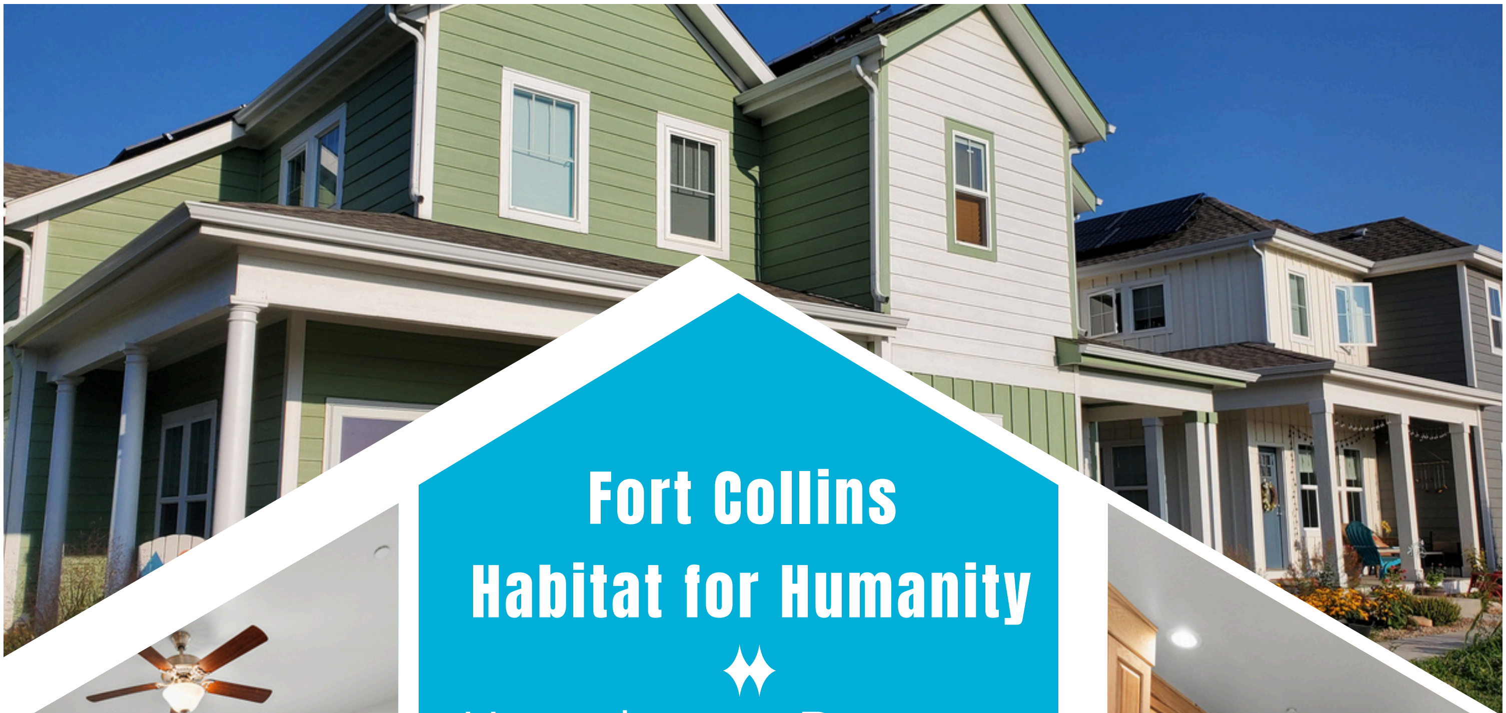
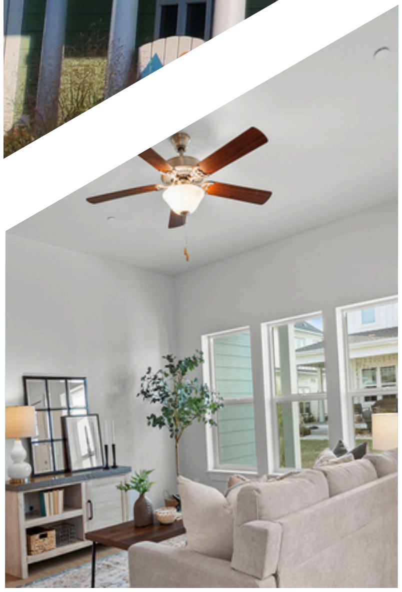
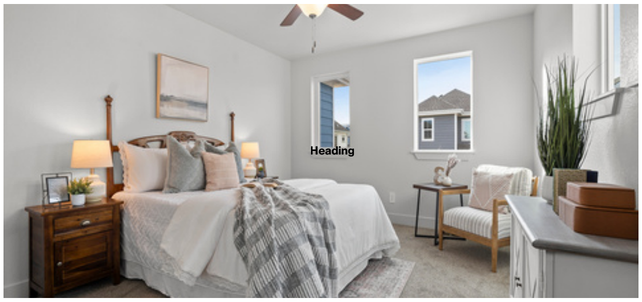
HOME IS *where your story begins*



