



Instructions

Read all instructions carefully and complete the entire application. If you need assistance, please ask by contacting the Housing Coordinator;

Housing Coordinator

Eileen Dalton Housing Coordinator eileen@spshabitat.org 360-956-3456 x4

Submitting your application

You may only submit an application during an open application phase. Habitat will contact you when we begin accepting applications.

Incomplete applications will not be accepted, you may email the per-application or drop it off in person during business hours.

Completing your application

To complete this application, every section must be filled in if applicable, if it is not, please write "N/A" in place. Application must be filled out in black or blue ink only.

Background authorization forms must be completed and signed by any household member that is over the age of 10, no exceptions.





APPLICANT INFORMATION

Applicant		Co-Applicant			
Full Legal Name		Full Legal Name			
Other Names Used		Other Names Used			
Social Security Number		Social Security Number			
Date of Birth		Date of Birth			
Marital Status: ☐ Married ☐ Separated ☐ Unmarried (include single, divorced, widowed)		Marital Status: ☐ Ma☐ Unmarried (include s		ed)	
Resident Status: U.S. citizen Permanent resi	dent	Resident Status: ☐ U. ☐ Other (explain):		ent resident	
		Relationship to Applican	it		
Contact Information					
Applicant	3		Co-Applicant		
Home Phone		Home Phone			
Cell Phone		Cell Phone			
Email Address		Email Address			
Mailing Address		Mailing Address			
City State Zip		City	State	Zip	
Dependents / Other List the name of anyone wh					
Full Legal Name	Sex	Date of Birth	Relationship to Appli	cant	



Current Residence

Homeownership Pre-Application



HOUSING

ARTHUR BURYE	Applicant	THE REAL PROPERTY.	A CONTRACTOR	Co-Applicant	
Current Address			Current Addr		
City	State	Zip	City	Chaha	
		Ζίρ	City	State	Zip
Move-in month a	nd year:		Move-in mont	th and year:	
Number of bedro	oms:		Number of be	drooms:	
Number of bathro			Number of bat	throoms:	
Housing Type:	Single family home □	Mobile 🗆 Apartment		☐ Single family home ☐	Mobile Apartment
☐ Homeless ☐ □	Ouplex 🗆 Other:		☐ Homeless [☐ Duplex ☐ Other:	_ riparement
Rent payment:			Rent payment:		
Previous Residence	ce if less than 3 years in c	urrent address			
	Applicant	direit dudiess		Co-Applicant	
Previous Address			Previous Addr		
			. revious madri	C33	
City	State	Zip	City	State	Zip
Move-in month an	nd year:		Move-in month	n and year:	
Number of bedroo			Number of bed	rooms:	
Number of bathroo		96	Number of bath	nrooms:	
Housing Type:	Single family home N	1obile ☐ Apartment	Housing Type:	☐ Single family home ☐ N	Mobile ☐ Apartment
☐ Homeless ☐ Du	ıplex 🗆 Other:		☐ Homeless ☐	Duplex 🗆 Other:	
Rent payment:			Rent payment:		
Have you ever own	ned a home? ☐ Yes ☐ N	0			
If yes, when did you	u purchase your home?				
Have you or your fa	amily ever owned a Habi	tat home? Yes	lo		
If yes, when and wh	here was it located?				
Do you currently ov	wn your home? ☐ Yes ☐] No			
If yes, do you plan o	on selling your home if y	ou are selected to pur	chase a Habitat h	ome? ☐ Yes ☐ No	
Habitat Home					
If selected to purch:	ase a home from Habitat	t which stulp of b			
than one style of ho	ome, please indicate the	order of your preferer	would you prefer nce (i.e. which do	r? If you would like to be co you prefer first, second, et	onsidered for more c.)
Please also note: no	et all styles are available	each application phase	e. Ask staff for mo	ore information.	
□В	ungalow (single-story, tv	vo-bedroom, one-bath	n home)		
□ Co	ottage (two-story, three-	bedroom, one-bath h	ome)		
□н	ouse (two-story, four-be	droom, two-bath hom	ne)		





INCOME

List all income received by members of your household. You must include all household income. This may include income from work, public assistance like Social Security, retirement or pension funds, or any other source of income. All income requires documentation. If you need more space, attach a separate page.

Туре	Company / Agency	Whose Income?	Average Monthly Amount
		Tabl	
		Total	

If you receive income from employment, complete the following for the most recent *three years* of employment. If you need more space, attach a separate page. If you have a gap in employment, please attach a separate written statement explaining your gap in employment.

☐ Applicant☐ Co-Applicant	Posi	ition / Title	Start date	End date	Avg. monthly income
Company		Supervisor's name	Supervisor's phone	Reason for leaving	
☐ Applicant ☐ Co-Applicant	Posi	ition / Title	Start date	End date	Avg. monthly income
Company		Supervisor's name	Supervisor's phone	Reason for leaving	
☐ Applicant☐ Co-Applicant	Posi	tion / Title	Start date	End date	Avg. monthly income
Company		Supervisor's name	Supervisor's phone	Reason for leaving	
☐ Applicant☐ Co-Applicant	Posi	tion / Title	Start date	End date	Avg. monthly income
Company		Supervisor's name	Supervisor's phone	Reason for leaving	





DEBT

List all debt you (and co-applicant) currently owe. Debt includes any loan, credit account, accounts in collections, liens, or civil judgments. If you need more space, attach a separate page.

Type	Company	Unpaid Balance	Monthly Payment
		s apara sarance	Wientiny rayment
3			
			_
	Total		





WILLINGNESS TO PARTNER

To be considered for the program, you and your household must be willing to partner. Each adult in your household is considered a program participant who is required to complete program requirements. This includes applicants and any person over the age of 18 at the time of the application. Program requirements include involvement in the construction of Habitat homes, pre-purchase education, and community engagement activities such as attending Habitat events. This is what is called "sweat equity", each applicant must complete a total of 500 hours by the end of the program. Applicants are also required to contribute \$1,000.00 for closing costs.

Are you willing to partner?	Applicant	☐ Yes	□No			
	Co-Applicant	☐ Yes	□ No			
		DECLAR	ATIONS			
If you mark yes to any of the follo	wing questions, attac	h a separa	te written explanation for	each. We may requi	re a	dditional
documentation. For instance, if yo	ou have filed bankrup	tcy, we ma	y require your bankruptcy	filing and discharge	ord	er.
Have you or co-applicant declared	bankruptcy in the last	seven yea	rs?		/es	□No
Have you or co-applicant declared	bankruptcy in the last	two years	?		Yes	□No
Have you or co-applicant ever had an account sent to collection?					Yes	□No
Do you or co-applicant have any ac	counts currently in co	ollection?			Yes	□No
Have you or co-applicant have had	any property foreclos	sed on in th	ne last 10 years?		Yes	□ No
Do you or anyone in your household have any criminal history on record in the last 10 years?					Yes	□No
Have you or anyone in your household been arrested and/or charged with any crimes in the last two years?				st two years?	⁄es	□ No
Have you or anyone in your housel	nold been convicted o	f a felony?			Yes	□ No
Are you currently involved with any lawsuit, criminal or civil legal action?					⁄es	□ No
The following questions do not re-	quire additional expla	nation or	documentation at this time	·.		
Has anyone in your household ever Air Force, National Guard, Coast Gu enlistments, reserves, and includes	uard, or other branch	of the U.S.	military. This includes shor	Army, Navy, t and long	⁄es	□No
Have you applied for a Habitat hon	ne in the past?				⁄es	□ No
If you have applied in the past, who	en did you apply (mor	ith and yea	r)?			
If you receive income from child su exclude it from our underwriting a				u like us to	⁄es	□No





Background Check Authorization Form

A background check is required for all applicant(s) or house hold members over the age of 10. If there are more than one

I, give South Puget Sound Habitat for	
Humanity permission to run a State Patrol Request for Criminal History for myself or my minor child, named:	
1. Are you presently charged with, but not convicted of, a crime? (Exclude civil infractions, such as minor traffic citations.) If yes, include an explanation of the nature of the charge, place, date, and court.	
2. Have you ever been convicted of a crime? (The term "convicted" means all adverse dispositions, including a finding of guilty, a plea of guilty or nolo contendere, an Alford plea, a stipulation to the facts, a deferred or suspended sentence, or a deferred prosecution. Exclude civil infractions, such as minor traffic citations.) If yes, include an explanation of the nature of the crime, pladate, and court.	
3. Have you ever been (a) found by a court in a protection proceeding under Chapter 74.34 to have abused or financially exploite vulnerable adult or (b) convicted of any of the following crimes where the victim was a vulnerable adult: (Vulnerable adult means adult as defined by Chapter 74.34 and adults of any age who lack the functional, mental, or physical ability to care for themselves yes, explain below. • First, second, or third degree extortion • Forgery • First second or third degree theft • Any of the foregoing crimes as they may have been renamed • First or second degree robbery	S
4. Have you ever been convicted of any crime involving the manufacture, delivery, or possession with intent to manufacture or deliver a controlled substance? If yes, explain below.	
5. Have you ever been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor chave physically abused any minor? If yes, explain below.	or to
6. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploit any minor, or to have physically abused any minor? If yes, explain below.	ted





Signature of authorized guardian if form is for a minor
Printed Name:
Signature: Date
An inquiry may be made to the Washington State Patrol, a Federal, or other Law enforcement agency to verify your responses to the above inquiries. A copy of any response received pursuant to such inquiry will be made available to you upon request. I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.
13. Please list all other names or alias (maiden names) that you have used in the past.
12. Are you presently charged with, but not convicted of, any of the crimes or offenses described in questions described above?
11. Have you ever been named by an aggrieved employee as someone responsible for the action grieved? If yes, explain below.
9. Have you ever been a party to, or are you currently a party in, or do you anticipate becoming a party in, litigation? If yes, explain below.
8. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any licensing, certification, or other regulatory body (teacher certification or otherwise) or by your current or any previous employer? If you answer yes, you must provide the name, address and telephone number of the employer or licensing body and statement of the accusation against you. If yes, explain below.
7. Have you ever been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person, or to have abused or financially exploited any vulnerable adult? "Disciplinary board final decision means (a) any final decision issued by the director of the Department of Licensing for real estate brokers and salespersons and (b) any final decision issued by a disciplinary authority under Chapter 18.130 RCW or the secretary of the Department of Health for the following businesses or professions: chiropractic, dentistry, dental hygiene, naturopathy, message, midwifery, osteopathic medicine and surgery, physical therapy, physicians, practical nursing, registered nursing, and psychology. If yes, explain below.