



2630 US 23 South
 Alpena, MI 49707
 (989) 354-5555

Serving Alcona, Alpena, Montmorency, Oscoda, and Presque Isle Counties

Homeownership Program

Program Qualifications

Habitat for Humanity Northeast Michigan (HFHNEMI) Homeownership Program is made up of 2 divisions:

Homeownership and Financial Counseling through Habitat Michigan. Each division is a self-help program where Habitat for Humanity of Michigan provides you with counseling and the tools necessary to become better prepared for homeownership. All applicants will be sent to the financial counseling program through Habitat for Humanity of Michigan which is designed to address and clear those issues that prevent you from homeownership.

Sweat Equity – It is our goal that you contribute 250 hours per adult of volunteer work, called sweat equity, with at least 65 hours being on the construction site.

Education – You will be required to participate in a series of online workshops hosted by Habitat for Humanity. Topics covered include, but are not limited to home maintenance, personal finance, and budgeting. Certificates will be needed once you complete the workshop.

Savings – You may be required to save and contribute at least \$1,000 towards the purchase of a house, should you complete the program.

Below are the current guidelines for stable gross annual income (before taxes). If you are not sure if your income meets these guidelines, we strongly encourage you to submit your application for us to review and decide:

Income Guidelines – AMI 30%-120%		
Family Size	Lower Limit	Higher Limit
One	\$17,600	\$70,320
Two	\$20,100	\$80,280
Three	\$22,600	\$90,360
Four	\$25,100	\$100,320
Five	\$27,150	\$108,360
Six	\$29,150	\$116,400
Seven	\$31,150	\$124,440
Eight	\$33,150	\$132,480

*Gross means before deductions

R5/2026

Application and Intake

Please fill out the HFHNEMI Homeownership Program Application and Habitat for Humanity of Michigan Homeownership Services Intake Packet as completely and accurately as possible.

All information you include on these applications will be kept confidential per the Gramm-Leach-Bliley Act, Fair Housing Act. It's Your Right!

Have questions about the details of the program? Visit www.habitatnemi.org or contact the Homeownership Program Coordinator at (989) 340-0819 or email at jennifer.nestell@habitatnemi.org.

The following documentation is needed to complete your application.

- 2 Month pay stubs for all adults.
- 2 Most recent Federal Tax Return for all adults. (2 years if self-employed)
- 3 Months of Bank Statements
- Friend of the Court Determination for child support income or payments. **(if applicable)**
- Benefit Statement Letter from the State of Michigan of SSI/SSD. **(if applicable)**

Last Month's Debt Statements

- Credit Cards
- Loans (car/medical/boat etc.)

Financial Counseling through Habitat Michigan

Habitat for Humanity of Michigan (HFHM) is a US Department of Housing and Urban Development (HUD) approved housing counseling agency. HFHM employs certified housing counselors and financial coaches who educate, counsel, and coach Michigan consumers that want to improve their financial and/or housing situation. HFHM staff members also walk along with people as they remove barriers and pursue their home ownership goals.

All Michigan residents are welcome to engage in the financial and housing education programs we offer.

These programs and services include:

- Financial Management and Budget Individual Counseling and Group Education
- Pre-Purchase Home Buyer Group Education and Individual Counseling
- Post-Purchase Services - Home Improvement, Foreclosure Avoidance, Non-Delinquent Services
- Fair Housing Services and Predatory Lending Avoidance - Rental housing & homelessness services, referrals, and information
- Connections with local lenders and Habitat for Humanity offices



Habitat Homeownership Program

Serving Alcona, Alpena, Montmorency, Oscoda, and Presque Isle Counties
2630 US 23 S., Alpena, MI 49707 ~ Phone: (989) 354-5555

Dear Applicant,

Thank you so much for your interest in our housing program. Please mail or drop off your completed application packet to:



Jennifer Nestell
Homeownership Program Coordinator

(989) 340-0819
2630 US 23 S.
Alpena, MI 49707

jennifer.nestell@habitatnemi.org

Or scan and email to:

We are unable to assist with immediate housing needs.

