

# **Critical Home Repair Loan Application**

| Applicant Information   |                       |           |                          |              |
|---|-----------------------|-----------|--------------------------|--------------|
| Name:   |                       |           |                          |              |
| Date of birth:  | SSN:                  | F         | Phone:                   |              |
| Current address:  |                       |           |                          |              |
| City:   | State:                |           | ZIP Code:                |              |
| Email:  |                       | Years Ye  | ou Lived in the Home::   |              |
| Marital Status (Circle One): Married Divorced                                 | Separated Never Ma    | arried W  | /idowed                  |              |
| 1 <sup>st</sup> Mortgage Company:   |                       | N         | Monthly Payments \$:     |              |
| 2 <sup>nd</sup> Mortgage Company:   |                       | N         | Monthly Payments \$:     |              |
| Employment Information  |                       |           |                          |              |
| Current employer:   |                       | (         | Occupation:              |              |
| Employer address:   |                       |           |                          | How long?    |
| Phone:  | E-mail:               |           |                          |              |
| City:   | State:                | Z         | ZIP Code:                |              |
| Position:   |                       | Monthly ( | (Gross) Wages:           |              |
| Co-applicant Information, if Appli  | cable                 |           |                          |              |
| Name:   |                       | (         | Occupation:              |              |
| Date of birth:  | SSN:                  | F         | Phone:                   |              |
| Current address:  |                       |           |                          |              |
| City:   | State:                |           | ZIP Code:                |              |
| Marital Status (Circle One): Married Divorced Separated Never Married Widowed |                       |           |                          |              |
| Employment Information  |                       |           |                          |              |
| Current employer:   |                       | (         | Occupation:              |              |
| Employer address:   |                       |           |                          | How long?    |
| Phone:  | E-mail:               |           |                          |              |
| City:   | State:                |           | ZIP Code:                |              |
| Position:   |                       | Monthly ( | Gross) Wages:            |              |
| Other Household Members   |                       |           |                          |              |
| Name:   | Date of Birth:        | 5         | SSN:                     | Male/Female: |
| Name:   | Date of Birth:        |           | SSN:                     | Male/Female: |
| Name:   | Date of Birth:        |           | SSN:                     | Male/Female: |
| Name:   | Date of Birth:        | 5         | SSN:                     | Male/Female: |
| Other Income Information: (Please   | list ALL – Child Supp | oort, Soc | ial Security, SSI, etc.) |              |
| Source of Income:   |                       |           | Monthly Income \$:       |              |
| Source of Income:   |                       |           | Monthly Income \$:       |              |
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| Source of Income:   |                       |           | Monthly Income \$:       |              |

| What Are the Types of Repairs that You Need?   |  |
|--|--|
| □ Porch Repair   | ☐ Foundation Repair  |
| ☐ Exterior Door Repair and Replacement   | ☐ Structural Repair  |
| ☐ Roof, Gutter, & Chimney Repair   | ☐ Tree Hazards   |
| ☐ Broken Window Repair   | ☐ Smoke Alarms   |
| ☐ Code Violations  | ☐ Carbon Monoxide Detectors  |
| ☐ Plumbing Hazards   | ☐ Wheel Chair Ramp   |
| ☐ Electrical Hazards   |  |
| ☐ HVAC Repair  |  |
|  |  |
| Check All That Apply:  |  |
| $\square$ I have served in the U.S. military.  | ☐ I am current on my property taxes.   |
| $\square$ Someone other than myself living in my house has served in   | ☐ I am current on my water bill.   |
| the U.S. military.   | $\hfill \square$ I, or someone in my house, is on the sexual offenders list. |
| ☐ My property is owner-occupied.   |  |
| Willingness to Partner   |  |
| To be considered for a Habitat Critical Home Repair project, you and your f  | amily must be willing to complete between 6 and 18 hours of                  |
| "sweat-equity." Duties may include helping with construction, working in the   |  |
| ☐ Yes, I (and co-applicant, if applicable) will complete the required sw   | veat equity hours.   |
|  |  |
| Please return this application with copies of the following  | llowing documents:   |
| Last 4 consecutive paycheck stubs or Form 1099 if you are s  | self-employed  |
| <ul> <li>Provide the last 5 paycheck stubs if paid weekly</li> </ul>   |  |
| <ul> <li>12 month child support history (payers and payees if applicab</li> <li>Recent Social Security Award Letter (if applicable)</li> </ul> | le)  |
| 3 months of most recent Bank Statements  |  |
| Copy of most recent WE Energies Bill   |  |
| <ul> <li>Copy of most recent Mortgage Statement(s)</li> </ul>  |  |
| Copy of deed for property (if there is not a mortgage on the property)   |  |
| <ul> <li>Copy of most recent Home Equity or Home Equity Line of Cr</li> <li>Copy of most recent property tax bill and water bill</li> </ul>    | edit Statement(s) (If applicable)  |
| Copy of current homeowner's insurance declaration page   |  |
| Photocopy of your social security card (for all persons in the I   | nousehold)   |
| Bhotogopy of your Driver's License or State ID   |  |

- Photocopy of your Driver's License or State ID
- Military Discharge status certification DD214 (if applicable)
- \$5 Check or Money Order payable to Milwaukee Habitat for Humanity (non-refundable)

If you are self-employed and/or have a rental property, please submit the following:

- 2021 W-2s and Federal & State tax returns along w/Schedule C
- 2020 W-2s and Federal & State tax returns along w/Schedule C
- 2019 W-2s and Federal & State tax returns along w/Schedule C
- Last 3 Months of Profit & Loss Statement
- Copy of lease agreement with tenant(s)

