

PRE-APPLICATION QUESTIONNAIRE

GENERAL INFORMATION AND INSTRUCTIONS

Keep This Page for Your Records

Welcome to Sussex County Habitat for Humanity's homeowner selection process. We are very pleased that you have expressed an interest in becoming one of our future homeowners. Sussex County Habitat for Humanity is a non-profit, non-denominational Christian housing ministry that builds simple, decent and affordable homes in partnership with low-income families in Sussex County.

Qualifying for a Home: Partner Families are qualified through an extensive application process that considers the family's *ability to pay* an affordable mortgage, *demonstration of need* for housing, and the family's *willingness to partner* by completing all program requirements needed to be a Habitat partner family. The applicant(s) must live and/or work in Sussex County and maintain a steady and reliable source of income for 12 consecutive months.

Partner Family Program Requirements:

- Investing 200 hours (single head of household)/ 350 hours (joint head of household) in "sweat equity" to build your own home and the homes of other Habitat partner families.
- Depositing a minimum of \$3,000 in closing costs for the purchase of your home.
- Paying off all delinquent debt before settlement.
- Attending monthly pre-purchase education courses and financial coaching sessions.
- Being a positive Habitat ambassador in the community.

Instructions for Applying for a Home:

Please Send in the Following Items:

- Pre-application questionnaire (*complete both front and back*)
- Copies of the applicant/co-applicant's two most recent paycheck stubs showing year-to-date gross earnings for each job.
- Copies of additional income statements/benefit letters (*i.e. child support, disability, SSI*)
- Signed authorization form to request a credit check.
- Signed sex offender registry authorization form.
- A \$25 money order made out to SCHFH.
 - You can purchase a money order at your local post office.
 - We **do not** accept check or cash.

Answer the following questions to see if you should apply for a Habitat home:

- | | | |
|---|------------------------------|-----------------------------|
| • Do you live and/or work in Sussex County? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Do you live in substandard, overcrowded or overly expensive housing? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Does your family's yearly gross income fit within the following guidelines? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

2022 HUD Yearly Income Guidelines		
Family Size	Income Not Less Than	Income Not More Than
1	\$17,640	\$35,280
2	\$20,160	\$40,320
3	\$22,680	\$45,360
4	\$25,200	\$50,400
5	\$27,240	\$54,480
6	\$29,250	\$58,500
7	\$31,260	\$62,520
8	\$33,270	\$66,540

If you answered "Yes" to these questions, you may qualify for a Habitat for Humanity home!



Special Opportunity to Serve Homeless Families and/or Special Needs

DO NOT DETACH

Sussex County Habitat for Humanity (SCHFH) is looking to partner with families who have special needs and/or are facing homelessness. While we are seeking an opportunity to serve these specific populations, SCHFH is an equal housing opportunity program. We do not discriminate on the basis of race, sex, color, age, disability, religion, national origin, family status, marital status, sexual orientation or because all or part of income is derived from any public assistance program.

Please note: All families applying to Habitat will be approved based on their ability to meet our three criteria:

- Ability to pay
- Demonstration of need for decent, affordable housing
- Willingness to partner with Sussex County Habitat for Humanity

Please check the criteria (for those that choose to self-report) that may apply below:

Special Needs Defined As:

- ☐ Frail elderly persons (one who is unable to perform at least three (3) activities of daily living such as eating, bathing, grooming, dressing, and home management).
- ☐ Mentally or physically disabled persons.
- ☐ Persons recovering from physical abuse, alcohol and drug abuse.
- ☐ Persons with HIV/AIDS.

Homelessness Defined As:

- ☐ Persons who are sleeping in places not meant for human habitation.
- ☐ Persons sleeping in emergency shelters.
- ☐ Persons graduating from a transitional housing program specifically for homeless persons.
- ☐ Persons being discharged from an institution or foster care with no permanent residence available.
- ☐ Persons who **would be** discharged from an institution if they had a permanent residence available.
- ☐ Victims of domestic violence.