If your housing needs are immediate, Habitat for Humanity may not be the best option at this time. We would be happy to provide other community resources for you to contact if your situation is of a critical nature.



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 administers compliance with this law concerning this creditor is the Consumer Financial Protection Bureau, 1700 G St. NW, Washington, DC 20552.



1. Review Program

- Review and understand the homeownership program by talking with Homeownership Services staff, attending an information session or reading the application cover letter.
- Learn if partnering with Habitat on your journey to homeownership is right for you

2. Submit an Application

We only accept fully completed applications with all required documentation

NOTE: Habitat's policy is for applicants to apply for our program, not a specific home or address.



3. Be Accepted into our Homeownership Program

- Demonstrate financial readiness
- Demonstrate a need for housing
- Show commitment to partnership program and completing sweat equity
- Sign a partnership agreement with Habitat



4. Partnership

- Receive home offer after completing 50 hours of sweat equity
- Complete additional 150-200 hours of sweat equity
- Ability to save \$1,000 toward down payment
- Complete homebuyer education courses



7. Congratulations!

Finalize the purchase at your closing and get the keys to your house!



6. Prepare for Closing

- Purchase homeowner's insurance
- Attend walk through of your home
- Work with staff to plan house dedication service



5. Qualify for a Mortgage

- Work with a Habitat lending partner to complete mortgage paperwork
- Continue to maintain income level and credit score





Habitat for Humanity Northeast Michigan
 2630 US 23 South
 Alpena, MI 49707
 (989) 354-5555
 www.habitatnemi.org

Application

Habitat Homeownership Program



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 Northeast Michigan Homeownership Program truthfully, completely and accurately. All information you include on this application will be kept confidential in accordance with our privacy policy.

1. APPLICANT INFORMATION

Applicant	Co-applicant																																																
Applicant's name _____ Alternative and former names: _____ _____	Co-Applicant's name _____ Alternative and former names: _____ _____																																																
Social Security number (required) _____ Phone _____ Work Phone _____ Age _____ Date of Birth (mm/dd/yyyy) _____ <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship)(Fill out Section 14)	Social Security number (required) _____ Phone _____ Work Phone _____ Age _____ Date of Birth (mm/dd/yyyy) _____ <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship)(Fill out Section 14)																																																
Dependents and others who will live in your household (not listed by co-applicant) <table border="0" style="width: 100%;"> <thead> <tr> <th style="width: 25%;">Name</th> <th style="width: 10%;">Age</th> <th style="width: 10%;">Male</th> <th style="width: 10%;">Female</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </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"/>	Dependents and others who will live in your household (not listed by applicant) <table border="0" style="width: 100%;"> <thead> <tr> <th style="width: 25%;">Name</th> <th style="width: 10%;">Age</th> <th style="width: 10%;">Male</th> <th style="width: 10%;">Female</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>_____</td><td>_____</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </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 _____ _____ Number of Years _____	Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of Years _____																																																
If you have lived at your present address for less than two years, complete the following:																																																	
Last address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of Years _____	Last address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of Years _____																																																

For assistance with completing this application, please contact Homeownership Coordinator at (989) 340-0819

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date received: _____	Date of adverse action letter: _____
Date of notice of incomplete application letter: _____	Date of board approval: _____
Date of notice of incomplete application 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

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

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

Other (please describe) _____

In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat home?

If you rent your current residence, please supply a copy of your lease and a copy of the most recent money order receipt, bank statement or cancelled rent check to evidence rent payment

Name, address and phone number of current landlord: _____

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.)
 \$ _____

If you wish your property to be considered for building your Habitat home, please attach the deed, any existing appraisal and information about any liens. Note: A separate approval process will apply with respect to any such requests, as each parcel of land is unique and may not be suitable for building on through the Habitat program.