# **AUTHORIZATION AND RELEASE**

I understand that by filing this application, I am authorizing Milwaukee Habitat for Humanity (MHFH) to evaluate my actual need for a Habitat Critical Home Repair project, my ability to repay the no-interest loan and other expenses for homeownership, and my willingness to be a partner family. I certify that all information provided is true and complete to the best of my knowledge and understand that MHFH will use this information to evaluate my eligibility based on credit checks, income and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that in the event if I have already been selected to receive a Habitat Critical Home Repair project, I may be disqualified from the program. The original or a copy of this application will be retained by MHFH even if the application is not approved. I also understand that MHFH screens all potential staff (whether paid or unpaid), board members and applicant families on the sex offender registry, and that by completing this application, I am submitting myself and all persons listed on the first page of the application to such an inquiry. I further understand that by completing this application, I am submitting myself and all persons listed on the first page of this application to a criminal background check.

| Applicant's Signature | Date | Co-Applicant's Signature | Date |  |
|-----------------------|------|--------------------------|------|--|
| ^                     |      | _                        |      |  |

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.

# INFORMATION FOR GOVERNMENT MONITORING PURPOSES

#### Please Read This Statement Before Completing the Box Below:

The following information is requested by the federal government for loans related to housing, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.)

| Applicant:   | Co-Applicant:  |
|--|--|
| <ul> <li>I do not wish to furnish this information</li> </ul>  | <ul> <li>I do not wish to furnish this information</li> </ul>  |
| Race/National Origin:  | Race/National Origin:  |
| <ul> <li>American Indian or Alaskan Native</li> <li>Native Hawaiian or Other Pacific Islander</li> <li>Black/African American</li> <li>Caucasian</li> <li>Asian</li> <li>American Indian or Alaskan Native AND</li> <li>Caucasian</li> <li>Asian AND Caucasian</li> <li>Black/African American AND Caucasian</li> <li>American Indian or Alaskan Native AND</li> <li>Black/African American</li> <li>Other (specify):</li> </ul> | <ul> <li>American Indian or Alaskan Native</li> <li>Native Hawaiian or Other Pacific Islander</li> <li>Black/African American</li> <li>Caucasian</li> <li>Asian</li> <li>American Indian or Alaskan Native AND</li> <li>Caucasian</li> <li>Asian AND Caucasian</li> <li>Black/African American AND Caucasian</li> <li>American Indian or Alaskan Native AND</li> <li>Black/African American</li> <li>Other (specify):</li> </ul> |
| Ethnicity:   | Ethnicity:   |
| <ul> <li>Hispanic</li> </ul>   | o Hispanic   |
| o Non-Hispanic   | o Non-Hispanic   |
| Sex:   |  |
| <ul><li>Female</li><li>Male</li></ul>  | Sex:   |
| o Male   | <ul><li>Female</li><li>Male</li></ul>  |
| Birth Date:/   | o Maie   |
|  | Birth Date: / /  |
| Marital Status:  |  |
| <ul> <li>Married</li> </ul>  | Marital Status:  |
| <ul> <li>Separated</li> </ul>  | o Married  |
| <ul> <li>Unmarried (incl. single, divorced,</li> </ul>   | <ul> <li>Separated</li> </ul>  |
| widowed)   | <ul> <li>Unmarried (incl. single, divorced,</li> </ul>   |
| <ul> <li>Domestic Partnership</li> </ul>   | widowed)   |
| Date:  | <ul> <li>Domestic Partnership</li> </ul>   |
| <u></u>  | Date:  |
|  |  |
|  |  |

# **Return Completed Application To:**

Aiyana Groh, Homeowner Support Coordinator Milwaukee Habitat for Humanity 3726 N Booth St, Milwaukee, WI 53212 agroh@milwaukeehabitat.org 414-316-5616



### **Critical Home Repair Loan Authorization Form**

By completing this authorization, I understand I authorize Milwaukee Habitat for Humanity to evaluate my need for home repair, my ability to repay a loan, and my willingness to be a partner family in the Critical Home Repair (CHR) program. I understand that information requested is for the purposes of advising and assisting me as a potential receiver of a home repair loan.

I hereby authorize Milwaukee Habitat for Humanity to verify my employment, bank accounts, and assets that are needed to process my loan application. I further authorize Milwaukee Habitat for Humanity to order a credit report and verify other credit information, including past/present mortgages, utility history, and property taxes. I also authorize Milwaukee Habitat to review my financial information with any agencies or organizations I may be working with to assist me in evaluating progress for achieving and maintaining my homeownership goals and qualifying me for home repair loan financing. It is also understood that a photocopy or facsimile of this form will serve as authorization.

The information Milwaukee Habitat for Humanity obtains is only to be used in the processing of my application for a home repair loan. By signing this form I authorize Milwaukee Habitat for Humanity to receive documentation related to eligibility including any assistance applied towards the maintenance of my home. I authorize Milwaukee Habitat for Humanity to receive documentation in the event I become delinquent with the mortgage that Milwaukee Habitat secures. I agree to participate in all Milwaukee Habitat for Humanity's data collection research needs.

## **Please Print Clearly**

| First Name                 | MI                | Current Address     |
|----------------------------|-------------------|---------------------|
| Last Name                  | Suffix            | City/State/Zip Code |
| ( )<br>Home Phone Number   | <u> </u>          | Date of Birth       |
| ( )<br>Alternate Phone Num | aber (Work, Cell) |                     |
| Social Security Number     | er                |                     |
| Signature                  | <br>Date          |                     |