Fort Collins Habitat for Humanity

Homebuyer Program Application





APPLICATIONS AVAILABLE SEPTEMBER 1 - 30, 2026

Fort Collins Habitat for Humanity is a nonprofit, ecumenical Christian housing ministry and an affiliate of Habitat for Humanity International. We build houses in partnership with qualifying households, giving them hope to rise above discouraging, ever-increasing housing costs by partnering with them as they build and purchase their own Habitat home. Habitat provides an affordable loan with an affordable monthly mortgage payment while our homebuyers save a down payment and contribute a minimum of 200 hours of “sweat equity” helping to build their Habitat home and those of their neighbors in addition to participating in homebuyer education classes and attending Habitat events. This grassroots effort is made possible through the generous donations of funding, materials, and labor from members of the Fort Collins community.

This packet includes instructions, a checklist, an application for our homebuyer program, and supplemental documents. It can be an intensive process to complete all of the forms and gather all of the required documentation so **expect to devote a few days to a week or more to this process**. Pay particular attention to dates and deadlines listed and use the checklist to guide you and to ensure your success.

Questions?

970-488-2610

homeownerservies@fortcollinshabitat.org

Fort Collins Habitat for Humanity®

FORT COLLINS HABITAT FOR HUMANITY
HOMEOWNERSHIP APPLICATION PACKET

STEP

1. DETERMINE ELIGIBILITY

To be eligible for homeownership through Habitat for Humanity, the following must apply:

- You live or work in Fort Collins or our surrounding service area.
- Your current shelter is inadequate, substandard, subsidized, rent burdened, temporary,
- transitional, etc.
- You are willing to work 200 "sweat equity" hours per adult applicant toward the building of your own home and other Habitat homes.
- You will save $1,500 toward closing costs.
- Your household's total monthly GROSS income meets the following guidelines *(Minimum program income shown below. Additional minimum income requirements may apply based on home price, neighborhood, and household size.):*

Number of Persons in Household	Annual Income (before taxes taken out)	Monthly Income (before taxes taken out)
1	$41,085 to $73,050	$3,424 to $6,088
2	$46,980 to $83,450	$3,915 to $6,954
3	$52,830 to $93,900	$4,403 to $7,825
4	$58,680 to $104,300	$4,890 to $8,692
5	$63,405 to $112,650	$5,284 to $9,388
6	$68,050 to $121,000	$5,671 to $9,871
7	$72,765 to $129,350	$6,064 to $10,779
8	$77,490 to $137,700	$6,458 to $11,475

2026/27

STEP

2. COMPLETE ONLINE ORIENTATION & QUIZ

Each individual applicant must watch the online orientation and take online quiz linked though our website *www.fortcollinshabitat.org*, **BEFORE 5 p.m. WEDNESDAY, SEPTEMBER 30, 2026.** **As of 5 p.m. Wednesday, September 30, 2026, the orientation and quiz will no longer be available.** Without completing the Orientation and passing the quiz, you will not be eligible to apply.

STEP

3. RETURN APPLICATIONS BY APPOINTMENT ONLY

Completed applications and all documentation must be returned **IN PERSON** by all applicants. Beginning **OCTOBER 1 and up until OCTOBER 9 @ 5 p.m.**, you may schedule an appointment to return your application on one of the following days: **OCTOBER 12, 13, 14, 15, 2026.**
No appointment requests will be accepted after 5 p.m. Friday, October 9, 2026

- To schedule an appointment, email ***homeownerservices@fortcollinshabitat.org***
- Appointments should take about 60 minutes.
- There will be a **$43-PER-APPLICANT credit check fee** due at the time of appointment.
- All of the material provided by you will become property of Fort Collins Habitat for Humanity and **WILL NOT** be returned to you.

