

7. MONTHLY INCOME AND COMBINED MONTHLY BILLS

Gross Monthly Income	Applicant	Co-Applicant	Other Household	Monthly Bills	Monthly Amount
Base Employment Income	\$	\$	\$	Rent	\$
AFDC/TANF				Utilities	
Food Stamps				Car Payments	
Social Security				Insurance	
SSI				Child care	
Disability				School Lunch	
Alimony				Average Credit Card Payment	
Child Support				Student Loans	
Other				Alimony/Child Support	
Total	\$	\$	\$	Total	\$

9. ASSETS

List Checking and Savings Accounts Below

Name and Address of Bank, Savings & Loan, or Credit Union:		Name and Address of Bank, Savings & Loan, or Credit Union:	
Account Number:	Balance \$	Account Number:	Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union:		Name and Address of Bank, Savings & Loan, or Credit Union:	
Account Number:	Balance \$	Account Number:	Balance \$

10. DEBT

To Whom Do You and the Co-Applicant Owe Money?

Name and Address of Company	Monthly Payment	Unpaid Balance	Name and Address of Company	Monthly Payment	Unpaid Balance
	\$	\$		\$	\$
	Mos. left to pay:			Mos. left to pay:	
Name and Address of Company	Monthly Payment	Unpaid Balance	Name and Address of Company	Monthly Payment	Unpaid Balance
	\$	\$		\$	\$
	Mos. left to pay:			Mos. left to pay:	
Name and Address of Company	Monthly Payment	Unpaid Balance	Alimony/Child Support	\$	/month
	\$	\$	Job-Related Expenses	\$	/month
	Mos. left to pay:		(Child Care, Union Dues, etc.)	\$	/month
Name and Address of Company	Monthly Payment	Unpaid Balance	Column 2: Subtotal of Payments	\$	/month
	\$	\$	Column 1: Subtotal of Payments	\$	/month
	Mos. left to pay:		Total Monthly Expenses	\$	/month
Column 1: Subtotal of Payments	\$	/month			

12. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to be a partner family. 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. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

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.

You may be contacted for a personal interview.