## **HOME PRESERVATION APPLICATION INSTRUCTIONS**

### PLEASE NOTE THAT YOU MUST HAVE BEEN A RESIDENT OF OUR SERVICE AREA FOR AT LEAST 12 MONTHS AND OWN YOUR HOME.

1. Read the application thoroughly before beginning to fill it out. If you need clarification about anything on the application please call our office at 434-394-3001.

2. Be certain to complete sections 1, 3-11 of this application. Section 12 is optional.

3. The application must be signed and dated by the applicant and the co-applicant in section 11 AND under the Equal Credit Opportunity Act Notice on the final page.

4. You must submit the following supporting documentation (<u>please provide copies</u> <u>we can keep</u>):

• Deed to property or proof of current mortgage payment. YOU MUST OWN THE HOME.

- Driver's License or Official ID for each applicant.
- Social Security cards for all members of household.
- Pay stubs for each applicant for 2 most recent months.
- Verification of other income (TANF, SNAP, SSI, Social Security, Disability, Alimony, Child Support, other).
- Last month's bills and outstanding debts. See Sections 7 and 9 of the application.

5. Please include a <u>money order</u> for \$5.00 made to Piedmont Habitat for Humanity. This is to run a credit report and <u>MUST</u> be included to consider your application. *Your credit does not need to be perfect, just reasonable.* 

6. Completed applications must be mailed to P.O. Box 816, Farmville, VA 23901, or hand delivered to: 1512 South Main Street, Farmville, VA 23901.





Updated May 2025



# DOCUMENT CHECK LIST TO BE INCLUDED WITH APPLICATION

Please use this checklist to be sure you have provided the necessary documents. Your application cannot be processed without every document below. If there is a co-applicant, they need to provide the same documents.

I have filled in application completely and signed and dated where needed
I have included a copy of my driver's license or government I.D.
I have included a copy of mine and my dependents Social Security card
I have included copy of pay stubs for two most recent months
I have included copy of benefit statement for TANF, SNAP, SSI, Social Security, Disability, Alimony, Child Support, other
I have included copy of most recent power bill
I have included copy of any debt payment (car, credit card, furniture, etč.) with balance owed

I have included a \$5.00 money order payable to Piedmont Habitat for Humanity for a credit report

### Piedmont Habitat for Humanity

### Privacy Statement and Notice

At Piedmont Habitat for Humanity, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data – such as tax returns, pay stubs, credit reports, employment verifications and payment history – internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us or others; and
- Information we receive from a consumer reporting agency.

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on applications or other forms, such as your name, address, social security number, assets, income, etc.
- Information about your transactions with us or others such as your loan balance, payment history, etc.
- Information we receive from a consumer reporting agency such as your creditworthiness and credit history

Piedmont Habitat for Humanity employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents;
- Nonprofit organizations, government entities

If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). If you wish to opt out of disclosures to nonaffiliated third parties, you may call Piedmont Habitat for Humanity at 434-394-3001.

To be considered for the program, your total MONTHLY, GROSS (before taxes) household income must fall within the following limits for the county where you currently live. Income from a variety of sources may count toward your total. IF YOU HAVE A QUESTION ABOUT WHETHER OR NOT YOU MEET THE REQUIREMENTS, PLEASE CALL US AT 434-394-3001. Buckingham Number in Household Gross Minimum Income Gross Maximum Income \$985 1 \$3,938 2 \$1.125 \$4,500 3 \$1,266 \$5,063 4 \$1,407 \$5,625 5 \$1.519 \$6,075 6 \$1,632 \$6,525 7 \$1,744 \$6,975 8 \$1,857 \$7,425 Cumberland Number in Household Gross Minimum Income Gross Maximum Income \$817 \$3,646 1 2 \$933 \$4,167 3 \$1,050 \$4,688 4 \$1.167 \$5.208 5 \$1,260 \$5,625 6 \$1,353 \$6,042 7 \$1,447 \$6,458 8 \$1,540 \$6,875 Nelson Number in Household Gross Minimum Income Gross Maximum Income \$1,061 \$5,875 1 2 \$1,212 \$6,713 3 \$1.364 \$7,550 4 \$1,515 \$8,388 5 \$1,636 \$9,063 6 \$9,733 \$1.757 7 \$1,879 \$10,404 8 \$2,000 \$11,075 ۹ ۹ Prince Edward Number in Household Gross Minimum Income Gross Maximum Income \$963 \$3.850 1 2 \$1.100 \$4,400 3 \$1,238 \$4,950 4 \$1,375 \$5,500 5 \$1,485 \$5,942 6 \$1,595 \$6,383 7 \$1,705 \$6,821 8 \$1,815 \$7,263 Nottoway Number in Household Gross Minimum Income Gross Maximum Income 1 \$1.061 \$3,954 2 \$1,212 \$4,517 3 \$1,364 \$5,083 4 \$1,515 \$5,646 5 \$1,363 \$6,100 6 \$1,757 \$6,550 7 \$1,879 \$7.004 8 \$2,000 \$7,454