My Habitat Checklist

Applicant 1	Applicant 2	PLEASE DETACH THIS PAGE AND USE THE CHECK BOXES ON THE LEFT TO MAKE SURE DOCUMENTS ARE RETURNED FOR BOTH APPLICANT AND CO APPLICANT IN THE ORDER THEY ARE LISTED BELOW.
		1. APPLICATION AND CHECKLIST
☐	☐	← **Program Application**, completed and signed by each applicant (pages 3-11 in packet)
☐	☐	← **My Habitat Checklist** (THIS form, page 2), completed and signed by each applicant
		2. RESIDENCY, ID, AND CITIZENSHIP (FOR EACH ADULT APPLICANT)
☐	☐	← **Proof of Idenity - BRING ORIGINAL** Driver's License, Colorado ID Card, or US Passport to be copied
☐	☐	← **Proof of Citizenship - BRING ORIGINAL** U.S. Passport, valid Green Card, Certificate of Naturalization, or U.S. birth certificate
☐	☐	← **Social Security Card - BRING ORIGINAL** social security cards to be copied
		3. EMPLOYMENT AND INCOME INFORMATION
☐	☐	← COPIES of most recent 6 months of **paystubs** (for every household member 18 and older)
☐	☐	← COPIES of **last paystub of 2025** and **first paystub of 2026**
☐	☐	← **Verification of Employment Form** for each job held by each applicant in the past 2 years. To be completed by employer ONLY (page 12 in packet)
☐	☐	**DOCUMENTATION OF ALL NON-EMPLOYMENT INCONE:**
☐	☐	← Proof of **alimony** and **child support** (please include Child/Alimony Support Orders AND Family Support Registry Report)
☐	☐	← **Statement of Disability Income for any household member, ALL PAGES** (if applicable)
☐	☐	← **Statement of Social Security Income for any household member, ALL PAGES** (if applicable)
		4. FINANCIAL INFORMATION
☐	☐	← COPIES of **2023, 2024 and 2025 Federal Tax Returns SIGNED** (forms 1040 or 1040 EZ)
☐	☐	← COPIES of **2023, 2024 AND 2025 W-2s or 1099 for ALL income sources**
☐	☐	**Self-employment** requires 2 years minimum employment history and the following documents:
		☐ ← Previous 3 years Federal Tax returns, including Schedule C and all other applicable schedules ☐ ← Financial statements (balance sheets and income sheets). **NOTE**: These financials should be generated by a third-party, i.e., accountant, CPA, etc.
☐	☐	← COPIES of **complete bank statements (ALL pages even if blank)** for each account listed on application for the most recent 6 months
☐	☐	← COPIES of **statements for any retirement or investment accounts (ALL pages even if blank)** for the most recent 3 months
☐	☐	← COPIES of **CURRENT** month's statement for all **student loans**
		5. RENTAL INFORMATION
☐	☐	← **Verification of Rental History Form** (bottom to be completed by landlord ONLY (page 13 in packet))
☐	☐	← COPY of current **Lease Agreement**
☐	☐	← COPIES of last **4 months utility bills** (city utility bills, xcel, etc.)
		6. OTHER
☐	☐	← If within the past 7 years, **COPY of divorce decree** (if applicable)
☐	☐	← If within the past 7 years, **COPY of bankruptcy papers** with dated discharge letter and/or foreclosure documents (if applicable)
☐	☐	← **Affidavit and Release of Information**, completed and signed (pages 14 and 15 in packet)
☐	☐	←Equal Credit Opportunity Act Notice (page 16 in packet)
☐	☐	← **$43 PER APPLICANT Credit Check Fee** (to be paid at application appointment). **CASH OR CREDIT/DEBIT CARD ONLY**

Please sign and date below:

Applicant #1 Name

Signature **Date**

Applicant #2 Name

Signature **Date**

QUESTIONS? PLEASE CALL 970-488-2610 TO SPEAK WITH OUR HOMEOWNER SERVICES DEPARTMENT

Fort Collins Habitat for Humanity®

Equal Housing Opportunity Statement: 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.

EQUAL HOUSING OPPORTUNITY

Fort Collins Habitat for Humanity®

Application
Habitat Homeownership Program

EQUAL HOUSING OPPORTUNITY

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.

