

Questionnaire

Please print clearly in INK. Fill in ALL sections.

Applicant Information: "Applicant" refers to the person who wants to be the homeowner.

Name: _____
 First Middle Last Social Security Number Date of Birth

Address: _____
 Street Apt. Number City State Zip

Preferred Phone: _____ home work cell

- Have you had steady income in the U.S. for at least 2 years (disability and public assistance count)? yes no
- Do you own a home now, or have you owned a home within the last 3 years? yes no
- Do you have a bankruptcy that has not been discharged within the last two years? yes no
- Have you lived in Hamilton County for the last 12 months? yes no
- Do you have two years stable rent history with good references? yes no

Main Employer: _____ How long have you worked here? _____
 full-time part-time Number of hours worked each week: _____

Pay: _____ This pay rate is: hourly weekly every other week twice monthly monthly yearly

Co-Applicant Information: "Co-Applicant" refers to the person who will share home ownership. Your household may or may not have a "co-applicant".

Name: _____
 First Middle Last Social Security Number Date of Birth

Address: _____
 Street Apt. Number City State Zip

Preferred Phone: _____ home work cell

- Have you had steady income in the U.S. for at least 2 years (disability and public assistance count)? yes no
- Do you own a home now, or have you owned a home within the last 3 years? yes no
- Do you have a bankruptcy that has not been discharged within the last two years? yes no
- Have you lived in Hamilton County for the last 12 months? yes no
- Do you have two years stable rent history with good references? yes no

Main Employer: _____ How long have you worked here? _____
 full-time part-time Number of hours worked each week: _____

Pay: _____ This pay rate is: hourly weekly every other week twice monthly monthly yearly

Additional Household Income (Monthly)

OTHER Applicant Employment: \$ _____
(NOT listed above)

OTHER Co-Applicant Employment: \$ _____
(NOT listed above)

Employment income: (all other household members over the age of 18) \$ _____

Child Support: \$ _____

AFDC / Families First: \$ _____

Food Stamps: \$ _____

Other Income: \$ _____

Monthly Debt Expenses for Applicant and Co-Applicant

Rent amount: \$ _____

Car Payment(s): \$ _____

Credit Card Payments: (add all minimum payment amounts together) \$ _____

Child Support Payments: \$ _____

Student Loan Payments: \$ _____

Other Scheduled Debt Payments: \$ _____
(add all minimum payment amounts together)

Your Housing Need:

How many people would be living in your home? Number of Adults: _____ Number of Children: _____

Do you currently live in Public Housing? yes no

Do you currently receive Section 8 Rental Assistance? yes no

If you receive Section 8 Rental Assistance, are you a participant in the Family Self-Sufficiency Program? yes no

Briefly describe your current housing situation. Tell us what it is about your home that makes life more difficult for your family.

Your Willingness to Partner with Habitat for Humanity of Greater Chattanooga:

If your family is selected, are you willing to meet the requirements for Habitat Partner Families, including:

- paying \$2,100 in closing costs on the mortgage;
 - attending homeownership classes;
 - learning about construction and home maintenance;
 - assisting other Habitat Partner Families in building their homes;
 - assisting EVERY DAY during the building of your own home; and
 - being good ambassadors for Habitat in the community so this important work can continue?
- yes, I am/we are willing to meet these requirements if selected for the program.
- no, I am/we are not willing to meet these requirements.

How did you hear about the Habitat for Humanity program?

- Friend or Family Member Internet
- Habitat Homeowner / Partner Family Who? TV, Newspaper, