



Dear Habitat for Humanity MidOhio (HFHMO) Homeownership Applicant,

As you begin the application process, we wanted to provide some additional information that might be helpful to you. If you have questions at any time please call the **Intake Line at 614-484-1966**. HFHMO can offer language interpretation services at no cost. If you need assistance in understanding or translation services please call us.

**STEP 1: PICK UP AN APPLICATION**

**Applications will be available September 9<sup>th</sup>, 2024 until September 20<sup>th</sup>, 2024 ONLY by the following means:**

- Habitat Main office 6665 Busch Blvd. Columbus, Ohio 43229 - Monday – Friday 9:00am to 5:00pm
- Newark ReStore located at 1660 N. 21<sup>st</sup> St. Newark, Ohio 43055 - Monday – Saturday 9:00am to 5:00pm
- On-line for downloading only at [www.habitatmidohio.org](http://www.habitatmidohio.org) (under What we Do – Homeownership tabs)
- Intake Line at 614-484-1966
- Email requests to [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org)

**STEP 2: REVIEW HABITAT’S THREE CRITERIA FOR QUALIFYING**

- **1 - ABILITY TO PAY**
  - We serve households whose income is 30%-60% AMI.

Confirm your household meets the below income requirements

FAMILY SIZE	30% Minimum Income	30% Monthly	60% Maximum Income	60%Monthly
ONE	\$21,700	\$1,808	\$43,440	\$3,620
TWO	\$24,800	\$2,067	\$49,620	\$4,135
THREE	\$27,900	\$2,325	\$55,800	\$4,650
FOUR	\$31,200	\$2,600	\$61,980	\$5,165
FIVE	\$36,580	\$3,048	\$66,960	\$5,580
SIX	\$41,960	\$3,497	\$71,940	\$5,995
SEVEN	\$47,340	\$3,945	\$76,860	\$6,405
EIGHT	\$52,720	\$4,393	\$81,840	\$6,820
NINE	\$58,100	\$4,842	\$86,820	\$7,235
TEN	\$63,480	\$5,290	\$91,740	\$7,645

**2 - WILLINGNESS TO PARTNER**

- You must be willing to invest “sweat equity” hours. You will earn sweat equity hours (200 or 250 hours) by attending homeownership classes, budgeting classes, working to help build your home and homes of others and other approved activities.

**3 - NEED FOR SHELTER**

- Must be living in substandard or inadequate housing
- Should you qualify for a home visit a member of the Homeowner Selection Committee will call to schedule a time to meet at your home.
- Use the home visit to share any concerns or problems with your current living situation.

Habitat for Humanity is an equal housing opportunity provider. 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. If hearing impaired, deaf or speech impaired, call TTY: 614.841.1991 for assistance. Habitat for Humanity-MidOhio Homeowner Selection Committee 01/13/2021

Anyone who feels he/she/they has been discriminated against may file a complaint of housing discrimination with the U.S. Department of HUD: 1-800-669-9777 (toll free) or 1-800-927-9275 (TTY)



### Step 3 – CONFIRM YOU MEET THE FOLLOWING CRITERIA

- Must be a first-time homebuyer
- Wage earners must be employed at the same job for 6 months and employed for at least one (1) year
- No more than \$1,000 in collections and no open judgements or liens on your credit report
- Bankruptcy must be discharged at least two years
- HFHMO screens every adult household member (18 years and older) listed on the application on the National Sexual Offender Public Registry [www.nsopw.gov](http://www.nsopw.gov).
- If the applicant is approved for a home visit, HFHMO conducts a third-party criminal background report on every household member 18 years and older.

### STEP 4 - RETURN APPLICATION by the deadline of October 18<sup>th</sup> at 5:00pm. AND SUBMIT Non-Refundable APPLICATION FEE OF \$50.00 with your application.

- Non- refundable APPLICATION FEE can be paid by CASH, MONEY ORDER, CHECK OR DEBIT/CREDIT CARD or scan the QR Code to pay online or at <https://www.habitatmidohio.org/homeowner-application-fee-payments.html>  
Money Order and Checks can be made out to Habitat for Humanity MidOhio (any NSF charge will be assessed a \$35.00 NSF fee and your application will not be processed until the application and NSF fee are paid)



<b>SEPTEMBER</b>	
LOCATIONS	DAYS AND HOURS AVAILABLE TO DROP OFF COMPLETED APPLICATIONS
HABITAT MAIN OFFICE 6665 BUSCH BLVD	MONDAY THRU FRIDAY 9:00am TO 5:00pm
	<b>EVENING HOURS AT 6665 BUSCH BLVD</b>
	Wednesday - September 18 <sup>TH</sup> 5:00pm TO 8:00pm
NEWARK RESTORE 1660 N 21 <sup>ST</sup> STREET	MONDAY THRU SATURDAY 9:00am TO 5:00pm
	<b>EVENING HOURS AT NEWARK RESTORE</b>
	Thursday, September 26 <sup>th</sup> until 6:00pm
<b>OCTOBER</b>	
LOCATIONS	DAYS AND HOURS AVAILABLE TO DROP OFF APPLICATIONS
HABITAT MAIN OFFICE 6665 BUSCH BLVD	MONDAY THRU FRIDAY 9:00 am TO 5:00pm And Saturday October 5 <sup>TH</sup> 9:00 am TO NOON
	<b>EVENING HOURS AT BUSCH BLVD</b>
	Wednesday October 16 <sup>TH</sup> 5:00pm TO 8:00pm
NEWARK RESTORE 1660 N 21 <sup>ST</sup> STREET	MONDAY THRU SATURDAY 9:00am TO 5:00pm
	<b>EVENING HOURS AT NEWARK RESTORE</b>
	Thursday October 3 <sup>rd</sup> until 6:00pm Thursday October 10 <sup>th</sup> until 6:00pm

We have limited lots available for homes. In Franklin County, we will be building in the Linden Neighborhood. In Licking County, we will be building in the City of Newark. If you are not interested in the current areas we encourage you to reapply at a later date.

Please call 614-484-1966 or email [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org) if you have any questions. We look forward to working with you!

### *Homeowner Services Team*

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Anyone who feels he/she/they has been discriminated against may file a complaint of housing discrimination with the U.S. Department of HUD:  
1-800-669-9777 (toll free) or 1-800-927-9275 (TTY)





**Homeownership Applications will be available September 9-20, 2024. If you have questions or would like to receive an application in the mail, please call the Intake Line at 614-484-1966 or email [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org).**

### **Important Instructions for Submitting a Complete Application:**

Completed applications with copies of all required documents must be mailed to 6665 Busch Blvd. Columbus, OH 43229 OR dropped into the drop-box located in this entryway during normal business hours. There will be no exceptions.

- **ALL APPLICATIONS ARE DUE NO LATER THAN OCTOBER 18th, BY 5:00PM.**
- No copies will be made at the office.
- No application review; we will only take completed application packets.
- No drop-ins outside of designated times. Call 614-484-1966 or email [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org) with any questions.

**If translation services are necessary, please call our intake line at 614-484-1966 to leave a message. We will schedule a date and time for a translator to work with you.**

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**Codsiyada Guriyeynta waxaa la heli karaa Sebtember 9-20, 2024. Haddii aad qabto su'aalo ama aad jeclaan lahayd inaad hesho codsi boostada ah, fadlan wac Khadka Qaadashada 614-484-1966 ama email [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org).**

### **Tilmaamaha Muhiimka ah ee Gudbinta Codsiga Oo Buuxa:**

Codsiyada la buuxiyay oo leh nuqulo ka mid ah dhammaan dukumiintiyada loo baahan yahay waa in lagu diraa 6665 Busch Blvd. Columbus, OH 43229 OR hoos u dhaca sanduuqa ku yaalla marinkan gelitaanka saacadaha shaqada ee caadiga ah. Ma jiri doonto wax ka reeban.

- **DHAMMAAN CODSIYADA WAA IN AAN KA DANBEYN OKTOBER 18keeda abbaaraha 5:00 galabnimo.**
- Wax koobiyo ah laguma samayn doono xafiiska.
- Ma jiro dib u eegis codsi; Waxaan qaadan doonaa oo kaliya baakadaha codsiga oo dhameystiran.
- Ma jiro soo gelis ka baxsan waqtiyada loo cayimay. Wac 614-484-1966 ama iimayl u dir [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org) wixii su'aalo ah.

**Haddii adeegyada turjumaada ay lagama maarmaan tahay, fadlan ka wac khadkayaga qaadashada 614-484-1966 si aad farriin uga tagto. Waxaan kuu ballansan doonaa taariikh iyo waqti turjumaan kugula shaqeeyo.**

Las solicitudes para propietarios de vivienda estarán disponibles del 9 al 20 de septiembre de 2024. Si tiene preguntas o desea recibir una solicitud por correo, llame a la línea de admisión al 614-484-1966 o envíe un correo electrónico a [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org).

**Instrucciones importantes para enviar una solicitud completa:**

Las solicitudes completas con copias de todos los documentos requeridos deben enviarse por correo a 6665 Busch Blvd. Columbus, OH 43229 O depositarse en el buzón ubicado en esta entrada durante el horario comercial normal. No habrá excepciones.

**TODAS LAS SOLICITUDES DEBEN ENTREGARSE A MÁS TARDAR EL 18 DE OCTUBRE A LAS 5:00 P. M.**

- No se harán copias en la oficina.
- No se revisarán las solicitudes; solo aceptaremos los paquetes de solicitud completos.
- No se aceptan personas fuera de los horarios designados. Llame al 614-484-1966 o envíe un correo electrónico a [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org) si tiene alguna pregunta.

Si necesita servicios de traducción, llame a nuestra línea de admisión al 614-484-1966 para dejar un mensaje. Programaremos una fecha y hora para que un traductor trabaje con usted.

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ستكون طلبات ملكية المسكن متاحة في الفترة من 9 إلى 20 سبتمبر 2024. إذا كانت لديك أسئلة أو ترغب في تلقي طلب بالبريد، يرجى الاتصال بخط الاستقبال على الرقم 614-484-1966 أو إرسال بريد إلكتروني إلى [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org).

**تعليمات هامة لتقديم الطلب كاملاً**

Busch Blvd. Columbus, OH يجب إرسال الطلبات المكتملة مع نسخ من جميع المستندات المطلوبة إلى العنوان 6665 أو إيداعها في صندوق الإيداع الموجود عند المدخل خلال ساعات العمل العادية. لن تكون هناك استثناءات 43229.

**يجب تقديم جميع الطلبات في موعد أقصاه 18 أكتوبر بحلول الساعة 5:00 مساءً**

لن يتم عمل نسخ في المكتب

لا مراجعة للطلبات؛ سنقبل فقط حزم الطلبات المكتملة

لا يُسمح بالحضور خارج الأوقات المحددة. اتصل على الرقم 614-484-1966 أو راسلنا على البريد الإلكتروني [buildyourdream@habitatmidohio.org](mailto:buildyourdream@habitatmidohio.org) إذا كان لديك أي أسئلة

إذا كانت هناك حاجة إلى خدمات الترجمة، يرجى الاتصال بخط الاستقبال لدينا على الرقم 614-484-1966 لترك رسالة. وسنحدد موعدًا ووقتًا لكي يعمل مترجم معك