Based on the information given in the Orientation video and on Fort Collins Habitat for Humanity's website, please rank your preferences for the 3 available neighborhoods from 1 to 3 with 1 being your most prefered choice, 2 being your 2nd prefered choice, and 3 being your least prefered choice. *Please know that while we will give consideration to each applicants neighborhood preference, there is no guarantee that you would be assigned a home in your prefered neighborhood.*

_____ **Heartside Hill** _____ **Bloom** _____ **Wellington**

1A. APPLICANT INFORMATION

Applicant 1	**Applicant 2**
Applicant name	**Applicant name**
Phone number Birth Date Age	Phone number Birth Date Age
Email address:	Email address:
☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed, etc.)	☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed, etc.)
Dependents and others who will live with you (not listed by applicant 2)	**Dependents** and others who will live with you (not listed by applicant1)

Name	**Birth Date**	**Male**	**Female**	**Name**	**Birth Date**	**Male**	**Female**
____________	________	☐	☐	____________	________	☐	☐
____________	________	☐	☐	____________	________	☐	☐
____________	________	☐	☐	____________	________	☐	☐
____________	________	☐	☐	____________	________	☐	☐
____________	________	☐	☐	____________	________	☐	☐

Present address (street, city, state, ZIP code) ☐ Own ☐ Rent Number of Years_______	**Present address (street, city, state, ZIP code)** ☐ Own ☐ Rent 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 (street, city, state, ZIP code) ☐ Own ☐ Rent Number of Years ___________	**Previous address (street, city, state, ZIP code)** ☐ Own ☐ Rent Number of Years ___________

Have you applied with Habitat before? ☐ **No** ☐ **Yes** **If so, when?** ________________

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

Date received: ____________________	Date of 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 program, you and your household must be willing to complete a certain number of "sweat-equity" hours. Your help in building your home and the homes of others is called "sweat-equity," and may include clearing the lot, painting, helping with construction, working in the Habitat office or ReStore, attending homeownership classes, or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:

	Yes	No
Applicant 1:	☐	☐
Applicant 2:	☐	☐

3. PRESENT HOUSING CONDITIONS

Number of bedrooms (please circle) **1 2 3 4 5**

Currently, are you: ☐ Renting ☐ Rent-free ☐ Own

Other rooms in the place where you are currently living:

☐ Kitchen ☐ Bathroom ☐ Living Room ☐ Dining Room ☐ Other (please describe) ______________________________

____

If you rent your residence, what is your monthly rent payment? $____________/ month

Name, address and phone number of current landlord:____

In the space below, describe the condition of the house or apartment where you live.

4. PROPERTY INFORMATION

☐ I (we) do not own any real estate (move on to Section 5).

If you own your residence, what is your monthly mortgage payment? $________________/ month

Unpaid balance $ ________________________

Do you own land? ☐ No ☐ Yes

Monthly payment $ _______________

Unpaid balance $ ________________________

5. EMPLOYMENT INFORMATION

Applicant 1		**Applicant 2**	
☐ Does not apply.		☐ Does not apply.	
Name and address of **CURRENT** employer	Years on job:	Name and address of **CURRENT** employer	Years on job:
	Start date (mm/dd/yyyy):		Start date (mm/dd/yyyy):
	Monthly (gross) wages $		Monthly (gross) wages $
Position/Title	Business phone	Position/Title	Business phone

If working at current job less than TWO years, complete the following information			
Name and address of **PREVIOUS** employer	Years on job:	Name and address of **PREVIOUS** employer	Years on job:
	Monthly (gross) wages $		Monthly (gross) wages $
Start date (mm/dd/yyyy): / End date (mm/dd/yyyy):		Start date (mm/dd/yyyy): / End date (mm/dd/yyyy):	
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 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 1	Applicant 2	Others in household	Total
Salary/Wages (gross)	$	$	$	$
Alimony	$	$	$	$
Child Support	$	$	$	$
Social Security	$	$	$	$
SSI	$	$	$	$
Disability	$	$	$	$
VA compensation	$	$	$	$
Retirement (e.g., pension)	$	$	$	$
Military entitlements	$	$	$	$
Other:	$	$	$	$
TOTAL	**$**	**$**	**$**	**$**

Household members whose income is listed as "Others" above			
Name	**Income source**	**Monthly income**	**Date of birth**

7. SOURCE OF CLOSING COSTS

How do you plan to save your $1,500 in closing costs?