Charlotte		
Number in Household	Gross Minimum Income	Gross Maximum Income
1 /	\$895	\$3,646
2	\$1,023	\$4,167
3	\$1,151	\$4,688
4	\$1,278	\$5,208
5	\$1,381	\$5,625
6	\$1,483	\$6,042
7	\$1,585	\$6,458
8	\$1,687	\$6,875



Piedmont Habitat for Humanity P.O. Box 816 Farmville, VA 23901 434-394-3001

# Home Preservation



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.

YOU MUST OWN YOUR HOME AND HAVE BEEN A RESIDENT IN OUR SERVICE AREA FOR 12 MONTHS TO BE CONSIDERED FOR REPAIRS. Please complete this application to determine if you qualify for the Habitat for Humanity home preservation program. Please fill out the application as completely and accurately as possible. <u>IF YOU HAVE ANY QUESTIONS OR NEED ASSISTANCE COMPLETING THIS PLEASE CALL US AT 434-394-3001.</u> All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act. Updated May 2025.

1. APPLICANT INFORMATION								
Applicant			Co-applicant					
Applicant's name			Co-applicant's name					
Social Security number	Date of	Birth	Social Security number	Date o	f Birth			
Married Separated Unmarried (Incl. si	ngle, divorc	ed, widowed)	Married  Separated  Unmarried (In	cl. single, divor	ed, widowed)			
Dependents and others who will live with you (not list	ed by co-a	pplicant)	Dependents and others who will live with you (not	listed by co-	applicant)			
Name Age	Male	Female	Name	Age Male	Female			
				□				
	•			•				
	_ □			🛛				
Address	🗆 Own	🗆 Rent	Address	🗆 Own	🗆 Rent			
YOU MUST OWN THE HOME TO BE CONSIDERED FOR	REPAIRS.							
(street, city, state, ZIP code)			(street, city, state, ZIP code)					
Number of years			Number of years					
Home Phone Cell Phor	ne		Home Phone Cell P	hone				
Email			Email					
<sup></sup>			Cilian					

2.	FOR	OFFICE USE	ONLY -	DO	NOT	WRITE IN	THIS SPACE

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Dau		CEIV	eu.

Date of notice of incomplete application letter:

Date of adverse action letter: \_\_\_\_

Date of homeowner agreement:

	3. REPAIRS NEEDED	
Please check all repairs that are needed from the determine which repairs are possible.	he list below. An assessment will be done to	
Porch repair, ramps and rails	Repair or replace gutters and downspouts	
□ Improve exterior lighting	Insulation for exterior pipes	
□ Repair or replace windows and doors	Install/repair mobile home underpinning	
□ Painting for preservation		
□ Other		
	4. PROPERTY INFORMATION	

· · · · ·					
What is your current monthly	mortgage payment	? \$	/ month	Unpaid balance\$	
Do you own land? 🛛 No	□ Yes	Monthly payment \$		Unpaid balance\$	

	5. EMPLOYMENT IN	FORMATION		
Applicant		Co-applicant		
Name and address of <b>CURRENT</b> employer	Years on this job	Name and address of <b>CURRENT</b> employer	Years on this job	
	Monthly gross wages (before taxes) \$		Monthly gross wages (before taxes) \$	
Type of business Business phone		Type of business	Business phone	
If working at	current job less than one year, con	plete the following information		
Name and address of LAST employer	Years on this job	Name and address of LAST employer	Years on this job	
	Monthly gross wages (before taxes) \$		Monthly gross wages (before taxes) \$	
Type of business	Business phone	Type of business	Business phone	

## 6. MONTHLY INCOME FOR ALL IN HOUSEHOLD

Income Source	Applicant	Co-applicant	Others- Include their name	Total
Wages (Before taxes)	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$ .	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
SNAP	\$	\$	\$	\$
Other	\$	\$	\$	\$
Other	\$	\$	\$	\$
Other	\$	\$	\$	\$
Total	\$	\$	\$	\$

7. MONTHLY EXPENSES						
Account	Applicant	Co-applicant	Total			
Mortgage and property tax	\$	\$	\$			
Utilities- Electric/gas/water	\$	\$	\$			
Insurance- Home/car/health/life	\$	\$	\$			
Credit cards	\$	\$	\$			
Medical bills	\$	\$	\$			
Internet/satellite/cable	\$	\$	\$			
Phone- Cell and land line	\$	\$	\$			
Car payments	\$	\$	\$			
Other loans	\$	\$	\$			
Furniture, appliance, televisions (includes rent-to-own)	\$	\$	\$			
Alimony	\$	\$	\$			
Child support	\$	\$	\$			
Child care	\$	\$	\$			
Medical bills	\$	\$	\$			
Other	\$	\$	\$			
Total	\$	\$	\$			