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)
	Annual (gross wages)		Annual (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:	Years on this job:	Name and address of PREVIOUS employer:	Years on this job:
	Annual (gross wages)		Annual (gross wages)
Type of Business	Business Phone	Type of Business	Business Phone

6. MONTHLY INCOME

Income Source	Applicant	Co-applicant	Others in household	Total
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Veteran Pension	\$	\$	\$	\$
Work Pension	\$	\$	\$	\$
Wages	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Temporary Assistance for Needy Families (TANF)	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

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 members 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?

8. ASSETS

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 DOES THE APPLICANT AND CO-APPLICANT OWE MONEY?

Account	Applicant			Co-applicant		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Auto Loan	\$	\$		\$	\$	
Installment (e.g. boat, personal loan)	\$	\$		\$	\$	
Rent-to-Own (e.g. furniture, appliances, TV, etc.)	\$	\$		\$	\$	
Alimony/separate maintenance	\$	\$		\$	\$	
Child Support	\$	\$		\$	\$	
Credit Card	\$	\$		\$	\$	
Credit Card	\$	\$		\$	\$	
Student Loan Debt	\$	\$		\$	\$	
Medical Debt	\$	\$		\$	\$	
Other: _____	\$	\$		\$	\$	
Other: _____	\$	\$		\$	\$	
TOTAL	\$	\$		\$	\$	

MONTHLY EXPENSES

Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities (electricity, water, gas)	\$	\$	\$
Insurance (rental, car, health, etc.)	\$	\$	\$
Child Care	\$	\$	\$
Internet Services	\$	\$	\$
Phone Services (cell and landline)	\$	\$	\$
Business expenses (including union dues & memberships)	\$	\$	\$
Transportation expense (gas, bus pass, vehicle upkeep, etc.)	\$	\$	\$
Food and essential supplies	\$	\$	\$

Entertainment	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Total	\$	\$	\$

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 judgements 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? 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 property foreclosed on or deed in lieu of foreclosure in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you a 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 or 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

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 – PLEASE READ CAREFULLY

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 Name: _____ **Co-applicant's 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
<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: _____ / _____ / _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed) <input type="checkbox"/> Single parent	<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: _____ / _____ / _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed) <input type="checkbox"/> Single parent

To be completed only by the person conducting the interview		
Was the ethnicity of the Borrower collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the sex of the Borrower collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the race of the Borrower collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
This application was taken by: <input type="checkbox"/> Face-to-face interview (including electronic media w/video component) <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	Interviewer's name (print or type) Interviewer's signature	Interviewer's phone number Date

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 FTC Regional Office for the East Central Region, 1111 Superior Avenue, Suite 200, Cleveland, Ohio 44114-2507 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:

Co-Applicant

X _____

X _____

Print name: _____

Print name: _____

Date: _____

Date: _____



Thank you so much for your interest in Habitat for Humanity! We are so glad you are here. Our hope is that the path toward homeownership will be an informative, smooth and engaging partnership together. We look forward to getting started! Our first step is to have you fill out and submit the following Intake Packet.

As you get started on this path toward homeownership, what service areas are you most interested in? Please check any of the following:

- Financial Coaching (*interested in purchasing a home, want to become stable with finances to pursue life goals*)
- Foreclosure Avoidance Counseling
- Rental Counseling
- Homeless Avoidance Counseling
- Individual HomeBuyer Education Class (*already working with a lender and a realtor*)
- Group HomeBuyer Education Class (*thinking about home ownership and have questions*)
- Financial Management Education Class
- Rural Development Loan Program
- Homeowner Services Counseling (*already a homeowner, but not behind on mortgage*)

INTAKE FORM

PERSONAL INFORMATION:

Applicant Name: _____ Today's Date: _____

Co Applicant Name: _____ Relationship to Appl: _____

Address: _____

City: _____ Zip: _____ County: _____

Phone Number: _____ Home Cell Work

Other Contact Number: _____ Home Cell Work

Email address: _____ Household Language: _____

Were you referred by someone? Yes No

If yes, Name and Phone Number: _____

Are you interested in Financial Coaching? Yes No

Are you interested in Home Ownership? Yes No

Are you currently working with a local Habitat Office? Yes No

If yes, Habitat Office, Contact Name and Phone Number: _____

Applicant Marital Status: Married Single Separated Divorced

MILITARY SERVICE: (please check)