8. ASSETS (Checking/Savings/Investment/Retirement/Pension Accounts)

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 1			Applicant 2		
Type	**Monthly payment**	**Unpaid balance**	**Months left to pay**	**Monthly payment**	**Unpaid balance**	**Months left to pay**
Auto loan	$	$		$	$	
Installment (e.g., personal loan)	$	$		$	$	
Lease (e.g. furniture, appliance - includes rent-to-own)	$	$		$	$	
Alimony/separate maintenance	$	$		$	$	
Child support	$	$		$	$	
Revolving (e.g. credit card)	$	$		$	$	
Revolving (e.g. credit card)	$	$		$	$	
Medical Debt	$	$		$	$	
Student loans	$	$		$	$	
Other	$	$		$	$	
Other	$	$		$	$	
TOTAL	**$**	**$**		**$**	**$**	

MONTHLY EXPENSES

Expense	Applicant 1	Applicant 2	Total
Rent	$	$	$
Utilities (electricity, water, gas)	$	$	$
Insurance (rental, car, health, etc.)	$	$	$
Child care	$	$	$
Internet service	$	$	$
Cell phones	$	$	$
Food and essential supplies	$	$	$
Business expenses	$	$	$
Entertainment	$	$	$
Other (specify):	$	$	$
Other (specify):	$	$	$
TOTAL	**$**	**$**	**$**

10. DECLARATIONS

Please check the box that best answers the following questions for applicant 1 and applicant 2.

	Applicant 1		Applicant 2	
a. Are there any outstanding judgments because of a court decision against you?	☐ Yes	☐ No	☐ Yes	☐ No
b. Have you been declared bankrupt 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 property foreclosed on 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. Are you paying alimony or child support?	☐ Yes	☐ No	☐ Yes	☐ No
f. Have you ever been convicted of a felony?	☐ Yes	☐ No	☐ Yes	☐ No
g. Are you a US citizen or a Permanent Legal Resident?	☐ Yes	☐ No	☐ Yes	☐ No
h. 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
i. Are you a co-signer or guarantor on any debt of loan that is not disclosed on this application?	☐ Yes	☐ No	☐ Yes	☐ No

If you answered **"yes"** to any question **a** through **f,** or **"no"** to question **g**, please explain on a separate piece of paper.

By signing this form, I (we) testify to the following:

- ☐ I (we) currently live or work in the Fort Collins Habitat for Humanity service area.
- ☐ I (we) meet the income requirements as stated on page 1.
- ☐ I (we) have not filed bankruptcy in the past two years and any bankruptcy has been discharged at least 2 years prior to application.
- ☐ I (we) have not owned a home within the past three years (this does not include mobile homes).
- ☐ I (we) understand that I (we) will be required to save $1,500 toward closing costs.
- ☐ I (we) understand the sweat-equity requirements as explained in the Online Applicant Orientation.
- ☐ I (we) understand that I (we) will be subjected to a credit history check.
- ☐ I (we) understand that I (we) will be subjected to a criminal background check and a sex offender registry check.
- ☐ I (we) have completed the Online Applicant Orientation and the mandatory Quiz.

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 1 signature	**Date**	**Applicant 2 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. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close.

Applicant 1 signature ______________________ **Applicant 2 signature** ______________________

13. DEOMOGRAPHIC 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 1 NAME

Ethnicity: *Check one or more*

☐ Hispanic or Latino

☐ Mexican ☐ Puerto Rican ☐ Cuban

☐ Other Hispanic or Latino - *Print origin:* ______________________

For example: Argentinian, Columbian, Dominican, Nicaraguan, Salvadorian, Spaniard, and so on.

☐ Not Hispanic or Latino

☐ 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 - *Print name of enrolled or principal tribe:*______________________________

☐ Asian

☐ Asian Indian ☐ Chinese ☐ Filipino

☐ Japanese ☐ Korean ☐ Vietnamese

☐ Other Asian - Print race:______________________

for example: Kmong, Laotian, Thai, Pakistani, Cambodian, and so on.

☐ Black or African American

☐ Native Hawaiian or Other Pacific Islander

☐ Native Hawaiian ☐ Samoan ☐ Guamanian or Chamorro

☐ Other Pacific Islander - *Print race:*

____

For example: Fijian, Tongan, and so on.

☐ White

☐ I do not wish to provide this information

APPLICANT 2 NAME

Ethnicity: *Check one or more*

☐ Hispanic or Latino

☐ Mexican ☐ Puerto Rican ☐ Cuban

☐ Other Hispanic or Latino - *Print origin:* ______________________

For example: Argentinian, Columbian, Dominican, Nicaraguan, Salvadorian, Spaniard, and so on.

☐ Not Hispanic or Latino

☐ 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 - *Print name of enrolled or principal tribe:*______________________________

☐ Asian

☐ Asian Indian ☐ Chinese ☐ Filipino

☐ Japanese ☐ Korean ☐ Vietnamese

☐ Other Asian - Print race:______________________

for example: Kmong, Laotian, Thai, Pakistani, Cambodian, and so on.