Overcrowding Defined As:

- ☐ The presence of more people or things in a space than is comfortable, safe, or permissible.

FOR OFFICIAL USE - DO NOT WRITE IN THIS SPACE

Date Received: _____ \$25 Payment: _____ Income Documentation: _____ Additional Information: _____

Incomplete: ☐ Yes ☐ No Date of Action: _____ Missing Items: _____

Close File: ☐ Yes ☐ No Date of Action: _____ Reason: _____

☐ Approved ☐ Denied Reason: _____ Date of Action: _____

Notes: _____



Sussex County
Habitat
for Humanity®

We build **strength, stability** and **self-reliance.**

Pre-Application Questionnaire

Fill in All Sections, Front & Back, Clearly in Ink.

This questionnaire is not an application

Applicant Information:

Name: _____
First Middle Last Social Security Number Date of Birth

Current Mailing Address: _____
Street City State Zip Code

Phone(s): _____ ☐ Home ☐ Work ☐ Cell

Email Address: _____

Main Employer: _____ Location: _____

How long have you worked here? _____ ☐ Full-time ☐ Part-time Date Hired? _____ Hours worked each week? _____

Other Information

Have you been employed with the same employer for the past year?

☐ Yes ☐ No

Have you enclosed your last two paystubs showing gross YTD income?

☐ Yes ☐ No

How often do you get paid?

☐ Weekly ☐ Bi-Weekly ☐ Twice Monthly ☐ Monthly

Have you lived and/or worked in Sussex County for the last 12 months?

☐ Yes ☐ No

Are you a U.S. citizen or permanent resident?

☐ Yes ☐ No

* If not, do you have a work authorization card?

☐ Yes ☐ No

Is anyone in your household a veteran or on active duty?

☐ Yes ☐ No

Have you filed for bankruptcy in the last three years?

☐ Yes ☐ No

Co-Applicant Information:

Name: _____
First Middle Last Social Security Number Date of Birth

Mailing Address: _____
Street City State Zip Code

Phone(s): _____ ☐ Home ☐ Work ☐ Cell

Email Address: _____

Main Employer: _____ Location: _____

How long have you worked here? _____ ☐ Full-time ☐ Part-time Date Hired? _____ Hours worked each week? _____

Other Information

Have you been employed with the same employer for the past year?

☐ Yes ☐ No

Have you enclosed your last two paystubs showing gross YTD income?

☐ Yes ☐ No

How often do you get paid?

☐ Weekly ☐ Bi-Weekly ☐ Twice Monthly ☐ Monthly

Have you lived and/or worked in Sussex County for the last 12 months?

☐ Yes ☐ No

Are you a U.S. citizen or permanent resident?

☐ Yes ☐ No

* If not, do you have a work authorization card?

☐ Yes ☐ No

Is anyone in your household a veteran or on active duty?

☐ Yes ☐ No

Have you filed for bankruptcy in the last three years?

☐ Yes ☐ No

Additional Household Income (Monthly)

Additional Applicant Income: \$ _____

(Not Listed Above)

what is the source of this income? _____

Additional Co-Applicant Income: \$ _____

(Not Listed Above)

what is the source of this income? _____

Child Support: \$ _____

Food Stamps: \$ _____

Disability Income: \$ _____

Monthly Debt/Expenses:

Rent Amount: \$ _____

Car Payment (S): \$ _____

Student Loan Payments: \$ _____

Personal Loans: \$ _____

Other Loan Payments: \$ _____

Child Support Payments: \$ _____

Credit Card Payments: \$ _____



Demonstration of Need:Number of bedrooms in current residence _____Number of people living in current residence _____

Total number of people who would be living in your Habitat home _____

List all individuals other than the applicant and co-applicant who will be living in your Habitat home:

	<u>Age</u>	<u>Male</u>	<u>Female</u>		<u>Age</u>	<u>Male</u>	<u>Female</u>
_____	_____	<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"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Describe your current housing situation. Tell us why you need a Habitat home. If additional space is needed, please attach a separate sheet of paper. _____

Your Willingness to Partner with Sussex County Habitat for Humanity:**If selected, is your family willing to meet the requirements for our housing program? These include:**

- Investing 200 hours (Single head of household)/ 350 hours (joint head of household) in "sweat equity" to build your home and the homes of other Habitat partner families.
- Depositing a minimum of \$3,000 in closing costs for the purchase of your home.
- Attending monthly pre-purchase education courses and financial coaching sessions.
- Learning about construction and home maintenance.
- Being a good Habitat ambassador in the community and promoting continuation of this important work.