Applicant is a veteran Applicant is Active Military

Co-Applicant is a veteran Co-Applicant is Active Military

RACE OF APPLICANT: (please check)

American Indian/Alaskan Native

Asian

Black/African American

Native Hawaiian/Pacific Islander

White

Multi-Racial

Choose not to respond

RACE OF CO-APPLICANT: (please check)

American Indian/Alaskan Native

Asian

Black/African American

Native Hawaiian/Pacific Islander

White

Multi-Racial

Choose not to respond

EDUCATION INFORMATION: (for statistical purposes only; check all that apply)

Applicant Education:

High School Diploma/ GED Yes No

Associate's Degree Yes No

Some College Yes No

Bachelor's Degree Yes No

Master's Degree Yes No

Educational or vocational training Yes No
If 'yes', what training? _____

If 'yes', date you completed training: _____

Co-Applicant Education:

High School Diploma/ GED Yes No

Associate's Degree Yes No

Some College Yes No

Bachelor's Degree Yes No

Master's Degree Yes No

Educational or vocational training Yes No
If 'yes', what training? _____

If 'yes', date you completed training: _____

RENTAL INFORMATION:

Are you a current homeowner? Yes No

Are you a first-time home buyer? Yes No If 'no', what years were you a homeowner? _____

Do you currently rent? Yes No What is your monthly rental payment? _____

Do you currently live in a rural area? Yes No

How long have you lived at your current residence? (in years / months) _____

Do you have a Section 8 Housing Choice Voucher or do you live in Public Housing? Yes No

HOUSEHOLD INFORMATION: (Include all family members)

Name	Date of Birth	Social Security # (adults only)	Male or Female	Disabled Y/N	Hispanic Y/N
1.					
2.					
3.					
4.					
5.					
6.					

*additional family members should be discussed and will be added to your intake form at the initial phone appointment.

HOUSEHOLD INCOME INFORMATION:

<i>Income source</i>	<i>Who receives this income?</i>	<i>What is the monthly amount?</i>
Employment		
Employment		
SSI		
FIP		
Food Stamps		
Unemployment		
Veterans		
Child Support		
Other:		

Household Net Worth: _____
[money in checking & savings accounts, auto(s) value, furniture/clothing value, any other item of value] minus [any debt items: car loans, students loans, credit card balances, personal loans, etc] equals Household Net Worth

EMPLOYMENT INFORMATION:

Applicant Employment

Current employer: _____ Employer phone number: _____
 How long have you worked at current job? _____ Pay Rate: _____ Hours/Week: _____
 Start Date: _____ Business Type: (ex: construction, health care, education, etc) _____
 What is your job title? _____
 How many years have you been in the above profession? _____

Co-Applicant Employment:

Current employer: _____ Employer phone number: _____
 How long have you worked at current job? _____ Pay Rate: _____ Hours/Week: _____
 Start Date: _____ Business Type: (ex: construction, health care, education, etc) _____
 What is your job title? _____
 How many years have you been in the above profession? _____

Applicant

Printed Name

I acknowledge my electronic signature and give permission for it to be in place of my written signature

Co-Applicant

Printed Name

Date

I acknowledge my electronic signature and give permission for it to be in place of my written signature



AUTHORIZATION AND RELEASE OF INFORMATION

Confidentiality is important to us and we will always protect your privacy.

