Suite 107, Rochester, MN 55902  
 (507) 252-0849

# 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 (____) _____ Email Address _____ 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 (____) _____ Email Address _____ 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: _____																																																

### FOR OFFICE USE ONLY — DO NOT WRITE IN THIS SPACE

Date received: _____	Date of selection committee approval: _____
Date of notice of incomplete application letter: _____	Date of board approval: _____
Date of adverse action letter: _____	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> <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><b>Ethnicity (check one or more):</b></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>
<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information
<p><b>Sex:</b></p> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information	<p><b>Sex:</b></p> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information
<p><b>Race (check one or more):</b></p> <input type="checkbox"/> American Indian or Alaska Native — <i>Name of enrolled or principal tribe: _____</i>	<p><b>Race (check one or more):</b></p> <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"/> 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"/> 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"/> 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	<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 phone number
	Interviewer's signature	Date

## 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 **Midwest Region, 55 West Monroe St., Suite 1825, Chicago, IL 60603**, 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 \_\_\_\_\_

X \_\_\_\_\_

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

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

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

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



# Application Certification and Authorization Form

The undersigned certify the following:

1. I/We have applied for an application for a mortgage loan from Two Rivers Habitat for Humanity. In applying for the loan, I/we have completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We have made no misrepresentations in the loan pre-qualification or other documents, nor did I/we omit any pertinent information.
2. I/We understand and agree that Two Rivers Habitat for Humanity reserves the right to audit all information provided in connection with my/our loan. This may include verifying the information provided on the pre-qualification with the employer, landlord, and/or financial institution.

## AUTHORIZATION TO RELEASE INFORMATION

1. I/We have applied for an application for a mortgage loan from Two Rivers Habitat for Humanity. As part of the application process, Two Rivers Habitat for Humanity may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program. Any false documentation will result in immediate denial / disqualification.
2. A copy of this authorization may be accepted as an original

-----  
Applicant's Signature

-----  
Co-Applicant's Signature

-----  
Applicant's Printed Name

-----  
Co-Applicant's Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

-----  
Street Address

-----  
Street Address

-----  
City, State, Zip Code

-----  
City, State, Zip Code



**Combined Privacy Act Notice and Tennesen Warning**

We are committed to ensuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within the limitations of law. Please read the disclosures and acknowledgements outlined below carefully.

Private data requested to enable processing of your application is legally required to determine if you qualify for participation in this Habitat for Humanity program and to help Habitat for Humanity manage the program.

Depending on the type of assistance being provided, either grant or loan assistance, different disclosures apply. For grant assistance, your name and address are private data. For loan assistance, your name and address are public data. Regardless of whether you receive grant or loan assistance, the amount of assistance you receive is public data.

With both grant and loan assistance, all other data we create or collect from you, including financial information, such as credit reports, financial statements and net worth calculations, are classified as private data on individuals under Minnesota Statutes sections 462A.065 and 13.462, subdivision 3. You are not required to provide this information, but if you refuse to provide it we will be unable to determine your eligibility for this program and approve your application. Both the public data and the private data may be shared with nonaffiliated third parties as permitted by law, including Habitat for Humanity of Minnesota, the Federal Home Loan Bank (FHLB) and Minnesota Housing Finance Agency (MHFA) and staff whose jobs require them to see it in connection with our normal operating practices.

Where access to the data is authorized by state statute or federal law, it may be made available to others as so authorized.

Under the Privacy Act of 1974, you may refuse to provide your Social Security Number (SSN) and it will not affect your eligibility for assistance. Disclosure of your SSN for the purpose of verifying your income and credit is voluntary. However, if adequate verification of your income and credit is impossible without your SSN, we may be unable to determine your eligibility.

If you agree to allow us to create, collect and share information as described above, please indicate approval with your signature below.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

TO: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

RE: \_\_\_\_\_  
 Name \_\_\_\_\_  
 \_\_\_\_\_  
 Social Security Number \_\_\_\_\_

FROM: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Thank you for your prompt response. All information is confidential.  
 Please contact Homeowner Services Manager at 507-361-4012 if  
 you have any questions.