8. ASSETS						
Name of bank, savings and loan, credit union, etc.	Address	City, state	ZIP	Account number	Current balance	
					\$	
					\$	
					\$	
					\$	

		9. DEBT						
		To whom a	do you and the co-app	licant(s) owe	e money?			
		Applicant			Co-applicant			
Account	Monthly payment	Unpaid balance	Months left to pay	Monthl paymen	· · · ·		Months left to pay	
Car	\$	\$		\$	\$			
Furniture, appliance, televisions (includes rent-to-own)	\$ .	\$		\$	\$	-		
Alimony	\$	\$		\$	\$			
Child support	\$	\$		\$	\$			
Credit card	\$	\$		\$	\$			
Student Loan	\$	\$		\$	\$			
Total medical	\$	\$		\$	\$			
Other	\$	\$		\$	\$			
Total	\$	\$		\$	\$			
		10. DECLA	RATIONS					
				A	pplicant	Co-ar	plicant	
a. Do you have any outstandin	g judgments becau	se of a court decisic	on against you?	□ Yes	s 🗆 No	□ Yes	🗆 No	
b. Have you been declared ban	krupt within the pa	st seven years?		□ Yes	s 🗆 No	□ Yes	🗆 No	
c. Have you had property foreclo	osed on or deed in li	eu of foreclosure in t	he past seven years?	□ Yes	s 🗆 No	□ Yes	🗆 No	
d. Are you currently involved ir	n a lawsuit?			□ Yes	s 🗆 No	□ Yes	🗆 No	
e. Have you directly or indirect for a find for the formation of the first sector of t			esulted in	Yes	s 🗆 No	🗆 Yes	🗆 No	
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?				□ Yes	s 🗆 No	🗆 Yes	🗆 No	
g. Are you paying alimony or child support or separate maintenance?			□ Yes	s 🗆 No	□ Yes	🗆 No		
h. Are you a co-signer or endorser on any loan?				□ Yes	5 🗆 No	□ Yes	🗆 No	
i. Are you a U.S. citizen or pern	nanent resident?			□ Yes	s 🗆 No	□ Yes	🗆 No	
If you answered "yes" to any que	estion <b>a</b> through <b>h</b> ,	or " <b>no</b> " to question	i, please explain on	a separate	piece of paper.	L		

### **11. AUTHORIZATION AND RELEASE**

I understand that by filing this application, I am authorizing Piedmont Habitat for Humanity to evaluate my actual need for the Habitat Home Preservation program, and my ability to repay the loan and other expenses of homeownership.

I understand that the evaluation will include a credit check 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 even if I have already been selected for home preservation, I may be disqualified from the program. The original or a copy of this application will be retained by Piedmont Habitat for Humanity even if the application is not approved. I also understand that Piedmont Habitat for Humanity screens all applicants on the sex offender registry. By completing this application, I am submitting myself and all adults listed on the first page of the application 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 NOT	E: If more space is needed to complete any part of this appl	ication, please use a separate sheet	of paper and attach it to this
application.	Please mark your additional comments with "A" for Applica	ant or "C" for Co-applicant.	

## 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 the **East Central Region, 1111 Superior Ave., Suite 200, Cleveland, OH 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(s)	
Signature	Signature
Print name	Print name
Date	Date

#### 12. OPTIONAL INFORMATION FOR GOVERNMENT MONITORING PURPOSES

**PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW:** We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation or surname.

Applicant	Co-applicant
I do not wish to furnish this information	I do not wish to furnish this information
Race (applicant may select more than one racial designation):	Race (applicant may select more than one racial designation):
American Indian or Alaska Native	American Indian or Alaska Native
Native Hawaiian or other Pacific Islander	Native Hawaiian or other Pacific Islander
Black/African-American	🛛 Black/African-American
White	□ White
🗆 Asian	□ Asian
Ethnicity:	Ethnicity:
□ Hispanic or Latino □ Non-Hispanic or Latino	Hispanic or Latino Non-Hispanic or Latino
Sex:	Sex:
Female Male	Female Male
Birthdate://	Birthdate://
Marital status:	Marital status:
Married	□ Married
Separated	□ Separated
Unmarried (Incl. single, divorced, widowed)	Unmarried (Incl. single, divorced, widowed)

To be completed only by the person conducting the interview				
	Interviewer's name (print or type)			
This application was taken by:				
□ Face-to-face interview	Interviewer's signature	Date		
🗆 By mail				
□ Bytelephone	Interviewer's phone number			

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