I/We understand that in signing this authorization and release of information, I/We agree to actively participate in the Housing and Education Services of Habitat for Humanity of Michigan. I/We understand that these services are completely voluntary. By signing this form, I/We understand the following:

- I/We authorize Habitat for Humanity of Michigan (HFHM), its agents, employees or Habitat Affiliates to request income and asset information from all income providers, those entities listed on the Intake Form and any other associated application forms. This form also authorizes the gathering of mortgage, credit bureau, landlord and personal information pertinent to the Housing and Education Services of HFHM.
- I/We understand a referral to other services of HFHM or another appropriate agency may be made to assist with particular concerns that have been identified, including housing programs and loan products; I/We will not be obligated to use any of the services offered.
- I/We allow HFHM to provide this information to its agents, employees or Affiliates involved with the Financial Coaching Network for the purposes in this program. The agents, employees or Affiliates involved with the HFHM Financial Coaching Network may also provide information to HFHM.
- This release of information also gives permission to share my information to and from the Affiliate Mortgage Services.
- I/We understand that this agency receives funds through HUD, NeighborWorks and other grantors and as such, is required to share some of my personal information with program administrators or their agents for the purposes of program monitoring, compliance and evaluation.
- I/We allow contact to be made on my/our behalf with representatives from mortgage, attorney, collection and credit bureau companies.
- I/We understand a counselor may provide information and answer questions, but cannot give legal advice. If there is need of legal services, I/we will be referred to an attorney for assistance.
- I/We understand that private companies (collection companies, etc.) may not receive our personal information authorized by this form unless disclosure of such information is required under State or Federal Law.
- Following is the list of people / agencies that I do NOT want to have my personal information:

Applicant Signature: _____ Date: _____

I acknowledge my electronic signature and give permission for it to be in place of my written signature

Co-Applicant Signature: _____ Date: _____

I acknowledge my electronic signature and give permission for it to be in place of my written signature

Other Household Adult Signature: _____ Date: _____

I acknowledge my electronic signature and give permission for it to be in place of my written signature

Counselor Signature: _____ Date: _____

I acknowledge my electronic signature and give permission for it to be in place of my written signature

Privacy Notice

Habitat for Humanity of Michigan

This privacy notice discloses the privacy practices for Habitat for Humanity of Michigan. This privacy notice applies solely to information collected via documents provided to us in person, via fax, email, DocuSign or through our Customer Management System; it will notify you of the following:

1. What personally identifiable information is collected from you, how it is used and with whom it may be shared.
2. What choices are available to you regarding the use of your data.
3. The security procedures in place to protect the misuse of your information.
4. How you can correct any inaccuracies in the information.

Information Collection, Use, and Sharing

We are the sole owners of the information we collect. We only have access to and collect information that you voluntarily give us via email in person, via fax, email, DocuSign or through our Customer Management System or other direct contact from you. We will not sell or rent this information to anyone.

We will use your information to respond to you regarding the reason you contacted us. We will not share your information with any third party outside of our organization, other than as necessary to fulfill your request.

Unless you ask us not to, we may contact you via email in the future to tell you about new products or services, or changes to this privacy policy.

Your Access to and Control Over Information

You may opt out of any future contacts from us at any time. You can do the following at any time by contacting us via the email address or phone number given on our website:

- See what data we have about you, if any.
- Change/correct any data we have about you.
- Have us delete any data we have about you.
- Express any concern you have about our use of your data.

Security

We take precautions to protect your information. When you submit sensitive information to us, your information is protected both online and offline.

Wherever we collect sensitive information (such as credit card data), that information is encrypted and transmitted to us in a secure way. You can verify this by looking for a lock icon in the address bar and looking for "https" at the beginning of the address of the Web page.

While we use encryption to protect sensitive information transmitted online, we also protect your information offline. Only employees who need the information to perform a specific job (for example, counseling and coaching, billing, or other customer service) are granted access to personally identifiable information. The computers/servers in which we store personally identifiable information are kept in a secure environment.

Registration

In order to use this website, a user must first complete the registration form. During registration a user is required to give certain information (such as name and email address). This information is used to contact you about the products/services on our site in which you have expressed interest. At your option, you may also provide demographic information (such as gender or age) about yourself, but it is not required to receive services.