☐ Black or African American

☐ Native Hawaiian or Other Pacific Islander

☐ Native Hawaiian ☐ Samoan ☐ Guamanian or Chamorro

☐ Other Pacific Islander - *Print race:*

____

For example: Fijian, Tongan, and so on.

☐ White

☐ I do not wish to provide this information

To be completed by Financial Institution (*for application taken in person*):

Was the ethnicity of the Borrower collected on the basis of visual observation or surname?	○ NO	○ YES
Was the sex of the Borrower collected on the basis of visual observation or surname?	○ NO	○ YES
Was the race of the Borrower collected on the basis of visual observation or surname?	○ NO	○ YES

The demographic Information was provided through:

○ Face-to-Face interview (includes electronic media w/ video component) ○ Telephone Interview ○ Fax or mail ○ Email or Internet

ADDITIONAL APPLICATION QUESTIONS

Tax Returns

1. How does your name appear on your last 2 years of tax returns?

   Applicant 1: ____

   Applicant 2: ____

   What names have you used in the past 7 years (maiden/former/alias other) ________________

   ____

2. What is the address on your most recently filed tax returns?

   Applicant 1: ____

   Applicant 2: ____

   What addresses have you used in the past 7 years? Indicate B (Applicant 1) or C (Applicant 2)

   ____

   ____

3. If married, how did you file on your last 2 years of tax returns?

   Jointly Separately

4. Did you write off un-reimbursed business expenses (Form 2106) on your last 2 years of tax returns?

   Applicant 1: Yes No Applicant 2: Yes No

5. Does your last year's tax return have any additional business income or loss other than what you have already disclosed (Sole Proprietorship, LLC Partnership, Sub Chapter or Corporation)?

   Applicant 1: Yes No Applicant 2: Yes No

   If yes, explain: ____

Employment

6. Do you have an ownership interest in your place of employment?

   Applicant 1: Yes No Applicant 2: Yes No

   If yes, indicate percentage of ownership: ____________ %

7. Are you related to your employer?

Applicant 1: Yes No Applicant 2: Yes No

Assets

8. Do you have any other assets you have not disclosed on your application?

Applicant 1: Yes No Applicant 2: Yes No

If yes, indicate: 401K Trust Funds

IRA Valuable Personal Property

Savings Mobile home

Other: (explain) ____

Liabilities

9. Do you have any loans or debts being deducted from your paycheck?

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain:____

10. Have you acquired any new debt within the last 30 days?

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain: ____

11. Do you have any additional loans or debts not reported on your credit report?

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain:____

Real Estate

12. Do you own vacant land or any other real estate property?

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain:____

13. Do you own a timeshare?

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain: ____

14. Are you on title to any property with or without another person regardless of financial liability? (Trust, Partnership, LLC, Inheritance, etc.?)

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain: ____

15. Have you co-signed on a mortgage?

Applicant 1: Yes No Applicant 2: Yes No

If yes, explain: ____

Signatures:

Applicant 1 ____

Date________________________

Applicant 2 ____

Date________________________

HABITAT CONTACT :
Homeowner Services Department
970-488-2610
homeownerservices@fortcollinshabitat.org

EMPLOYMENT VERIFICATION

Date of request: ____________________

TO: (NAME AND ADDRESS OF EMPLOYER)	**REGARDING:** (NAME AND ADDRESS OF EMPLOYEE)

I authorize the release of the following information to Fort Collins Habitat for Humanity for use in determining eligibility for the Habitat homeownership program.

____ ____________________________
Signature of Applicant/Employee Date

THIS SECTION TO BE COMPLETED BY EMPLOYER ONLY

Company Name: ____________________________________ Type of Business: ____

Applicant's Date of Employment: ______________________ Present Position: ____

Presently Employed: Yes ____ No ____ Probability of Continued Employment: _______________________

Current **Gross** Base Pay (Enter **Amount** and Check **Period)**				Please answer all questions
$______________ ☐ Annually ☐ Monthly ☐ Weekly ☐ Hourly ☐ Other (Specify):				If Overtime or Bonus is Applicable, Is Its Continuance Likely? Overtime ☐ Yes ☐ No ☐ N/A Bonus ☐ Yes ☐ No ☐ N/A
Gross Earnings				If paid hourly – average hours per week
	Year to Date Thru__/__/20__	Past Year 20___	Past Year 20___	
Base Pay	$	$	$	Date of and amount of applicant's last pay increase
Overtime	$	$	$	
Commissions/ Tips	$	$	$	List any anticipated change in the employee's rate of pay within the next 12 months
Bonus	$	$	$	
Total	$	$	$	
Additional Remarks:				

