



Habitat for Humanity[®]

of Warren County

APPLICATION TO BECOME A PARTNER FAMILY

Please complete this form to the best of your abilities. You will be applying for the Clarendon house on Railroad Street. Applications are due to Habitat by May 31st. If you have any questions, contact Habitat at (814) 688-8671 or info@habitatwarrenpa.org. Instructions on how to submit this application are on the last page of the application.

Information sessions will be held twice for your convenience, we recommend you attend one:

Warren Public Library
205 Market Street, Warren
Thursday, May 5, 2016
5:30PM to 7:30PM

Northwest Community Room
305 Second Avenue, Warren
Saturday, May 21st, 2016
10:00AM to noon

You are applying to be a Partner Family of Habitat for Humanity of Warren County. In order to be selected, you must be willing to partner with us by completing a total of 200 hours of community service, known as "Sweat Equity." 100 of those hours must be completed by you and members of the future household. You must also fall into income guidelines of 25 to 60% of Warren County's median income. You must also attend homeownership education courses as directed by Habitat for Humanity of Warren County. You will be responsible for purchasing the home from us in the form of an interest-free mortgage. You will not receive a free house from us. If you understand these terms, please continue filling out this application.

SECTION 1: HOUSEHOLD MEMBERS

APPLICANT A

NAME (FIRST, MIDDLE, LAST)	BIRTHDATE (MM/DD/YYYY)
MARITAL STATUS CHECK ONE BOX	<input type="checkbox"/> UNMARRIED <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED

APPLICANT B

NAME (FIRST, MIDDLE, LAST)	BIRTHDATE (MM/DD/YYYY)
MARITAL STATUS CHECK ONE BOX	<input type="checkbox"/> UNMARRIED <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED

PLEASE LIST ALL OTHERS WHO WOULD LIVE WITH YOU

NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)
NAME (FIRST, LAST)	RELATIONSHIP	BIRTHDATE (MM/DD/YYYY)

SECTION 2: CURRENT LIVING CONDITIONS

PLEASE PROVIDE AT LEAST 2 YEARS OF ADDRESS HISTORY

CURRENT STREET ADDRESS CITY STATE ZIP LIVED HERE SINCE

PREVIOUS ADDRESS CITY STATE ZIP LIVED HERE FROM / TO

PREVIOUS ADDRESS CITY STATE ZIP LIVED HERE FROM / TO

PREVIOUS ADDRESS CITY STATE ZIP LIVED HERE FROM / TO

DOES YOUR CURRENT HOME HAVE:

RUNNING WATER LEAKING ROOF OVERCROWDING (3+ TO A BEDROOM)

UNSAFE / UNSANITARY CONDITIONS (IF SO, PLEASE EXPLAIN)

OTHER SPECIAL CIRCUMSTANCES (IF SO, PLEASE EXPLAIN)

DO YOU CURRENTLY OWN THE HOUSE?

DO YOU CURRENTLY RENT THE HOUSE?

IF RENTING, PLEASE PROVIDE:

LANDLORD NAME (FIRST, LAST)

() - _____
LANDLORD PHONE NUMBER

END OF PAGE, PLEASE CONTINUE ->

SECTION 3: INCOME

APPLICANT A

CURRENT PRIMARY EMPLOYER NAME

EMPLOYER PHONE NUMBER

\$ _____
TYPICAL GROSS PAYCHECK AMOUNT

HOW OFTEN DO YOU GET PAID?

CURRENT ADDITIONAL EMPLOYER NAME

EMPLOYER PHONE NUMBER

\$ _____
TYPICAL GROSS PAYCHECK AMOUNT

HOW OFTEN DO YOU GET PAID?

PLEASE LIST ALL DEBTS. EXAMPLES: CREDIT CARDS, CAR LOANS, STUDENT LOANS, FURNITURE LOANS,
MEDICAL EXPENSES, ETC. AND YOUR APPROXIMATE MONTHLY PAYMENT

APPLICANT B

CURRENT PRIMARY EMPLOYER NAME

EMPLOYER PHONE NUMBER

\$ _____
TYPICAL GROSS PAYCHECK AMOUNT

HOW OFTEN DO YOU GET PAID?

CURRENT ADDITIONAL EMPLOYER NAME

EMPLOYER PHONE NUMBER

\$ _____
TYPICAL GROSS PAYCHECK AMOUNT

HOW OFTEN DO YOU GET PAID?

PLEASE LIST ALL DEBTS. EXAMPLES: CREDIT CARDS, CAR LOANS, STUDENT LOANS, FURNITURE LOANS,
MEDICAL EXPENSES, ETC. AND YOUR APPROXIMATE MONTHLY PAYMENT

SECTION 4: WILLINGNESS TO PARTNER

Please provide at least two ways for us to contact you. If you provide a phone number, please ensure it has voicemail set up.

() -
CURRENT PHONE NUMBER

CURRENT EMAIL ADDRESS

CURRENT MAILING ADDRESS (IF DIFFERENT THAN ABOVE) CITY STATE

ZIP

Selected homeowners will be required to perform 200 hours of "sweat equity," such as construction on Habitat projects, aiding with Habitat fund development, or any other Habitat-related activity with assistance as needed. Your signature(s) below acknowledge(s) this requirement.

APPLICANT A SIGNATURE TODAY'S DATE

APPLICANT B SIGNATURE TODAY'S DATE

Selected homeowners will be required to attend Habitat's educational programs. Examples include but are not limited to budget counseling and general household management. Your signature(s) below acknowledge(s) this requirement.

APPLICANT A SIGNATURE TODAY'S DATE

APPLICANT B SIGNATURE TODAY'S DATE

All potential homeowners will be required to have criminal background and sex offender registry checks. Your signature(s) below acknowledge(s) this requirement.

APPLICANT A SIGNATURE TODAY'S DATE

APPLICANT B SIGNATURE TODAY'S DATE

When this form is completed, please submit this application by May 31st, 2016 by either:

Mail To: HABITAT FOR HUMANITY OF WARREN COUNTY Email To: INFO@HABITATWARRENPA.ORG
PO BOX 1473
WARREN, PA 16365

OFFICE USE ONLY DATE RECEIVED:
APPLICATION COMPLETE?
MISSING INFORMATION: DATE LETTER SENT: