

Open Application Session August 24th -September 30th, 2020

Homeownership Program Applications
Available and Accepted
During Open Application Session
August 24th - September 30th, 2020

Applications Available

www.dorchesterhabitat.org
Office/ReStore 101 Greyback Road Summerville

Completed Applications Accepted by Mailing To:

PO Box 1685 Summerville SC 29484

(Applications postmarked after 9/30/2020 will not be accepted.)

Dropping Off at:

Office/ReStore 101 Greyback Road Summerville

Please, <u>do not</u> submit applications by email! They will not be accepted.



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.

Dorchester Habitat for Humanity Homeownership Program Requirements



Need

2020 MEDIAN INCOME GUIDELINES

WWW.SHA.STATE.SC.US

Area Median Income (AMI) as of April 2020 = \$81,000 family of 4

HUD HOME Program and the South Carolina Housing Trust Fund
Federal Home Loan Bank (FHLB)

Family Size	Minimum Income	Minimum Income	Maximum Income	Maximum Income
	Annually	Monthly	Annually	Monthly
1	\$19,845	\$1,654	\$45,360	\$3,780
2	\$22,680	\$1,890	\$51,840	\$4,320
3	\$25,515	\$2,126	\$58,320	\$4,860
4	\$28,350	\$2,363	\$64,800	\$5,400
5	\$30,625	\$2,552	\$70,000	\$5,833
6	\$32,900	\$2,742	\$75,200	\$6,267

Ability to Pay

^{*}Your family must have a need for an affordable and decent home.

^{*}Your family's gross household income must be within 35-80% of the AMI for Dorchester County.

^{*}You must have: the ability to pay a small, interest-free mortgage: a steady source of income; and an established and good credit history.

^{*}Your Housing Expenses-to-Income Ratio must be maintained at or below 32%.

^{*}Your Debt-to-Income (Long Term Debt) Ratio must be maintained at or below 40%.

Dorchester Habitat for Humanity Homeownership Program Requirements

Partnership

*You must be willing to partner with Dorchester Habitat for Humanity by working at least <u>425 hours</u> (<u>"Sweat-Equity"</u>). Regardless of the number of hours worked, you must work at least 60 hours building your own home and at least 60 hours building other families' homes.

*You must make a \$2,500 down payment of closing costs toward the purchase of your home.

*You must successfully complete financial and homebuyer education and coaching.

*You must have initiative and enthusiasm, proving that you want a Habitat home and are willing to work for it.

Residency

*You must be a citizen of the United States or a legal permanent resident.

*You must also work and/or live in <u>Dorchester County</u> and have done so for the 12 months immediately before submitting your 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.



Open Application Session August 24th -September 30th, 2020

Before submitting your Homeownership Program Application, please check the following:

- * All parts of the Application have been completed in full;
- * Your address is full and complete with street address, apartment number, town, and zip code;
- * Your phone number is a working number where you can be reached;
- * Your writing is legible, especially your contact information;
- * You have listed all of the people who would be living in the Habitat home;
- * The last page is signed by all applicants; and
- * You date your application beside your signature on the last page.

Please submit <u>copies</u> of the following documents with your Application (if they are applicable to you). The review of your Application will be expedited if you submit these <u>documents</u>. We cannot make copies for you. All documents submitted with your Application <u>will</u> not be returned to you.

- * <u>Credit Report</u> last 30 days (annualcreditreport.com);
- * Income Tax Returns 2019 and 2018;
- * <u>Proof of Income</u> last 3 months (pay stubs; award letters for social security income or disability; payment reports for child support; final divorce decree; legal separation agreement; court order for child support; voluntary payment agreement);
- * Bank Statements last 3 months; Checking and Savings; Rush Cards; Walmart Card;
- * <u>Utility Statements</u> most recent statements; Electric, Gas, Water, Sewer;
- * **Cell Phone** most recent statement;
- * Car Insurance most recent statement;
- * Lease Agreement and Rent most recent statement and payment receipt;
- * <u>Cable or Satellite</u> most recent statement;
- * Internet Service most recent statement;
- * Child Care or Day Care most recent statement;
- * Credit Cards most recent statements;
- * Car Loan most recent statement;
- * Student Loans most recent statements;
- * Finance, Pay Day, and/or Title Loans most recent statements; and
- * Any Other Loans most recent statements.



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.



Financial Coaching and Credit Report

You are invited to contact Ms. Tamara Rivers at the Financial Transformation if you need any assistance in: (1) gathering your financial documentation; (2) obtaining your credit report; and/or (3) financial coaching and education.

Dorchester Habitat for Humanity will pay all of the costs for your credit reports and/or financial coaching and education. The Financial Transformation will bill Dorchester Habitat for Humanity directly for these costs.

Dorchester Habitat for Humanity will pay these costs whether or not your application is accepted or denied.

Tamara Rivers - Financial Transformation

riverst@financialsc.us

Office (843) 285-9502; Fax (843) 279-3202



Dorchester Habitat for Humanity, Inc. 101 Greyback Road, Summerville, SC 29483 (843) 851-1414, ext. 103

Application Habitat Hamagurarship F



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.

Habitat Homeownership Program

Dear Applicant: Please complete this application to determine if you qualify for the Habitat for Humanity homeownership program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Billey Act.

1. APPLICANT INFORMATION	N						
Applicant				Co-applicant			
Applicant's name				Co-applicant's name			
OutilOur Transfer				0			
Social Security number Home phone			lge	Social Security number	Home phone		.ge
☐ Married ☐ Separated ☐ Unmarried (In	ncl. single,	divorced	, widowed)	☐ Married ☐ Separated	☐ Unmarried (Incl. single	, divorced	widowed)
Dependents and others who will live with you (no	ot listed by	co-appli	cant)	Dependents and others who wi	Il live with you (not listed b	y co-appli	cant)
Name	Age	Male	Female	Name	Age	Male	Female
		. 🗆				_ □	
				-		_ □	
						_ □	
						_ □	
,						_ □	
Present address (street, city, state, ZIP code)			Own Rent	Present address (street, city, sta	ate, ZIP code)		Own Rent
			richt				TIOTE
Number of years				Number of years			
If you have lived at your present address for less tha	n two years	s, comple	te the followi	ng:			
Last address (street, city, state, ZIP code)			Own	Last address (street, city, state,	ZIP code)		Own
			Rent				Rent
Number of years				Number of years			
2. FOR OFFICE USE ONLY — D		·WDI	TE INI TL	IIS SDACE			
Date received:				Date of selection committee appr	oval:		
Date of notice of incomplete application letter:				Date of board approval:			
Date of adverse action letter:			Date of partnership agreement:				

3. WILLINGNESS TO PARTNER

To be considered for Habitat homeownership, you and your family must be willing to complete a certain number of "sweat-equity" hours. Your help in building your home and the homes of others is called "sweat equity" and may include clearing the lot, painting, helping with construction, working in the Habitat office, attending homeownership classes or other approved activities.

I AM WILLING TO COMPLETE THE **REQUIRED SWEAT-EQUITY HOURS:**

	Yes	No
Applicant		
Co-applicant		

4. PRESENT HOUSING CONDITIONS
Number of bedrooms (please circle) 1 2 3 4 5
Other rooms in the place where you are currently living: □ Kitchen □ Bathroom □ Living room □ Dining room □ Other (please describe)
If you rent your residence, what is your monthly rent payment? \$/month (Please supply a copy of your lease or a copy of a money order receipt or canceled rent check.)
Name, address and phone number of current landlord:
In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat home?
5. PROPERTY INFORMATION
If you own your residence, what is your monthly mortgage payment? \$/ month Unpaid balance \$
Do you own land? □ No □ Yes Monthly payment \$ Unpaid balance \$
If you wish your property to be considered for building your Habitet home please attach land decumentation

If you wish your property to be considered for building your Habitat home, please attach land documentation.

6. EMPLOYMENT INFORMATION						
Applicant		Co-applicant				
Name and address of CURRENT employer	Years on the job	Name and address of CURRENT employer	Years on the job			
	Monthly (gross) wages \$		Monthly (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 LAST employer	Years on the job	Name and address of LAST employer	Years on the job			
	Monthly (gross) wages \$		Monthly (gross) wages \$			
Type of business	Business phone	Type of business	Business phone			

7. MONTHLY INCOME						
Income source	Applicant	Co-applicant	Others in household	Total		
Wages	\$	\$	\$	\$		
TANF	\$	\$	\$	\$		
Alimony	\$	\$	\$	\$		
Child support	\$	\$	\$	\$		
Social Security	\$	\$	\$	\$		
SSI	\$	\$	\$	\$		
Disability	\$	\$	\$	\$		
Section 8 housing	\$	\$	\$	\$		
Other:		\$	\$	\$		
Other:		\$	\$	\$		
Other:		\$	\$	\$		
Total	\$	\$	\$	\$		

	HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE					
PLEASE NOTE:	Name	Income source	Monthly income	Date of birth		
Self-employed applicants may						
be required to provide additional						
documentation such as tax						
returns and financial statements.						

Where will you get the money to make the down payment or pay for closing costs (for example, savings or parents)? If you borrow the money, whom will you borrow it
from, and how will you pay it back?

8. SOURCE OF DOWN PAYMENT AND CLOSING COSTS

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

10. DEBT

	TO WHOM DO YOU AND THE CO-APPLICANT(S) OWE MONEY?					
	APPLICANT			CO-APPLICANT		
Account	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Other motor vehicle	\$	\$	\$	\$	\$	\$
Boat	\$	\$	\$	\$	\$	\$
Furniture, appliances, TVs (includes rent-to-own)	\$	\$	\$	\$	\$	\$
Alimony	\$	\$	\$	\$	\$	\$
Child support	\$	\$	\$	\$	\$	\$
Credit card	\$	\$	\$	\$	\$	\$
Credit card	\$	\$	\$	\$	\$	\$
Credit card	\$	\$	\$	\$	\$	\$
Total medical	\$	\$	\$	\$	\$	\$
Other	\$	\$	\$	\$	\$	\$
Other	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$

MONTHLY EXPENSES					
Account	Applicant	Co-applicant	Total		
Rent	\$	\$	\$		
Utilities	\$	\$	\$		
Insurance	\$	\$	\$		
Child care	\$	\$	\$		
Internet service	\$	\$	\$		
Cell phone	\$	\$	\$		
Land line	\$	\$	\$		
Business expenses	\$	\$	\$		
Union dues	\$	\$	\$		
Other	\$	\$	\$		
Other	\$	\$	\$		
Other	\$	\$	\$		
Total	\$	\$	\$		

11. DECLARATIONS										
Please check the box beside the word that best answers the following questions for you and the co-applicant:										
			Ар	plicant			Co	-applicant		
a.	Do you have any outstanding judgments because of a court decision against you?	,		Yes		No		Yes		No
b.	Have you been declared bankrupt within the past seven years?			Yes		No		Yes		No
C.	Have you had property foreclosed on or deed in lieu of foreclosure in the past sev	en years?		Yes		No		Yes		No
d.	Are you currently involved in a lawsuit?			Yes		No		Yes		No
e.	Have you directly or indirectly been obligated on any loan which resulted in forecle of title in lieu of foreclosure, or judgment?	osure, transfer		Yes		No		Yes		No
f.	Are you currently delinquent or in default on any federal debt or any other loan, me financial obligation or loan guarantee?	ortgage		Yes		No		Yes		No
g.	Are you paying alimony or child support or separate maintenance?			Yes		No		Yes		No
h.	Are you a co-signer or endorser on any loan?			Yes		No		Yes		No
i.	Are you a U.S. citizen or permanent resident?			Yes		No		Yes		No
12	ALITHOPIZATION AND DELEASE									
I understand that by filing this application, I am authorizing Dorchester Habitat for Humanity, Inc. 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. I understand that the evaluation will include personal visits, 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 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 Dorchester Habitat for Humanity, Inc. even if the application is not approved.										
I also understand that Dorchester Habitat for Humanity, Inc. 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.										
App	olicant signature Date Co-applic	cant signature				Date				
х_	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.										
13.	. RIGHT TO RECEIVE COPY OF APPRAISAL									
This is to notify you that we may order an appraisal in connection with your loan 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.										

Co-applicant's name ___

Applicant's name ____

14. 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 designatio American Indian or Alaska Native Native Hawaiian or other Pacific Islander Black/African-American White Asian Ethnicity:	 □ American Indian or Alaska Native □ Native Hawaiian or other Pacific Islander □ Black/African-American □ White □ Asian Ethnicity:
Hispanic or Latino	Hispanic or Latino Non-Hispanic or Latino Sex: Female Male Birthdate:// Marital status: Separated Separated Unmarried (single, divorced, widowed)
To be completed only by the person conducting the interview This application was taken by:	Interviewer's name (print or type)
□ Face-to-face interview	
□ By mail	Interviewer's signature Date
□ By telephone	
	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 **Southeast Region, 225 Peachtree St. NE, Suite 1500, Atlanta GA 30303,** 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							

