



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 measuring just over 1,030 square feet.

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 **Friday, May 30th** 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 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)
- 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																																																
Applicant's name: _____	Co-applicant's name: _____																																																
Alternative and former names: _____	Alternative and former names: _____																																																
Social Security number _____	Social Security number _____																																																
Home phone (____) _____	Home phone (____) _____																																																
Cell phone (____) _____	Cell phone (____) _____																																																
Email Address _____	Email Address _____																																																
Age _____ Date of birth (mm/dd/yyyy) _____	Age _____ Date of birth (mm/dd/yyyy) _____																																																
☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.)	☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.)																																																
Dependents and others who will live with you:	Dependents and others who will live with you (not listed by co-applicant):																																																
<table border="1"><thead><tr><th>Name</th><th>Age</th><th>Male</th><th>Female</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr></tbody></table>	Name	Age	Male	Female	_____	_____	☐	☐	_____	_____	☐	☐	_____	_____	☐	☐	_____	_____	☐	☐	_____	_____	☐	☐	<table border="1"><thead><tr><th>Name</th><th>Age</th><th>Male</th><th>Female</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr><tr><td>_____</td><td>_____</td><td>☐</td><td>☐</td></tr></tbody></table>	Name	Age	Male	Female	_____	_____	☐	☐	_____	_____	☐	☐	_____	_____	☐	☐	_____	_____	☐	☐	_____	_____	☐	☐
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Present address (street, city, state, ZIP code): ☐ Own ☐ Rent	Present address (street, city, state, ZIP code): ☐ Own ☐ Rent																																																
Number of years: _____	Number of years: _____																																																
If you have lived at your present address for less than two years, complete the following, for all addresses during the past two years:																																																	
Previous address(es) (street, city, state, ZIP code): ☐ Own ☐ Rent	Previous address(es) (street, city, state, ZIP code): ☐ Own ☐ Rent																																																
Number of years: _____	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	☐	☐
Co-applicant	☐	☐

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	
☐ Does not apply.		☐ Does not apply.	
Name and address of CURRENT employer:	Start date (mm/dd/yyyy):	Name and address of CURRENT employer:	Start date (mm/dd/yyyy):
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
If working at current job less than one year, complete the following information.			
Name and address of PREVIOUS employer:	Years on this job:	Name and address of PREVIOUS employer:	Years on this job:
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
☐ Check if you are the business owner or are self-employed. ☐ I have an ownership share of less than 25%. ☐ I have an ownership share of 25% or more. Monthly income (or loss) \$ _____			PLEASE NOTE: 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: _____	\$	\$	\$	\$
Total	\$	\$	\$	\$

HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE			
Name	Income source	Monthly income	Date of birth



7. SOURCE OF DOWN PAYMENT AND CLOSING COSTS

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

8. ASSETS

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

9. LIABILITIES AND EXPENSES

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

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	\$	\$	\$
Total	\$	\$	\$

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?	☐ Yes ☐ No	☐ Yes ☐ No
b. Have you declared bankruptcy within the past seven years? If YES, identify the type(s) of bankruptcy: ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	☐ Yes ☐ No	☐ Yes ☐ No
c. Have you had any property foreclosed upon in the past seven years?	☐ Yes ☐ No	☐ Yes ☐ No
d. Are you party to a lawsuit in which you potentially have any personal financial liability?	☐ Yes ☐ No	☐ Yes ☐ 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?	☐ Yes ☐ No	☐ Yes ☐ No
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?	☐ Yes ☐ No	☐ Yes ☐ No
g. Are you a co-signer or guarantor on any debt of loan that is not disclosed on this application?	☐ Yes ☐ No	☐ Yes ☐ No
h. Are you a U.S. citizen or permanent resident?	☐ Yes ☐ No	☐ Yes ☐ No
Note: 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.

Applicant signature	Date	Co-applicant signature	Date
X _____	_____	X _____	_____

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

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
Ethnicity (check one or more): ☐ Hispanic or Latino ☐ Mexican ☐ Puerto Rican ☐ Cuban ☐ Other Hispanic or Latino – <i>Origin: _____</i> <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i> ☐ Not Hispanic or Latino ☐ I do not wish to provide this information	Ethnicity (check one or more): ☐ Hispanic or Latino ☐ Mexican ☐ Puerto Rican ☐ Cuban ☐ Other Hispanic or Latino – <i>Origin: _____</i> <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i> ☐ Not Hispanic or Latino ☐ I do not wish to provide this information
Sex: ☐ Female ☐ Male ☐ I do not wish to provide this information	Sex: ☐ Female ☐ Male ☐ I do not wish to provide this information
Race (check one or more): ☐ American Indian or Alaska Native — <i>Name of enrolled or principal tribe: _____</i> ☐ Asian ☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — race: _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i> ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — race: _____ <i>For example: Fijian, Tongan, and so on.</i> ☐ White ☐ I do not wish to provide this information	Race (check one or more): ☐ American Indian or Alaska Native — <i>Name of enrolled or principal tribe: _____</i> ☐ Asian ☐ Asian Indian ☐ Chinese ☐ Filipino ☐ Japanese ☐ Korean ☐ Vietnamese ☐ Other Asian — race: _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i> ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander — race: _____ <i>For example: Fijian, Tongan, and so on.</i> ☐ White ☐ 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?	☐ Yes ☐ No
Was the sex of the Borrower collected on the basis of visual observation or surname?	☐ Yes ☐ No
Was the race of the Borrower collected on the basis of visual observation or surname?	☐ Yes ☐ No
This application was taken by: ☐ Face-to-face interview (included electronic media w/video component) ☐ By mail ☐ By telephone	Interviewer's name (print or type) Interviewer's signature Interviewer's phone number 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 _____

Print name: _____

Date: _____

X _____

Print name: _____

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





Community Homeownership Impact Fund
Combined Privacy Act Notice and
Tennessen Warning for Use with
All Other Impact Fund Assistance

Impact Fund Administrator

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 and be aware that the required disclosures will vary depending on the type of assistance provided.

Private data requested to enable processing of your application is legally required to determine if you qualify for participation in this Minnesota Housing Finance Agency (Minnesota Housing) program and to help Minnesota Housing 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 will be shared with the Minnesota Housing Finance Agency (MHFA) staff whose jobs require them to see it. 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.

Beneficiary Name

Signature

Date

Beneficiary 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 NO Number of Persons on Grant: ADULT(S) _____ CHILD(REN) _____

Full Grant

Monthly Amount

YES

NO

Minnesota Family Investment Program

\$

MFIP Housing Assistance Grant

\$

Diversions 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).



(FOR OFFICE USE ONLY)

SITE NAME: _____

RHR ACCT #: _____

General Consent Form

Personal Information:

I, _____ have made an
Last Name First Middle Maidenapplication 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

701 5th Street South ● Hopkins, MN 55343

PH> 952-545-3953 / 888-389-4023 ● FX> 952-545-3973 / 888-389-4024 ● www.RentalHistoryReports.com



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/xzcdM>)~~ They ~~https://go.usa.gov/xzcdM~~ state 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)

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. *USDA is an equal opportunity provider, employer, and lender.*

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