## APPLICATION DOCUMENT CHECKLIST

**\*\*WE DO NOT MAKE COPIES OF ANY DOCUMENTS\*\***

	Attached	N/A	Comment
Completed Application- All Sections Signed and Dated	<input type="checkbox"/>	<input type="checkbox"/>	
Homebuyer Biography form	<input type="checkbox"/>	<input type="checkbox"/>	
Non-refundable application fee of \$50.00. We will accept cash, money orders, checks or debit cards. A fee of \$35.00 will be charged for a NSF check.	<input type="checkbox"/>	<input type="checkbox"/>	
2023, 2022 Federal Income Tax Returns (1040)	<input type="checkbox"/>	<input type="checkbox"/>	
2023, 2022 - W2s	<input type="checkbox"/>	<input type="checkbox"/>	
If Self-employed – 2023, 2022 Federal Income Tax form <ul style="list-style-type: none"> <li>• Schedule C's</li> <li>• 1099- MISC Forms</li> <li>• Profit Loss Statements for 2024</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	
Copies of the last (3) months bank statements for any and all checking and savings accounts. These must be actual statements <u>NOT screen shots</u> . If your paychecks are put on prepaid cards (for example Chime, Direct Express or Cash App) please bring in the account statements.	<input type="checkbox"/>	<input type="checkbox"/>	
(3) months of statements for Cash App, Zelle, Venmo or Apple Pay. We will need written explanation of consecutive transactions from the same sender	<input type="checkbox"/>	<input type="checkbox"/>	
4 most recent pay stubs or income documentation totaling 2 months of income for <u>all</u> jobs for all household members over the age of 18	<input type="checkbox"/>	<input type="checkbox"/>	
3 months' of rental receipts (proof of rental payments)	<input type="checkbox"/>	<input type="checkbox"/>	
Government issued photo identification cards and Social Security cards for every person over the age of 18. (i.e. driver's license, state ID card, green card)	<input type="checkbox"/>	<input type="checkbox"/>	
3 months of utility bills including water bill, electric bill, and gas bill No termination notices	<input type="checkbox"/>	<input type="checkbox"/>	
Completed and signed Landlord Release form	<input type="checkbox"/>	<input type="checkbox"/>	
Credit Check Release form complete with applicant and signatures of all adults over 18 in household	<input type="checkbox"/>	<input type="checkbox"/>	
Employment History Form	<input type="checkbox"/>	<input type="checkbox"/>	
Award Letter for Social Security verification (SSD/SSI) –2024 (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Verification of Food Stamps (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Bankruptcy Decree/Settlement Agreement (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Verification of Home Choice Voucher (Section 8) from CMHA (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Divorce Papers/Decree (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Child Support Statement for the past 12 months court ordered ONLY (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
*Veterans only – copy of DD214 (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	

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1-800-669-9777 (toll free) or 1-800-927-9275 (TTY)



## APPLICATION DROP OFF LOCATIONS, DATES AND TIMES

**ALL APPLICATIONS ARE DUE NO LATER THAN**

**FRIDAY - OCTOBER 18TH BY 5:00PM (No exceptions!)**

**\*\*\* Reminder we cannot make copies of your documents \*\*\***

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**Non-Refundable APPLICATION FEE can be returned with the application and should be paid by**

**CASH, MONEY ORDER, CHECK OR DEBIT/CREDIT CARD or scan the QR Code below to pay online or at**

<https://www.habitatmidohio.org/homeowner-application-fee-payments.html>

**Money Orders and checks can be made out to Habitat for Humanity – MidOhio**

Any payment that has a NSF charge will be assessed a \$35.00 NSF fee and your application will not be processed until the application fee and NSF fee are paid!







Habitat for Humanity-MidOhio  
6665 Busch Blvd.  
Columbus, Ohio 43229

Habitat Homeownership Program

# Application

Franklin County  Licking County



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**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 _____																																																
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Dependents and others who will live with you:	Dependents and others who will live with you (not listed by co-applicant):																																																
<table border="0" style="width: 100%;"> <tr> <th style="width: 20%;">Name</th> <th style="width: 10%;">Age</th> <th style="width: 10%;">Male</th> <th style="width: 10%;">Female</th> </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> <tr> <td>_____</td> <td>_____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </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"/>	<table border="0" style="width: 100%;"> <tr> <th style="width: 20%;">Name</th> <th style="width: 10%;">Age</th> <th style="width: 10%;">Male</th> <th style="width: 10%;">Female</th> </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> <tr> <td>_____</td> <td>_____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </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	Present address (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> 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): <input type="checkbox"/> Own <input type="checkbox"/> Rent	Previous address(es) (street, city, state, ZIP code): <input type="checkbox"/> Own <input type="checkbox"/> 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	<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  Living with family or friends

Number of bedrooms in your current housing (please circle): 1 2 3 4 5

Other rooms in the place where you are currently living:  Kitchen  Bathroom  Living room  Dining room

Other (please describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you pay rent  Cash  Money Order  Check  Other \_\_\_\_\_

### 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.)

\$ \_\_\_\_\_



### 5. EMPLOYMENT INFORMATION

Applicant		Co-applicant	
<input type="checkbox"/> Does not apply.		<input type="checkbox"/> 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):
	Monthly (gross) wages: \$		Monthly (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:	Start and End Date:	Name and address of PREVIOUS employer:	Start and End Date:
	Annual (gross) wages: \$		Annual (gross) wages: \$
Type of business:	Business phone:	Type of business:	Business phone:
<input type="checkbox"/> Check if you are a business owner or are self-employed. <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 (Cash Benefits)	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Housing voucher (e.g., Section 8)	\$	\$	\$	\$
Unemployment benefits	\$	\$	\$	\$
VA compensation	\$	\$	\$	\$
Retirement (e.g., pension)	\$	\$	\$	\$
Military entitlements	\$	\$	\$	\$
SNAP Food stamp amount	\$	\$	\$	\$
Other: _____	\$	\$	\$	\$
<b>Total</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.)		Current balance/ value/vested amount (if applicable)
401k Accounts		\$
Stocks/Bonds		\$
CD's		\$
Money Market Accounts		\$
Mutual Funds		\$
Treasury Bills		\$
Other		\$