☐ Yes, I am/we are willing to meet these requirements if selected for the program.☐ No, I am/we are not willing to meet these requirements for the program.**Once you have signed and completed all sections of the pre-application questionnaire, and have attached all required documentation, please return the pre-application questionnaire to the address listed below.**

- Within **30 days** of submitting your pre-application questionnaire, the Homeowner Services Manager will review and verify the following:
 - Your ability to pay a not for profit affordable mortgage.
 - Confirm that your income is within SCHFH's income guidelines,
 - Request your credit report to confirm that you have delinquent debt less than \$3,000
 - Confirm that the names of all members in your household do not appear on state and national sex offender registries.
- Families who meet our pre-qualification requirements are invited to attend an **application appointment** where the homeownership program is discussed in detail and the family completes the SCHFH housing application.
- Once the application appointment is conducted, a site visit may be scheduled.
- The application will then be presented to the Homeowner Services Committee who will make a recommendation to the Board of Directors. The Board of Directors will determine which application(s) are selected for partnership.

By signing and submitting this pre-application questionnaire, I/we request consideration for the Sussex County Habitat for Humanity homeownership program. I/we understand that this form is a pre-application questionnaire and not an application. I/we understand that my/our credit report will be printed and used to help determine my/our eligibility and that my/our name(s) will be checked against the state and national sex offender registries. I/we have answered all questions truthfully.

 Applicant Signature

Date: _____

 Co-Applicant Signature

Date: _____

Please Return This Pre-Application Questionnaire To:
 Mailing Address: P.O. Box 759 Georgetown, DE 19947 / Office Address: 206 Academy Street, Suite 1
 Georgetown, DE 19947 / Office Phone: 302-855-1153 / Website: sussexcountyhabitat.org
For additional questions, please contact: the Homeowner Services Coordinator: (302) 855 - 1153 Ext. 209 or at Kenya@sussexcountyhabitat.org

Authorization to Provide/Release Information

You are hereby authorized to provide Sussex County Habitat for Humanity or its designated representative's any and all information that you have relating to my credit history, employment history, income, bank and similar balances, and copies of my income tax returns. I hereby release you and Sussex County Habitat for Humanity from all legal responsibility or liability that may arise from your honoring this authorization and its use of the same. I also authorize Sussex County Habitat for Humanity to refer me to additional non-profits for support services. A photocopy of this authorization shall be considered as effective and valid as the original.

Applicant's Signature

DATE

Co-Applicant's Signature

DATE

Notice of Sexual Offender Registration Check

Please take notice that in accordance with the policy of Habitat for Humanity International and Sussex County Habitat for Humanity, the names of all applicants and co-applicants for a Habitat house or the Repairs Program, and all members of their household that are age 16 or older will be checked against one or more sexual offender registration data bases. If your name, the name of a co-applicant or the name of any member of your household appears in such a registry, you should immediately notify Sussex County Habitat for Humanity. A photocopy of this authorization shall be considered as effective and valid as the original.

Applicant's Signature_____
DATE_____
Co-Applicant's Signature_____
DATE

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Registry checked by: _____ Date: _____

Name of Registry Checked: _____

Applicant Name: _____

☐ Does **Not** appear in the registries☐ **Does** appear in the registries

Co-Applicant Name: _____

☐ Does **Not** appear in the registries☐ **Does** appear in the registries

Additional Household member: _____

☐ Does **Not** appear in the registries☐ **Does** appear in the registries

Additional Household member: _____

☐ Does **Not** appear in the registries☐ **Does** appear in the registries