_________________________________ _______________________________ ___________________________
Employer's Signature Title Date

_________________________________ _______________________________ ___________________________
Employer's Printed Name Email Address Phone Number

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. ***The completed form is to be transmitted directly to Fort Collins Habitat for Humanity (email preferred) and is not to be transmitted through the applicant or any other party.***

HABITAT CONTACT :
Homeowner Services Department
970-488-2610
homeownerservices@fortcollinshabitat.org

RENTAL HISTORY VERIFICATION

Tenant(s) name ___________________________________ Date of request _____________

Property Address ___________________________________

City, state, ZIP ____________________________________

I (we) authorize the release of the following information to Fort Collins Habitat for Humanity, Inc. for use in determining eligibility for the Habitat homeownership program.

_________________________________ _________________________________ _________________

Tenant signature **Tenant signature** **Date**

NOTE: FOR LANDLORD'S OFFICE USE ONLY – TENANT, PLEASE DO NOT WRITE BELOW THIS LINE.
(Fill out top of form, sign, date and give to your landlord)

****

To whom it may concern:

The above-named person(s) has applied for housing through Fort Collins Habitat for Humanity. By signing above and personally requesting this information, they consent to its release and its use in determining their qualification for our program. All information will be kept confidential in conjunction with the Gramm-Leach-Bliley Act. We would appreciate your help in answering the following questions. Thank you for your assistance.

Sincerely,

Fort Collins Habitat for Humanity

THE FOLLOWING INFORMATION TO BE COMPLETED BY LANDLORD **ONLY**

Landlord/management company name: ____

Company address: _________________________________ City, state, ZIP: ____

Tenant Name(s) _____________________________________ **Property Address** ______________________________________

1. Rental period (give dates): From _____________ to _____________
2. Current monthly rent: $____________
3. Was rent paid on time (circle one)? YES NO Number of times late in last 12 months: _________
4. Were any checks returned as NSF (circle one)? YES NO If yes, number of NSF checks: ________
5. If vacated, was the unit left in good condition (circle one)? YES NO TENANT STILL LIVING THERE
6. Are you the owner of the property (circle one)? YES NO
7. Are you related to the tenants (circle one)? YES NO
8. Were the tenants renting a room or the entire property? ____
9. Overall rating as tenant (circle one)? EXCELLENT SATISFACTORY UNSATISFACTORY
10. Would you rent to them again (circle one)? YES NO If no, please explain: ____________________________________
11. If former tenant, did you return full security deposit? ____________ If no, please explain: ___________________________

    ____

Name of person filling out form: ____ Title: ___________________________

Signature: _______________________________________ Date: _______________ Phone: _________________________

AFFIDAVIT AND RELEASE OF INFORMATION

Fair Credit Reporting Act Disclosure and Authorization

As an applicant for housing through Fort Collins Habitat for Humanity, you are a consumer with rights under the Fair Credit Reporting Act. For determining your qualification for this housing program, Fort Collins Habitat for Humanity may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you.

Disclosure Regarding Background Report

Fort Collins Habitat for Humanity may obtain from Sterling Infosystems, Inc. ("STERLING"), 1 State Street, New York, NY 10004, (877) 424-2457, www.sterlinginfosystems.com, a consumer report and/or an investigative consumer report ("REPORT") that contains background information about you in connection with your program application. If you are selected, to the extent permitted by law, Fort Collins Habitat for Humanity may obtain from STERLING further reports without providing further disclosure or obtaining additional consent.

The REPORT may contain information about your character, general reputation, personal characteristics and mode of living. The REPORT may include, but is not limited to, credit reports and credit history information; criminal and other public records and history; public court records (e.g., bankruptcies, tax liens and judgments); motor vehicle and driving records; educational and employment history, including professional disciplinary actions; drug/alcohol test results; and Social Security verification and address history, subject to any limitations imposed by applicable federal and state law. This information may be obtained from public record and private sources, including credit bureaus, government agencies and judicial records, former employers and educational institutions, and other sources.

If an investigative consumer REPORT is obtained, in addition to the description above, the nature and scope of any such REPORT will be employment verifications and references, or personal references.