### 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 Loans	\$	\$		\$	\$	
Lease (e.g., furniture, appliances — includes rent-to-own)	\$	\$		\$	\$	
Alimony/separate maintenance	\$	\$		\$	\$	
Child support	\$	\$		\$	\$	
Revolving (e.g., credit cards)	\$	\$		\$	\$	
Student loan debt	\$	\$		\$	\$	
Medical debt	\$	\$		\$	\$	
Credit Cards	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
<b>Total</b>	<b>\$</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? It must be discharged 2 years before HFHMO will consider the application. 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
i. How did you hear about Habitat MidOhio Friend/Family <input type="checkbox"/> Social Media <input type="checkbox"/> Flyer/Poster <input type="checkbox"/> Radio/TV <input type="checkbox"/> Current Habitat for Humanity homeowner <input type="checkbox"/> and their name _____		

**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 \_\_\_\_\_

## 14. UNMARRIED ADDENDUM

### FOR BORROWER SELECTING THE UNMARRIED STATUS

**Lender instructions for using the Unmarried Addendum:** The lender may use the Unmarried Addendum only when a borrower selected "Unmarried" in Section 1 and the information collected is necessary to determine how state property laws directly or indirectly affecting creditworthiness apply, including ensuring clear title. For example, the lender may use the Unmarried Addendum when the borrower resides in a state that recognizes civil unions, domestic partnerships or registered reciprocal beneficiary relationships or when the property is located in such a state. "State" means any state, the District of Columbia, the Commonwealth of Puerto Rico, or any territory or possession of the United States.

**If you selected "Unmarried" in Section 1:**

Is there a person who is not your legal spouse but who currently has real property rights similar to those of a legal spouse?  No  Yes

If YES, indicate the type of relationship and the state in which the relationship was formed. For example, indicate if you are in a civil union, domestic partnership, registered reciprocal beneficiary relationship, or other relationship recognized by the state in which you currently reside or where the property is located.

Civil union  Domestic partnership  Registered reciprocal beneficiary relationship

Other (explain): \_\_\_\_\_

State: \_\_\_\_\_

## Equal Credit Opportunity Act 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 East Central Region 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: \_\_\_\_\_

**Co-Applicant**

X \_\_\_\_\_

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

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

MONTHLY NET INCOME	
Applicant monthly net income	
Co-Applicant monthly netIncome	
Other Household Income	
<b>Total monthly Income</b>	

Super Budget Spreadsheet	
TOTAL MONTHLY Income	
TOTAL MONTHLY Expenses	
Available to Budget	

1. MONTHLY Debt Payments	
Student Loan	
Auto Loan	
Credit Card	
Child Support Payments	
Installment Loans	
Other	
<b>Total Debt Payments</b>	

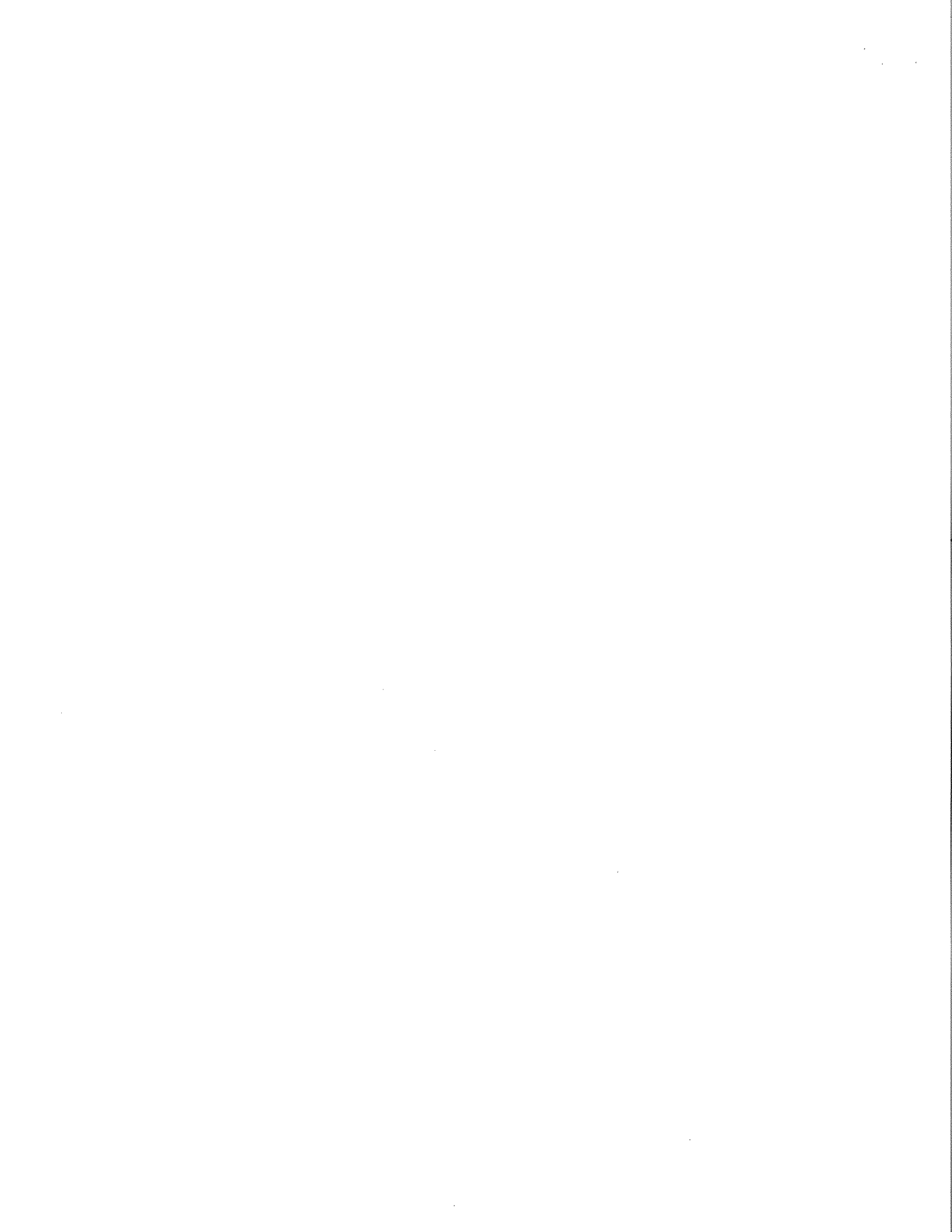
3. MONTHLY Variable Living Costs	
Groceries	
Fast Food	
Gas for Car	
Taxi, Tolls, and Parking	
Clothes	
Dry Cleaning	
Exercise / Gym	
Toiletries / Makeup	
Hair Cuts	
Childcare	
Pet Care	
Household Goods	
Other	
Other	
<b>Total Variable Living Costs</b>	