**PERMISSION FOR RELEASE OF INFORMATION**

**You do not have to sign this form if either the requesting organization or the organization supplying the information is left blank.** Release: I hereby authorize the release of the requested information. Information obtained under this consent is limited to information that is no older than 12 months. There are circumstances which would require the owner to verify information that is up to 5 years old, which would be authorized by me on a separate consent, attached to a copy of this consent.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Applicant/Tenant Address/ City / State / Zip Code

**THIS SECTION TO BE COMPLETED BY COUNTY HUMAN SERVICES AGENCY**

Does the above address match your records?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Number of Persons on Grant: ADULT(S) _____ CHILD(REN) _____		
		Full Grant		
		Monthly Amount	YES	NO
Minnesota Family Investment Program		\$ _____		
MFIP Housing Assistance Grant		\$ _____		
Diversiory Work Program		\$ _____		
Work Benefit Program		\$ _____		
General Assistance		\$ _____		
Minnesota Supplemental Assistance		\$ _____		
Other Assistance: Type _____		\$ _____		

Effective date of grant: \_\_\_\_\_. If this person is not receiving the full grant, please explain why: \_\_\_\_\_

When do you anticipate the full grant will be reinstated? \_\_\_\_\_

Other known household income? YES  NO  Source & Monthly Amount: \_\_\_\_\_

Does this person receive child support? YES  NO  If YES, what is the monthly amount? \$ \_\_\_\_\_. Total amount received during the last 12 months: \$ \_\_\_\_\_. If NO, has every reasonable effort been made by the applicant to collect any amount which may be due, including, but not limited to, filing with the appropriate courts or agencies responsible for the enforcement of any payments?  
 YES  NO  (Child support sanction) UNKNOWN

**County Human Services Agency**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print your name: \_\_\_\_\_ Tel. #: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

**PENALTIES FOR MISUSING THIS CONTENT:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security act at 208 (a) (6), (7) and (8). Violations of these provisions are cited as violations of 42 USC 408 (a), (6), (7) and (8).



Lease with Confidence.

(FOR OFFICE USE ONLY)	
SITE NAME:	_____
RHR ACCT #:	_____

## General Consent Form

### Personal Information:

I, \_\_\_\_\_ have made  
Last Name First Middle Maiden

application with \_\_\_\_\_ for \_\_\_\_\_  
Company Name State Purpose

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth Sex Social Security Number Driver's License State (\_\_\_\_\_) Home Phone \_\_\_\_\_

### Release:

I/We authorize Rental History Reports (RHR) and/or the above named company to do a complete investigation of all information provided in my application for residency. I/We have personally filled in and/or reviewed all information contained within the application. I/We understand failure to complete these documents completely and truthfully may result in denial and/or forfeit of deposit. A complete investigation may include any or all of the following: credit report, verification of employment and income, criminal record search, rental history references (including MPHA), unlawful detainer/eviction investigation, identity trace, sex offender search, terrorism search, check writing history and personal interviews with all provided references. The source of the information may come from, but is not limited to: credit bureaus, banks and other depository institutions, current and former employers, federal or state records including state employment security agency records, county or state criminal records, county agencies as it relates to the applicant's eligibility, non-eligibility and/or benefit amounts received by the tenant, or other sources as required. It is understood that a photocopy or facsimile copy of this form will serve as authorization. I/We understand that I/We have a right to make a written request within 30 days to receive information pertaining to this report if I/We are not accepted based upon information contained in the report. I/We authorize RHR to produce to the credit granter federal and state records of employment and income history, including state employment security agency records. This authorization continues in effect for one (1) year unless limited by state law, in which case, the authorization continues in effect for the maximum period not to exceed one (1) year. Notice to applications applying for a community in Minneapolis and St. Paul only: If you are charged an application fee but a consumer credit report or tenant screen report is not ordered, you are entitled to a refund of the application fee. Please circle your preferred method for return of the application fee as either 1) mail, 2) destroy it, or 3) hold for retrieval upon one business-days' notice. Any controversy or claim arising out of or relating to this agreement, or breach thereof, shall be settled by arbitration administered by the American Arbitration Association in accordance with its Commercial Arbitration Rules, and judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

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

Date \_\_\_\_\_

## OUT-OF-STATE CRIMINAL RECORDS SEARCH

_____ City / County	_____ State	_____ City / County	_____ State
_____ City / County	_____ State	_____ City / County	_____ State



## USDA Rural Development 502 Home Loan Program



As part of the selection process, you will also be required to apply to the USDA Rural Development 502 Home Loan program. This application will be provided by Two Rivers Habitat if you clear our initial evaluation. A brochure with information on the USDA application process is included.

Selection by Two Rivers Habitat for Humanity is dependent on a submitted and processed USDA 502 Loan application.

During the application process you will be directed to the USDA loan program website to complete the application.

If an applicant does not apply to the USDA Rural Development 502 Home Loan program, they will need to be willing to apply to an alternative lending source

To find out more about the USDA Home Loan program, visit the USDA program website at [USDA Rural Development 502 Home Loan Program](#)

**NOTICE TO USDA RURAL DEVELOPMENT**

This applicant is working with Habitat for Humanity.