Sharing

We share aggregated demographic information with HUD and other funders or Rural Development and Down Payment Assistance programs. We partner with these organizations to provide specific services. When the user signs up for these services, we will share names, or other contact information that is necessary for the third party to provide these services. These parties are not allowed to use personally identifiable information except for the purpose of providing these services.

Surveys & Program Evaluations

From time-to-time we directly or via our site request information via surveys. Participation in these surveys is completely voluntary and you may choose whether to participate or not, and therefore disclose this information. Information requested may include contact information and demographic information (such as zip code, age level). Contact information will be used to respond to concerns about our services. Survey information will be used for purposes of monitoring or improving the use and satisfaction of our services.

If you feel that we are not abiding by this privacy policy, you should contact us immediately via telephone at 517-485-1006 ext. 117 or email aaustin@habitatmichigan.org

FREEDOM TO CHOOSE DISCLOSURE

Habitat for Humanity of Michigan (HFHM) is a non-profit financial coaching and housing counseling agency that supports a network of Habitat for Humanity Affiliate Offices in Michigan, which are non-profit housing developers and support services agencies.

Our goal in providing financial coaching and housing counseling is to help you make the best decision about your finances, housing and mortgage lending needs.

In addition to our counseling services, HFHM offers the following programs and services:

- Down Payment Assistance Programs (through HOME, FHLBI or others)
- Neighborhood Revitalization and Neighborhood Improvement Programs
- Habitat for Humanity Michigan Fund, a wholly owned subsidiary of HFHM
- Rural Development Loan Packaging Program
- Affiliation with sixty-two Habitat for Humanity offices in Michigan
- Michigan Regional Distribution Center for Habitat for Humanity ReStores

You may hear about or be referred to these and other programs during discussions about our services.

You have the right to work with any financial coaching and housing counseling agency and any mortgage company; you have the right to apply for any housing program or to use any mortgage product that you choose. Please see the attached list of resources and programs in your area. We encourage you to shop around for the best program, product and services that fit your circumstances. Please see page two of this form for a brief description of the services we offer.

Agency Relationships: HFHM has financial affiliation or professional affiliations with HUD, NeighborWorks America, USDA Rural Development, and the State of Michigan; insurance companies like Allstate and State Farm, and banks including Bank of America, Flagstar, Comerica, Fifth Third, Huntington, Wells Fargo and JP Morgan Chase. As a housing counseling program participant, you are not obligated to use the products and services of HFHM or our industry partners.

You have the freedom to choose any program or product you wish; you are not obligated to work with Habitat for Humanity of Michigan or any Affiliate agency.

Your signature below indicates you have read and understand these statements. Regardless of your decision, we are pleased to offer our services to you.

Signature

Date

Printed Name

I acknowledge my electronic signature and give permission for it to be in place of my written signature.

Signature

Date

Printed Name

I acknowledge my electronic signature and give permission for it to be in place of my written signature.

FREEDOM TO CHOOSE DISCLOSURE

The following services are offered by Habitat for Humanity of Michigan:

Pre Purchase Counseling: This service is provided individually to consumers and focuses on readiness and preparation for home ownership. We offer goal setting and action planning, and walk with consumers as they remove barriers to their homeownership goal.

Pre-Purchase Home Buyer Education Workshops. Our workshops include information on various home ownership options and programs to assist first time home buyers. We provide information about **Fair Housing and Fair Lending, as well as Predatory Lending Avoidance** as a part of the pre purchase education workshops, thru individual counseling or as a stand-alone workshop.

Resolving or Preventing Mortgage Delinquency or Default. HFHM offers foreclosure avoidance strategies and works with consumers as an advocate with their lenders to help navigate the loss mitigation process.

Non-Delinquency Post-Purchase Counseling including Home Repair and Improvement: HFHM educates homeowners on a variety of topics individualized to their personal needs. We also help homeowners determine necessary repairs and obtain access to home repair grants and/or loans available through community, state and federal resources

Locating, Securing, or Maintaining Residence in Rental Housing. We provide information on HUD rental and rent subsidy programs, other federal, state or local rental assistance. We provide information on landlord tenant laws, budgeting for rent payments and providing assistance with locating alternative housing.

Financial Management, Budget and Credit Workshops: HFHM offers the following financial management topics during the following two- to three-hour group workshops: Budgeting, Credit Repair, Debt Reduction, Saving and Investing, Insurance and Long Term Planning, and Consumer Protection.

Financial Management, Budgeting and Credit Counseling: HFHM provides individual counseling on financial management, as a follow up to workshop attendance or as a stand-alone service, in order to further assist consumers in focusing on their unique situation.

Homeless Assistance: We provide referrals to emergency shelters, coordinated assessment providers, homeless services and programs available in their communities, other emergency services and transitional housing programs.

Revised 4/2020



Monthly Budget

Client Name: _____

Date: _____

INCOME	PLANNED	ACTUAL	DIFF + / (-)	NOTES
Wages (NET- TAKE HOME)				
Other Household Wages				
Child Support				
Social Security / SSI / Disability				
Food Assistance				
Other Income				
TOTAL MONTHLY INCOME	\$ 0	\$ 0	\$ 0	

EXPENSES

FIXED EXPENSES	PLANNED	ACTUAL	DIFF + / (-)	NOTES
Housing (Rent, Mortgage, etc.)				
Auto Loan				
Auto Insurance				
Student Loan				
Personal Loan / Line of Credit				
Child Support Payment				
Child Care Expenses				
Savings				
Other Fixed Expenses				
FIXED EXPENSES SUBTOTAL	\$ 0	\$ 0	\$ 0	
FLEXIBLE EXPENSES	PLANNED	ACTUAL	DIFF + / (-)	NOTES
Groceries				
In-Between Groceries				
Gas/Propane				
Electric				
Water				
Trash Pick-Up				
Telephone (Home / Cell)				
Cable / Internet Service				
Automobile Gas				
Auto Repair / Maintenance				
Movies / Movie Rentals				
Laundry / Dry Cleaning				
Pets				
Ongoing Medical Expenses				
Dues / Subscriptions				
Money Orders / Cashiers Checks				
Banking Fees (ATM, Checks, NSF)				

Hair Care / Nail Care				
Clothing				
Toiletries / Cosmetics				
Cigarettes / Alcohol				
Activities / Entertainment				
Eating / Dining Out				
Charity / Tithing				
Education				
Kids' School Lunches				
Allowance / Children Activities				
Other Flexible Expenses				
FLEXIBLE EXPENSES SUBTOTAL	\$ 0	\$ 0	\$ 0	
OCCASIONAL EXPENSES	PLANNED	ACTUAL	DIFF + / (-)	NOTES
Property Taxes (if not in mortgage)				
Homeowner Insurance				
Medical				
Dental				
Vision				
Vacation				
Birthdays				
Christmas / Holidays				
OCCASIONAL EXPENSES SUBTOT.	\$ 0	\$ 0	\$ 0	
DEBT REDUCING EXPENSES	PLANNED	ACTUAL	DIFF + / (-)	NOTES
Credit Card #1				
Credit Card #2				
Credit Card #3				
Credit Card #4				
Other Debt Reducing Expense				
Other Debt Reducing Expense				
Other Debt Reducing Expense				
DEBT REDUCING EXPENSES SUBTOT.	\$ 0	\$ 0	\$ 0	
TOTAL MONTHLY EXPENSES	\$ 0	\$ 0	\$ 0	

COMPARE INCOME AND EXPENSES

Total Monthly Income - Actual: _____ \$ 0
Total Monthly Expenses - Actual: _____ \$ 0
Difference Gain / (Loss): _____

Money to put toward further Debt Reduction Items: _____

CAUTION—Your Action is Required Soon

U.S. Department of Housing
and Urban Development
Federal Housing Administration (FHA)



OMB Approval No: 2502-0538
(exp. 06/30/2021)

For Your Protection: Get a Home Inspection

You must make a choice on getting a Home Inspection. It is not done automatically.

You have the right to examine carefully your potential new home with a professional home inspector. But a home inspection is not required by law, and will occur only if you ask for one and make the arrangements. You may schedule the inspection for before or after signing your contract. You may be able to negotiate with the seller to make the contract contingent on the results of the inspection. For this reason, it is usually in your best interest to conduct your home inspection as soon as possible if you want one. In a home inspection, a professional home inspector takes an in-depth, unbiased look at your potential new home to:

- ✓ Evaluate the physical condition: structure, construction, and mechanical systems;
- ✓ Identify items that need to be repaired and
- ✓ Estimate the remaining useful life of the major systems, equipment, structure, and finishes.

The Appraisal is NOT a Home Inspection and does not replace an inspection.

An appraisal estimates the market value of the home to protect the lender. An appraisal does not examine or evaluate the condition of the home to protect the homebuyer. An appraisal only makes sure that the home meets FHA and/or your lender's minimum property standards. A home inspection provides much more detail.

FHA and Lenders may not Guarantee the Condition of your Potential New Home

If you find problems with your new home after closing, neither FHA nor your lender may give or lend you money for repairs. Additionally, neither FHA nor your lender may buy the home back from you. Ask a qualified home inspector to inspect your potential new home and give you the information you need to make a wise decision.

Your Home Inspector may test for Radon, Health/Safety, and Energy Efficiency

EPA, HUD and DOE recommend that houses be tested and inspected for radon, health and safety, and energy efficiency, respectively. Specific tests are available to you. You may ask about tests with your home inspector, in addition to the structural and mechanical systems inspection. For more information: Radon – call 1-800-SOS-Radon; Health and Safety – see the HUD Healthy Homes Program at www.HUD.gov; Energy Efficiency – see the DOE EnergyStar Program at www.energystar.gov.

Selecting a Trained Professional Home Inspector

Seek referrals from friends, neighbors, other buyers, realtors, as well as local listings from licensing authorities and local advertisements. In addition, consult the American Society of Home Inspectors (ASHI) on the web at: www.ashi.org or by telephone at: 1-800-743-2744.

I/we have read this document and understand that if I/we wish to get a home inspection, it is best to do so as soon as the inspection is possible. The appraisal is not a home inspection. I/we will make a voluntary choice whether to get a home inspection. A home inspection will be done only if I/we ask for one and schedule it. The lender may not perform a home inspection and neither FHA nor the lender may guarantee the condition of the home. Health and safety tests can be included in the home inspection if I/we choose.

(Signed) Homebuyer

Date

(Signed) Homebuyer

Date

I acknowledge my electronic signature and give permission for it to be in place of my written signature.

Public reporting burden for this collection is estimated to average 30 minutes to review the instructions, find the information, and complete this form. This agency cannot conduct or sponsor a collection of information unless a valid OMB number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB numbers can be located on the OMB Internet page at <http://www.whitehouse.gov/library/omb/OMBINVC.html> - HUD If desired you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

HUD-92564-CN (expiration)





CFPB FINANCIAL WELL-BEING SCALE

Questionnaire

NAME OR NUMBER

Part 1: How well does this statement describe you or your situation?

This statement describes me	Completely	Very well	Somewhat	Very little	Not at all
1. I could handle a major unexpected expense	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I am securing my financial future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Because of my money situation, I feel like I will never have the things I want in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I can enjoy life because of the way I'm managing my money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I am just getting by financially	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I am concerned that the money I have or will save won't last	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 2: How often does this statement apply to you?

This statement applies to me	Always	Often	Sometimes	Rarely	Never
7. Giving a gift for a wedding, birthday or other occasion would put a strain on my finances for the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I have money left over at the end of the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I am behind with my finances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. My finances control my life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 3: Tell us about yourself.

11. How old are you? 18-61 62+
12. How did you take the questionnaire? I read the questions Someone read the questions to me