2. MONTHLY Bills and Utilities	
Home/Utilities	
Rent (if no mortgage)	
Electricity	
Natural Gas	
Water	
Phone (cell/landline)	
Internet/Cable/Satellite	
Other	
Other	
Insurance / Medical	
Automobile Insurance	
Life Insurance	
Disability Insurance	
Long Term Care	
Physician Copayments	
Prescriptions	
Other	
Give Back	
Charity	
Other	
<b>Total Bills and Utilities</b>	

4. MONTHLY Fun Money	
Personal Spending 1	
Personal Spending 2	
Entertainment	
Dates/Outings	
Movies / Music	
Hobbies	
Vacation	
Lessons / Education	
Memberships	
Subscriptions	
Christmas	
Gifts	
Other	
<b>Total Fun Money</b>	

APPLICANT NAME: \_\_\_\_\_





### 13. DEMOGRAPHIC INFORMATION

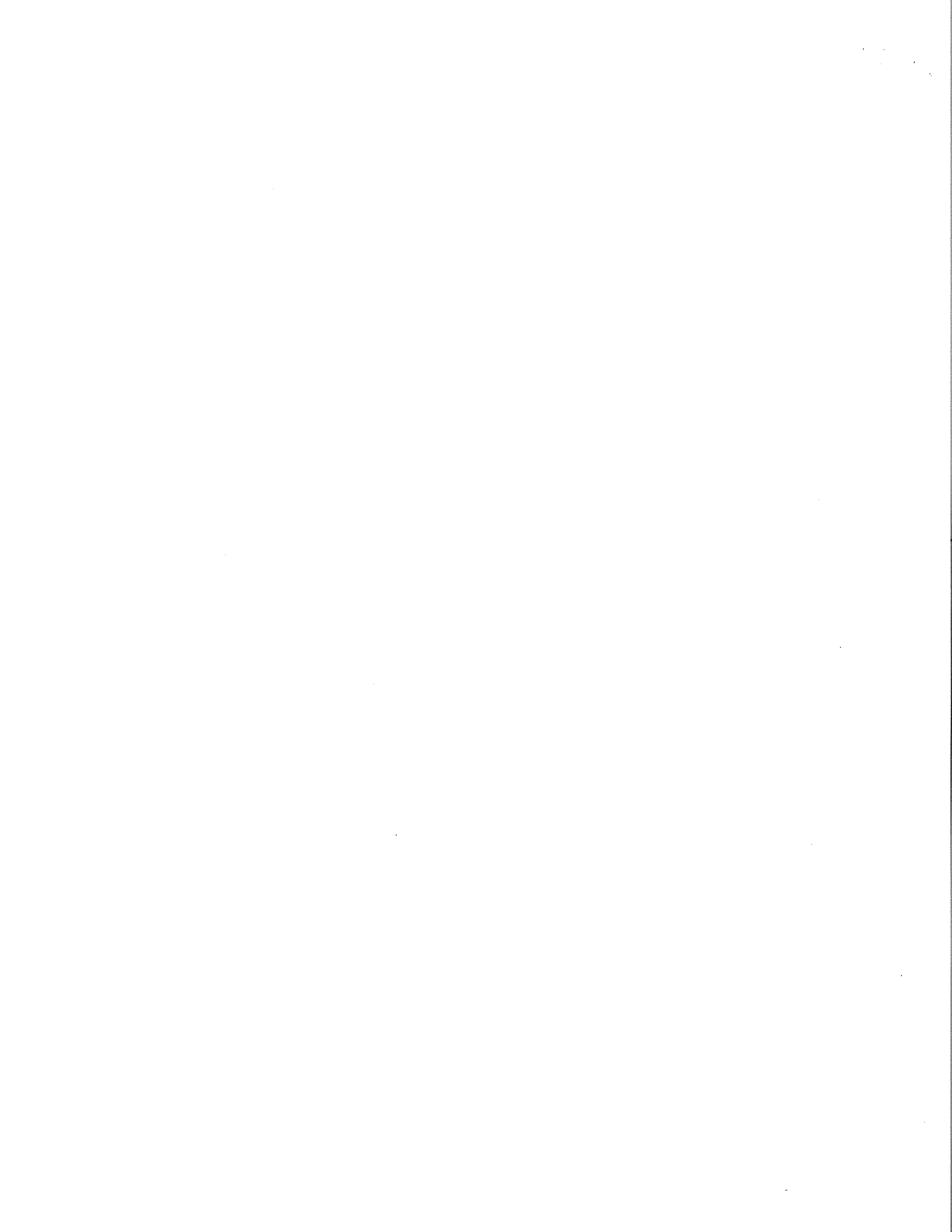
**PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW:**

