

PATH TO HOMEOWNERSHIP

Proudly Serving Cape May County

APPLICATION PROCESS

Initial Application



Orientation Meeting



Application Processing and Background Checks





Consideration for Approval

Need

You will be considered for a Habitat home if your present housing is not adequate and if you are unable to obtain adequate housing through other conventional means. Lack of adequate housing may include problems with the present structure such as water, electrical or sewage service systems, heating system, or the failure to meet city property maintenance standards. Also taken into consideration are the number, the ages, and the sex of children compared to the number of bedrooms in your home.

The percentage of your monthly income that you currently spend on housing is considered when determining need. You will be required to openly and fully discuss your financial situation during this process.

Ability to Pay

Since you will be buying your home from Habitat, you must demonstrate your ability to pay the monthly mortgage payment. This payment will include not only the mortgage payment, but the payment for property taxes and insurance. We will help you to determine if this payment will jeopardize your ability to meet all your other family's financial obligations and expenses. We can also help you if you need to develop a budget to determine your eligibility.

Family Size - Gross Annual Income Minimum				
Family of	Minimum	Maximum		
3	\$34,507	\$56,074		
4	\$38,342	\$62,305		
5	\$41,409	\$67,289		
6	\$44,476	\$72,274		

Willingness to Partner

If selected, you become a partner family with Habitat. As a partner family, you must complete a minimum of 300 hours of volunteer work or sweat equity. Sweat equity includes helping with the construction of your home and the homes of others. Sweat equity may also be earned by volunteering at the ReStore or with the administrative office. Because the bulk of sweat equity will be completed after moving in, a \$500 refundable acceptance fee is required and returned upon completion of sweat equity.

Please Return Completed Form to:

Mail:

Habitat for Humanity Cape May County Attention: Homeowner Services 20 Court House S Dennis Rd Cape May Court House, NJ 08210

In Person By Appointment:

Habitat for Humanity ReStore 20 Court House S Dennis Rd Cape May Court House, NJ 08210

Email:

homeownerservices@habitatcapemay.org



In accordance with the Fair Housing Act, Habitat for Humanity Cape May County does not discriminate against any person in the sale, rental, advertising or financing of housing on the basis of race, sex, color, age, handicap, religion, family status, national origin, source of income, or exercise of rights under the Consumer Credit Protection Act. Additionally, in accepting and rejecting applications, Habitat for Humanity Cape May County must conform to all aspects of the Fair Housing Act and all Fair Housing Laws, the Equal Credit Opportunity Act, the Fair Credit Reporting Act, the Privacy Act, the Americans with Disabilities Act, as well as any local applicable laws as they apply to applications for a mortgage



PRE-SCREENING APPLICATIONS WILL BE ACCEPTED UNTIL THIS HOUSE IS SOLD

Please provide the following information for a quick and confidential financial review. All fields must be completed on pages 1 and 2 for your interest form to be processed.

Last Name:	First Name:	Middle Name:
D.O.B:	Age:	Social Security Number:
Address:		
City:	State:	ZipCode:
Email:	HomePhone:	CellPhone:
Marital Status: Married S	separated Unmarried (includes: single, divord	ced, widowed)
How many people living in the ho	ousehold?	
Income Information:		
How long have you been at your	r current job? Are yo	ou employed full-time, part-time or seasonal?_
How many hours per week do yo	ou work?What is your hourly wa	age or salary?
List other sources of income. Ex	amples include SSI, Disability, Pension, and/or Child	d Support:
What is your total monthly incom	ne from all sources?	
Have you lived or worked in Cap	e May County for more than 12 months? (check one	e):No Yes
	e May County for more than 12 months? (check one check one): Yes No How did you hear	
Do you currently own a home? (o		rabout our program?
Do you currently own a home? (o	check one): Yes No How did you hear	about our program?e)
Do you currently own a home? (c	check one): Yes No How did you hear t household member who will be living in the hous First Name:	e) Middle Name:
Do you currently own a home? (c CO-APPLICANT (or other adult Last Name: D.O.B:	check one): Yes No How did you hear t household member who will be living in the hous First Name:	r about our program? e) Middle Name: Social Security Number:
Do you currently own a home? (c CO-APPLICANT (or other adult Last Name: D.O.B:	check one): Yes	r about our program? e) Middle Name: Social Security Number:
Do you currently own a home? (c CO-APPLICANT (or other adult) Last Name: D.O.B: Address:	check one): Yes	r about our program? e) Middle Name: Social Security Number:
Do you currently own a home? (cell CO-APPLICANT (or other adult Last Name:	check one): Yes	e) Middle Name: Social Security Number: ZipCode: CellPhone:
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Do you currently own a home? (cell CO-APPLICANT (or other adult) Last Name: D.O.B: Address: City: Email: Marital Status: Married S Income Information: How long have you been at your How many hours per week do you	check one): Yes No How did you hear t household member who will be living in the hous First Name: Age: HomePhone: Geparated Unmarried (includes: single, divorded) Truncation of the company of the household you hear Household member who will be living in the household you hear First Name: Age: Age: Age: Are you	e) Middle Name: Social Security Number: ZipCode: CellPhone: ced, widowed) Du employed full-time, part-time or seasonal?
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Do you currently own a home? (cell CO-APPLICANT (or other adult) Last Name: D.O.B: Address: City: Email: Marital Status: Married S Income Information: How long have you been at your How many hours per week do you List other sources of income. Ex	check one): Yes No How did you hear t household member who will be living in the hous First Name: Age: HomePhone: Geparated Unmarried (includes: single, divorce on work? What is your hourly was	e) Middle Name: Social Security Number: ZipCode: CellPhone: ced, widowed) Du employed full-time, part-time or seasonal? age or salary? Support:

Do you currently own a home? (check one): Yes No How did you hear about our program?



AUTHORIZATION TO RELEASE INFORMATION

This preliminary application will be evaluated for income verification, credit check, and debt-to-income ratio to evaluate mortgage readiness. Based on the results of the preliminary screening, those who meet the initial criteria will be required to submit a complete application.

I/we hereby authorize Habitat for Humanity Cape May County and Consumer Credit and Budget Counseling to order a consumer credit report to verify credit information, including past and present mortgage and lender references. It is understood that a photocopy of this form will serve as authorization.

It is further understood that I have the opportunity to discuss information about my credit history, financial situation, employment, and other information with a representative of a financial institution or agency that may assist me in credit counseling. I understand that information about my personal circumstances will be treated as confidential.

I also understand that all applicants who advance in the application process will be screened for the criminal background check and sex offender list.

I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied and that even if I have already been selected to complete a full application, 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 Cape May even if the application is not approved.

Applicant Signature	_Date
Co-Applicant Signature	_Date
Current Address	
Current Address	