Please keep \_\_\_\_\_, the \_\_\_\_\_ from

Habitat for Humanity representative

Habitat for Humanity representative title

\_\_\_\_\_, Minnesota

Habitat for Humanity Affiliate

informed of the USDA status for:

\_\_\_\_\_

Applicant(s) name(s)

To purchase a home at:

\_\_\_\_\_

Property address, if known

Habitat for Humanity Contact Information:

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

Phone number: \_\_\_\_\_

I hereby authorize the above named representative(s) of

\_\_\_\_\_ ("Habitat") to discuss with  
Habitat for Humanity Affiliate

representatives of USDA Rural Development ("USDA") information pertaining to my/our loan application.

Please copy the above email address in all communication going forward.

\_\_\_\_\_

Printed Name of Applicant

\_\_\_\_\_

Signature

Date

\_\_\_\_\_

Printed Name of Applicant

\_\_\_\_\_

Signature

Date

Please use this as the cover letter of the submitted application package.

Thank you!



# Rural Home Loans (Direct Program)

## What does this program do?

**Also known as the Section 502 Direct Loan Program, this program helps low- and very-low-income applicants buy decent, safe, and sanitary housing in eligible rural areas by providing payment assistance to increase their applicant's repayment ability. Payment assistance is a type of subsidy that reduces the mortgage payment for a short time. The amount of assistance is determined by the adjusted family income.**

### Who can apply for this program?

A number of factors are considered when determining eligibility for Single Family Direct Home Loans. At a minimum, applicants must have an adjusted income that is at or below the applicable low-income limit for the area in which they wish to buy a house (an income limit map is available at this link: <https://go.usa.gov/xzcfb>). They must also demonstrate a willingness and ability to repay debt.

### Applicants must:

- Be without decent, safe, and sanitary housing
- Be unable to obtain a loan from other resources on terms and conditions that can reasonably be expected to be met
- Agree to occupy the property as their principal residence
- Have the legal capacity to incur a loan obligation
- Meet citizenship or eligible noncitizen requirements
- Not be suspended or debarred from participation in federal programs

### Properties financed with direct loan funds must:

- Be modest in size for the area
- Not have market value in excess of the applicable area loan limit
  - Not be designed for income-producing activities

Borrowers are required to repay all or a portion of the payment subsidy received over the life of the loan when the title to the property transfers, or the borrower is no longer living in the dwelling.

Applicants must meet income eligibility for a direct loan. You can visit the USDA Income and Property Eligibility website (available at this link: <https://go.usa.gov/xzcdM>) for complete details. Or, contact your local Rural Development office (a map is available at this link: <https://www.rd.usda.gov/browse-state>) to learn more.

### What is an eligible area?

Properties must be located in an eligible rural area. Visit the USDA Income and Property Eligibility website (available at this link: <https://go.usa.gov/xzcdM>) for details.

### How can funds be used?

Loan funds can be used to help low-income people or households buy homes in rural areas. Funds can be used to build, repair, renovate, or relocate a home, or to purchase and prepare sites, including providing water and waste treatment equipment.

### How much can I borrow?

The maximum loan amount an applicant qualifies for depends on their ability to repay a loan. Rural Development considers various factors, such as income, debts, assets, and the amount of payment assistance the applicant is eligible to receive. Regardless of repayment ability, applicants can never borrow more than the area loan limit (plus certain other costs eligible to be financed) in the county in which the property is located (information is available at this link: <https://go.usa.gov/xzcGB> - PDF)

What is the interest rate and payback period?

- The interest rate is fixed, and based on current market rates at loan approval or closing, whichever is lower.
- When modified by payment assistance, the monthly mortgage payment can be reduced to a low as an effective 1 percent interest rate.
- The payback period is 33 years (38 years for very-low-income applicants who can't afford a 33-year loan term).

How much down payment is required?

Down payments are not typically required, but applicants with assets higher than the asset limit can be required to use a portion of those assets.

Is there a deadline to apply?

Applications are accepted year-round through your local Rural Development office. A map is available at this link: <https://www.rd.usda.gov/browse-state>.

How long does an application take?

Processing times vary depending on funding availability and program demand in the area in which the applicant is interested in buying. Processing times also are dependent upon the completeness of the applicant's package.

What governs this program?

- The Housing Act of 1949 as amended; 7 CFR, Part 3550 (available at this link: <https://go.usa.gov/xzcvG>)
- HB-1-3550 - Direct Single Family Housing Program Field Office Handbook (available at this link: <https://go.usa.gov/xzcvM> - PDF)

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**NOTE: Because citations and other information are subject to change, always consult the program instructions listed in the section above titled "What Governs This Program?" You can also contact your local office for assistance (a list is available at this link: <https://go.usa.gov/xzjP7>). You will find additional forms, resources, and program information at [rd.usda.gov](https://rd.usda.gov). USDA is an equal opportunity provider, employer, and lender.**

Last Updated March 2022