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"/> 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"/> 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"/> 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 by the Person Conducting the Interview**

This application was taken by: <input type="checkbox"/> face-to-face interview <input checked="" type="checkbox"/> mail <input type="checkbox"/> telephone	
Interviewer's Name (print or type)	
<b>NO INTERVIEWER, APPLICATION COMPLETED SOLELY BY APPLICANT AND RETURNED TO HABITAT OFFICE FOR REVIEW</b>	
Interviewer's Signature NO INTERVIEWER AS STATED ABOVE, APPLICATIONS ARE NOT TAKEN BY INTERVIEW, BUT COMPLETED BY APPLICANT(S) AND RETURNED TO HABITAT OFFICE FOR REVIEW	Date
Interviewer's Phone Number <b>NON-APPLICABLE... THERE IS NO INTERVIEWER</b>	







CREDIT CHECK RELEASE

I, _____ Applicant Name (Please Print)	_____ Applicant Signature	_____ Social Security Number	
and _____ Co-Applicant Name (Please Print)	_____ Co-Applicant Signature	_____ Social Security Number	
and _____ Household member 18 years or older	_____ Signature	_____ Social Security Number	_____ Date of Birth
and _____ Household member 18 years or older	_____ Signature	_____ Social Security Number	_____ Date of Birth
and _____ Household member 18 years or older	_____ Signature	_____ Social Security Number	_____ Date of Birth
and _____ Household member 18 years or older	_____ Signature	_____ Social Security Number	_____ Date of Birth

Give my/our permission for Habitat for Humanity-MidOhio to do the following:

- 1) Access any credit checks, property title searches, public court records or any other information verifications that they deem appropriate as part of determination for qualification in the Habitat for Humanity-MidOhio program. By signing above on this release you are submitting to such inquiry.
- 2) Habitat for Humanity – MidOhio screens all applicant families and household members 18 years and older on the National Sex Offender Public Registry - www. <http://www.nsopw.gov>. By signing above on this release, you are submitting to such inquiry.
- 3) Habitat for Humanity – MidOhio screens all applicant and co-applicant on the Specially Designated Nationals and Blocked Persons (SDN) database. By signing above on this release, you are submitting to such inquiry.
- 4) Habitat for Humanity – MidOhio conducts a third party criminal background check on all applicant families and household members 18 years and older prior to the home visit. By signing above on this release, you are submitting to such inquiry.

5) Electronic Communication

Habitat MidOhio does not intend to disclose private information via this mode of communication and the affiliate is informing the applicant that the Affiliates email is not necessarily a secure network in case the applicant does send personal information electronically.

The applicant is giving HFHMO permission to communicate electronically at the following email address

\_\_\_\_\_ or cell phone number listed on

the application. Yes \_\_\_\_\_ No \_\_\_\_\_

**PLEASE COMPLETE BACK OF THIS SHEET!!!**





# EMPLOYMENT HISTORY SHEET

Habitat for Humanity – MidOhio requires if a wage earner - one year of steady income with a minimum of six months at current place of employment.

## APPLICANT

## CO-APPLICANT

### **Current Employment:**

### **Current Employment:**

Employer Name \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Telephone \_\_\_\_\_

Employer Telephone \_\_\_\_\_

Date of Hire \_\_\_\_\_

Date of Hire \_\_\_\_\_

Separation/Ending Date \_\_\_\_\_

Separation/Ending Date \_\_\_\_\_

Length of Employment \_\_\_\_\_

Length of Employment \_\_\_\_\_

### **Second Job (if applicable):**

### **Second Job (if applicable):**

Employer Name \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

Employer Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Employer/Supervisor Telephone \_\_\_\_\_

Employer/Supervisor Telephone \_\_\_\_\_

Date of Hire \_\_\_\_\_

Date of Hire \_\_\_\_\_

Separation/Ending Date \_\_\_\_\_

Separation/Ending Date \_\_\_\_\_

Length of Employment \_\_\_\_\_

Length of Employment \_\_\_\_\_

### **Previous Job (if at current job less than 1 year):**

### **Previous Job (if at current job less than 1 year):**

Employer Name \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Address \_\_\_\_\_

Employer Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Employer/Supervisor Telephone \_\_\_\_\_

