1920 Hutton Street Wilmington, DE 19802 www.habitatncc.org



phone 302 652 0365 **fax** 302 652 1006 **Tax ID** 51-0294138

Pre-Qualification

Today's Date:
Please provide the documentation below with your pre-qualification packet.
Monthly budget
2 previous pay stubs (if receiving child support, please provide payment history.)
Proof of rental history (12 months.)
When completed, please mail to Habitat for Humanity of New Castle County. If you pre-qualify, you will be contacted for a meeting where you will receive an application. Pre-qualification does not guarantee approval.
Please be advised that Habitat for Humanity will NOT return or copy documents.
The due date for this packet is





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pplicant Name		Co-Applicant Name	
Address		Home Phone Number	
CityStateZip Code Home Phone Number		Age	
Age E-Mail Addre	ss		
Dependents			
Name	Age	Male Female	
Today's Date:			



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Today's Date:
Have you lived at your current residence for at least 1 year?
Have you paid your rent on time for the past year?
How long have you worked at your current job for?If less than a year, how long at previous job?
Have you filed for bankruptcy in the last year? If so, when?
Are you a United States citizen or a permanent resident?
Are you willing to complete 225 hours of sweat equity?
Are the members of your household over 18 willing to do 150 sweat equity hours?
Are you willing to complete the financial and construction courses?
Are you willing to be an ambassador for Habitat for Humanity of New Castle County?
Why do you wish to own a Habitat house?



Family Selection Guidelines

Employment

- Applicants must be employed at their current position for one year.
- Employment verification will be requested
- You will supply proof of income
- A lien search will be performed to determine if you have any outstanding liens
- All candidates must meet the income guidelines as established by HUD

Residency

- Anyone applying for a Habitat home must either work or live in the state of Delaware for a period of 1
 year
- Rental verification submitted to your landlord

Income

• You must meet the income requirements as defined on the guideline sheet

Credit

- One of your three credit scores must be at least a 570
- No more the 1500.00 in outstanding collection items
- Your current monthly debt can't exceed 20% of your gross monthly income

Background check

- A background check will be conducted on all applicants that are accepted in the program
- Sex offenders check will also be conducted

Classes

- Attend a 4 week construction class that teaches you how to work on the construction site that is held on
 4 consecutive Saturdays
- Foundations class that is held monthly to help you learn how to maintain you finances and budget
- A fee of \$100.00 is due at the start of your Foundations class
- Monthly family partner meetings to update you on your progress and offer support
- Attend a settlement class that is held at an attorney's office to educate you on the process

Partnership

- When returning paper work Please remember we need copies of any and all documentation. We will not
 make copies nor will we return any documents.
- Answering all questions on this pre-qualification packet/documents truthfully. If falsification is found throughout the application you will be denied.
- Any one accepted into the program will agree to complete 225 hours of sweat equity hours
- Co applicants or anyone over the age of 18 living in the household must complete 150 sweat equity
- Upon completion of all requirements you will move into your Habitat home and a loan will be given to you with 0 percent interest and a \$500.00 down payment will be required to prior to settlement
- The process takes about 9 to 12 months to complete



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2016 Income Guidelines

Family Size	Minimum	Maximum
One	\$25,000	\$33,780
Two	\$25,000	\$38,580
Three	\$25,000	\$43,380
Four	\$25,000	\$48,180
Five	\$27,000	\$52,080
Six	\$29,400	\$55,920
Seven	\$31,350	\$59,760
Eight	\$31,300	\$63,600

MONTHLY SPENDING PLAN WORKSHEET

DIRECTIONS:

- 1) Please record your monthly expenses for each item (rent, groceries, gasoline, etc).
- 2) Do not include expense items automatically deducted from your pay (health care, union dues, etc).
- 3) Add expense amounts for each category (housing, transportation, credit cards, etc).
- 4) Add each category totals and record on Grand Total line.

HOUSING	Amt \$	FOOD	Amt \$	TRANSPORTATION	Amt \$
Rent		Groceries		Car Payment	
Furniture Rental		Lunches		Parking	
Electricity		Restaurants		Insurance	
Gas		Fast Foods		Tolls	
Oil		Snacks		Gasoline	
Cable TV		Other		Maintenance	
Telephone		Food Total		Repairs	
Cell Phone				Bus/Subway	
Internet Access		HEALTHCARE (out-of-pocket expense)		Other	
Laundry		Doctor		Transportation Total	
Rental Insurance		Dentist			
Other		Prescriptions		CREDIT CARDS	
Housing Total		Other		Retail Cards	
-		Health Care Total		Gasoline Cards	
				MasterCard/Visa	
EDUCATION		LOOKING GOOD		Other	
Tuition		Clothes		Credit Cards Total	
Books		Shoes			
Parking Permit		Cosmetics			
Lab Fees		Toiletries		LEISURE	
Tutoring		Cleaners		Movies	
Field Trips		Barber/Beauty		Dates	
Art Supplies		Other		Arcade	
Club Dues		Looking Good Total		Trips	
Sports Fees					
Lockers		STUFF (that doesn't fit elsewhere)		Pets (food, grooming, etc.)	
Other		Savings		CDs/Videos	
Education Total		Investments		DVDs	
Zamemion I oitti		Gifts		Hobbies	
		Charity		Other	
		Books/Magazines/ Newspapers		o anor	
		Other		Leisure Total	
		Stuff Total		Leisure Total	

GRAND TOTAL (add category totals above): \$



Financial Coaching Referral Form

Name	Phone		Email	
City	County		Language Preferred	
Person Making the Referral:				
Nyell Spicer Family Service Coordinator		302-652-0365 Ext.108		
Name/Title			Phone	
BWard@Habitatncc.Org		Habitat for Humanity of NCC		
Email		Business/Organization		
If client has stated a financial go	al, please indicate	here:		
I authorize my contact informa	tion, updates and	progress rep	orts to be released to the \$tand	
By Me Financial Coach and to the	he Referral Agent I	listed above		
Signature		Date		

Send this form by email to:

Laura.Gendreau@state.de.us

If you have questions, contact Laura Gendreau: (302) 255-9271 Office or 302- 283-9246

Applicant's name	Co-applicant's name	

13. 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 the purchase of homes, 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.)

cable state law for the loan applied for.)				
Applicant		Co-applicant		
☐ I do not wish to furnish this informa	tion	□ I do not wish to furnish this information		
Race/National Origin: ☐ American Indian or Alaskan Native ☐ Native Hawaiian or Other Pacific Island ☐ Black/African American ☐ Caucasian ☐ Asian ☐ American Indian or Alaskan Native AN ☐ Asian AND Caucasian ☐ Black/African American AND Caucasian ☐ American Indian or Alaskan Native AN	D Caucasian n	Race/National Origin: ☐ American Indian or Alaskan Native ☐ Native Hawaiian or Other Pacific Islander ☐ Black/African American ☐ Caucasian ☐ Asian ☐ American Indian or Alaskan Native AND Caucasian ☐ Asian AND Caucasian ☐ Black/African American AND Caucasian ☐ American Indian or Alaskan Native AND Black/African American		
□ Other (specify) Ethnicity: □ Hispanic □ Non-Hispanic	·	☐ Other (specify) Ethnicity: ☐ Hispanic ☐ Non-Hispanic		
Sex: □ Female □ Male Birthdate://		Sex: Female		
Marital Status: ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed)		Marital Status: ☐ Married ☐ Separated ☐ Unmarried (Incl. 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	Interviewer's Signature Date			
□ By Mail □ By Telephone	Interviewer's Phone Number			