Authorization to Obtain Background Report

I have read the Disclosure Regarding Background Report provided by Fort Collins Habitat for Humanity and this Authorization to Obtain Background Report. By my signature on the next page, and the subsequent SSA Release, I hereby consent to the preparation by Sterling Infosystems, Inc. ("STERLING"), a consumer reporting agency located at 1 State Street, New York NY 10004, (877) 424-2457, www.sterlinginfosystems.com, of background reports regarding me and the release of such reports to Fort Collins Habitat for Humanity and its designated representatives, to assist Fort Collins Habitat for Humanity in making a decision involving me at any time after receipt of this authorization to the extent permitted by law. To this end, I hereby authorize, without reservation, any state or federal law enforcement agency or court, educational institution, motor vehicle record agency, credit bureau or other information service bureau or data repository, or employer to furnish any and all information regarding me to STERLING and/or the COMPANY itself and authorize STERLING to provide such information to the COMPANY. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

PLEASE READ EACH STATEMENT CAREFULLY BEFORE INITIALING AND SIGNING

____________I (we) acknowledge receipt of a copy of the EQUAL CREDIT OPPORTUNITY ACT NOTICE, which describes the terms of the Special Purpose Credit Program offered.

____________I (we) acknowledge receipt of a copy of the MORTGAGE FRAUD IS INVESTIGATED BY THE FBI notification. Providing false, misleading, or the omission of information is a crime. Please keep for your records

____________I (we) acknowledge receipt of the RIGHT TO RECEIVE APPRAISAL disclosure. One is signed, one is for your records.

AFFIDAVIT AND RELEASE OF INFORMATION

PLEASE READ EACH STATEMENT CAREFULLY BEFORE INITIALING AND SIGNING

____________I (we) acknowledge receipt of a copy of the Consumer Financial Protection Bureau's "A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT."

____________I (we) authorize Fort Collins Habitat for Humanity to conduct a CREDIT HISTORY CHECK for both Applicant and Co-Applicant. All information will be kept strictly confidential.

____________I (we) authorize Fort Collins Habitat for Humanity to conduct an extensive and thorough BACKGROUND HISTORY CHECK for every household member 18 and older. All information will be kept strictly confidential.

____________I (we) authorize Fort Collins Habitat for Humanity to conduct a search on the SEX OFFENDER REGISTRY for every household member 18 years of age and older. All information will be kept strictly confidential.

____________I (we) authorize any person, school, CURRENT AND PAST EMPLOYERS, CURRENT AND PAST LANDLORDS, law enforcement authorities, and organizations named in this application to provide and release any information and opinions concerning our background. I (we) release such persons and organizations from any legal liability for any damage whatsoever for making such statements.

____________I (we) authorize Fort Collins Habitat for Humanity and/or any of its agents to verify and investigate any or all statements contained in this application.

____________I (we) understand that this application does not create a contract for housing.

____________I (we) further certify that I (we) have read and understand the instructions, conditions and other information provided in this document.

Applicant 1 Authorization

By signing below, I ______________________________________, hereby voluntarily agree to the statements above and authorize Fort Collins Habitat for Humanity to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my qualification for housing with Fort Collins Habitat for Humanity. I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed on the previous page and the last page of this packet.

Date of Birth_____________ Signature____ Date _____________________

Applicant 2 (or household member 18 or older) Authorization

By signing below, I ______________________________________, hereby voluntarily agree to the statements above and authorize Fort Collins Habitat for Humanity to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my qualification for housing with Fort Collins Habitat for Humanity. I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed on the previous page and the last page of this packet.

Date of Birth_____________ Signature____Date_______________

(Please copy and fill out this form for any additional household members 18 years of age and older.)

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 FTC Regional Office for the Western region, Los Angeles, California 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) Signature(s):

X ______________________________________ X ______________________________________

Print name: ______________________________ Print name: ______________________________

Date: ___________________________________ Date: ___________________________________

Fort Collins Habitat for Humanity®

Building Hope and Homes… One Family at a Time.

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave., N.W., Washington, D.C. 20580.

A Summary of Your Rights under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of our major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

    - a person has taken adverse action against you because of information in your credit report:
    - you are the victim of identity theft and place a fraud alert in your file;
    - your file contains inaccurate information as a result of fraud;
    - you are on public assistance;
    - you are unemployed but expect to apply for employment within 60 days.

    In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need—usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. Fore more information, go to www.ftc.gov/credit.

- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit . **States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

Type of Business:	**Contact:**
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National Banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center 2345 Grand Ave, Ste 100 Kansas City, Missouri 64108-2638
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator-GIPSA Washington, DC 20250 202-720-7051