Employer/Supervisor Telephone \_\_\_\_\_

Date of Hire \_\_\_\_\_

Date of Hire \_\_\_\_\_

Separation/Ending Date \_\_\_\_\_

Separation/Ending Date \_\_\_\_\_

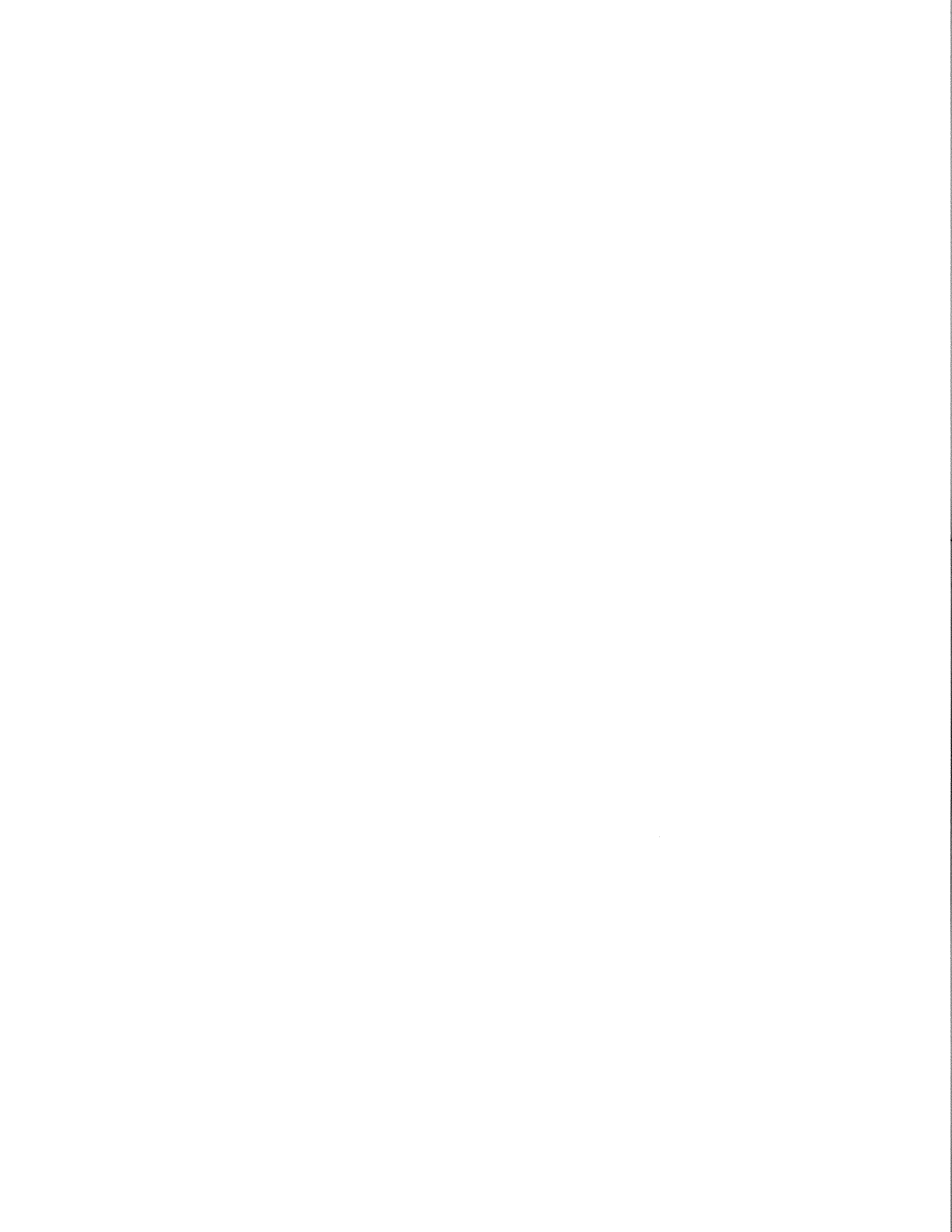
Length of Employment \_\_\_\_\_

Length of Employment \_\_\_\_\_

**Please Note.... If you work Uber, Lyft, Grubhub or any other delivery service we will need to see 3 months proof of income and a profit/loss statement for the current 2024 year.**









Landlord Name \_\_\_\_\_

Landlord Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

**AUTHORIZATION TO RELEASE INFORMATION AND LANDLORD REFERENCE FORM**  
**(Please give this form to your landlord)**

To Whom It May Concern:

The below-named person has applied for housing through the Habitat for Humanity – MidOhio homeownership program and has given us written permission to contact you for a landlord reference. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. Your prompt return of the requested information will be appreciated.

Applicant (Tenant) Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

**LANDLORD RESPONSE (To be filled out by the Landlord)**

- 1) Monthly Rent: \$ \_\_\_\_\_
- 2) Is rent subsidized Yes \_\_\_ No \_\_\_ If yes, what is their portion \_\_\_\_\_
- 3) Length of Lease: \_\_\_\_\_
- 4) Number of Bedrooms: \_\_\_\_\_
- 5) Timely Payments: \_\_\_\_\_
- 6) How does your tenant pay rent? Check  Money Order  Cash  Bank Debit
- 7) Length of Residency: \_\_\_\_\_
- 8) Would you rent to this tenant again? Yes \_\_\_\_\_ No \_\_\_\_\_
- 9) Tenant Responsible for Gas \_\_\_\_\_ Electric \_\_\_\_\_ Water \_\_\_\_\_
- 10) Comments: \_\_\_\_\_

