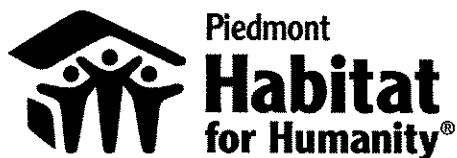


HOME PRESERVATION APPLICATION INSTRUCTIONS

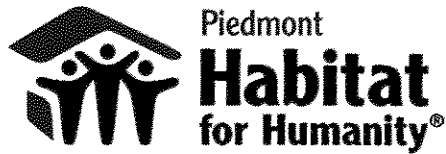
PLEASE NOTE THAT YOU MUST HAVE BEEN A RESIDENT OF OUR SERVICE AREA FOR AT LEAST 12 MONTHS AND OWN YOUR HOME.

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 (please provide copies we can keep):
 - 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 money order for \$5.00 made to Piedmont Habitat for Humanity. This is to run a credit report and MUST 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, etc.) 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.



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

Home Preservation Application



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. **IF YOU HAVE ANY QUESTIONS OR NEED ASSISTANCE COMPLETING THIS PLEASE CALL US AT 434-394-3001.**

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 of Birth | |
| <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed) | | | | <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed) | | | |
| Dependents and others who will live with you (not listed by co-applicant) | | | | Dependents and others who will live with you (not listed by co-applicant) | | | |
| Name | Age | Male | Female | 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"/> | _____ | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Address | | <input type="checkbox"/> Own <input type="checkbox"/> Rent | | Address | | <input type="checkbox"/> Own <input type="checkbox"/> 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 Phone | | Home Phone | | Cell Phone | |
| _____ | | _____ | | _____ | | _____ | |
| Email _____ | | | | Email _____ | | | |

2. 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 homeowner agreement: _____

3. REPAIRS NEEDED

Please check all repairs that are needed from the list below. An assessment will be done to determine which repairs are possible.

☐ 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 INFORMATION

| Applicant | | Co-applicant | |
|--|---------------------------------------|---|---------------------------------------|
| Name and address of CURRENT employer | Years on this job | Name and address of CURRENT 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, complete 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 do you and the co-applicant(s) owe money?

| Account | Applicant | | | Co-applicant | | |
|---|-----------------|----------------|--------------------|-----------------|----------------|--------------------|
| | Monthly payment | Unpaid balance | Months left to pay | Monthly payment | Unpaid balance | Months left to pay |
| Car | \$ | \$ | | \$ | \$ | |
| Furniture, appliance, televisions (includes rent-to-own) | \$ | \$ | | \$ | \$ | |
| Alimony | \$ | \$ | | \$ | \$ | |
| Child support | \$ | \$ | | \$ | \$ | |
| Credit card | \$ | \$ | | \$ | \$ | |
| Student Loan | \$ | \$ | | \$ | \$ | |
| Total medical | \$ | \$ | | \$ | \$ | |
| Other | \$ | \$ | | \$ | \$ | |
| Total | \$ | \$ | | \$ | \$ | |

10. DECLARATIONS

| | Applicant | | Co-applicant | |
|---|------------------------------|-----------------------------|------------------------------|-----------------------------|
| a. Do you have any outstanding judgments 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 been declared bankrupt within the past seven years? | <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 currently involved in a lawsuit? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? | <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 paying alimony or child support or separate maintenance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| h. Are you a co-signer or endorser on any loan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| i. 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 h, or "no" to question i, please explain on a separate piece of paper.

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 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. 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 |
|--|--|
| <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 (Incl. single, divorced, widowed) | <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 (Incl. single, divorced, widowed) |

| To be completed only by the person conducting the interview | |
|--|--|
| This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone | Interviewer's name (print or type) |
| | <div style="display: flex; justify-content: space-between;"> Interviewer's signature Date </div> |
| | Interviewer's phone number |

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