Landlord Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**LANDLORD:**

**Please email, fax or Mail Completed Form within 15 Days to:**

**Habitat for Humanity-MidOhio**

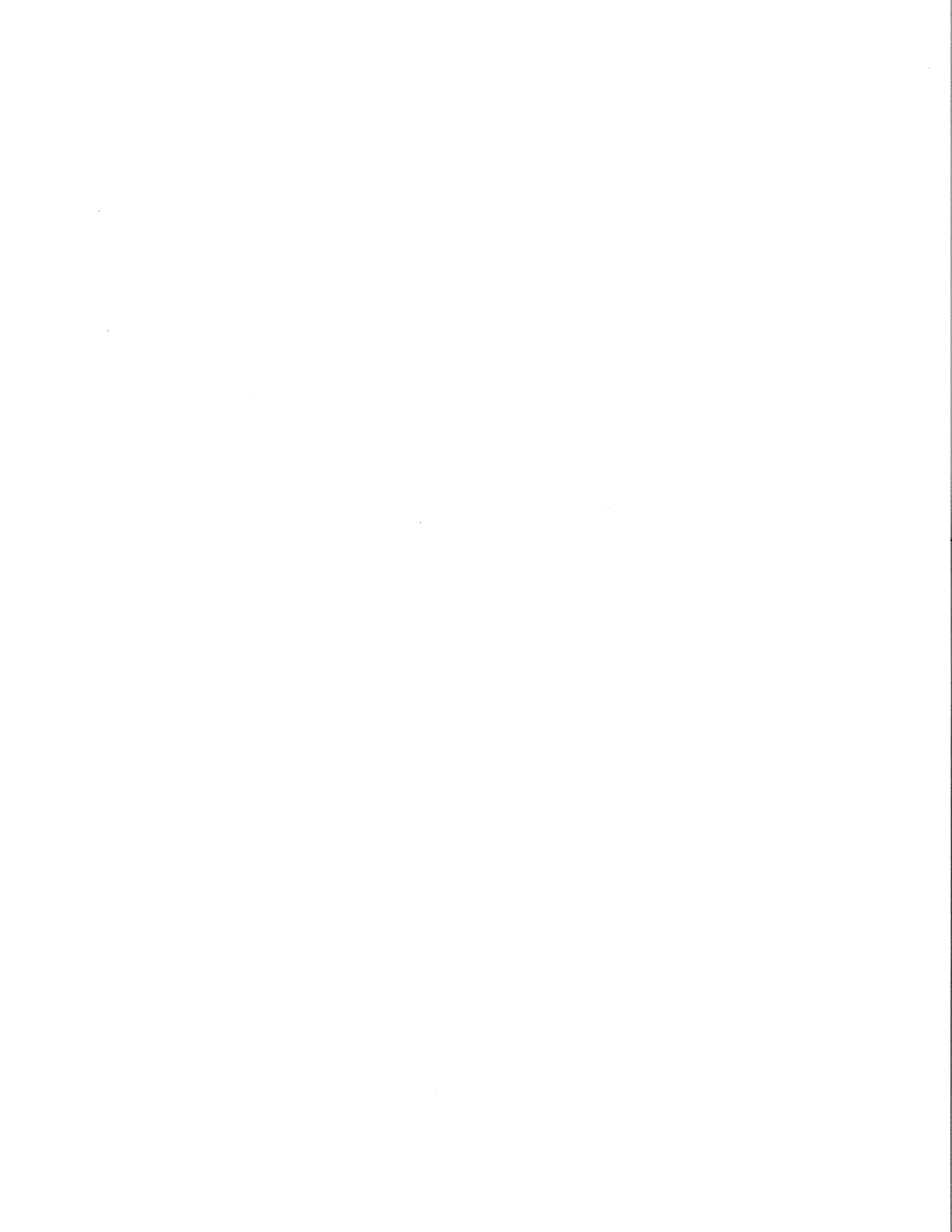
**6665 Busch Blvd. Columbus, OH 43229**

**Attn: Lisa Jones, Director, Homeowner Services**

**Phone: 614-364-7014 Fax: 614-753-4212**

**Email: [ljones@habitatmidohio.org](mailto:ljones@habitatmidohio.org)**







<b>FACTS</b>	<b>What Does Habitat for Humanity MidOhio Do With Your Personal Information?</b>
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<b>Why?</b>	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also required us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
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<b>What?</b>	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> <li>• Social Security Number and Income</li> <li>• credit history and checking account information</li> <li>• employment information and account balances</li> </ul>
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<b>How?</b>	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Habitat for Humanity MidOhio chooses to share; and whether you can limit this sharing.
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Reasons we can share your personal information	Does Habitat for Humanity MidOhio share?	Can you limit this sharing?
For our everyday business purposes -- such as to process your transactions, maintain your account(s), responds to court orders and legal investigations, or report to credit bureaus	Yes	We Don't Share
For our marketing purposes -- to offer our products and services to you	No	We Don't Share
For joint marketing with other financial companies	No	We Don't Share
For our affiliates' everyday business purposes -- information about your transactions and experiences	No	We Don't Share
For our affiliates' everyday business purposes -- information about your creditworthiness	No	We Don't Share
For our affiliates to market to you	No	We Don't Share
For nonaffiliates to market to you	No	We Don't Share

<b>To limit our sharing</b>	<ul style="list-style-type: none"> <li>• Call 614-422-4828</li> <li>• Visit us online: or</li> <li>• Mail the form below</li> </ul> <p><b>Please note:</b> If you are a new customer, we can begin sharing your information 30 days from the date we sent this notice. When you are no longer our customer, we continue to share your information as described in this notice. However, you can contact us at any time to limit our sharing.</p>
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<b>Questions?</b>	<ul style="list-style-type: none"> <li>• Call 614-422-4828</li> </ul>
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Habitat for Humanity – MidOhio employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

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

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

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

- ✓ Information we receive from you on applications or other forms, such as name, address, social security number, assets, debts, and income; and
- ✓ Information we receive from a consumer reporting agency such as your credit worthiness and credit history.

<b>Who we are</b>	
Who is providing this notice?	
<b>What we do</b>	
How does Habitat for Humanity MidOhio protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Habitat for Humanity MidOhio collect my personal information?	We collect your personal information, for example, when you <ul style="list-style-type: none"> <li>• apply for a loan or give us your income information</li> <li>• provide employment information or show your driver's license</li> <li>• pay your bills</li> </ul>
Why can't I limit all sharing?	Federal law gives you the right to limit only <ul style="list-style-type: none"> <li>• sharing for affiliates' everyday business purposes - information about your creditworthiness</li> <li>• affiliates from using your information to market to you</li> <li>• sharing for non-affiliates to market to you</li> </ul> State Laws and individual companies may give you additional rights to limit sharing.
<b>Definitions</b>	
<b>Affiliates</b>	Companies related by common ownership or control. They can be financial and nonfinancial companies.
<b>Nonaffiliates</b>	Companies not related by common ownership or control. They can be financial and nonfinancial companies.
<b>Joint marketing</b>	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.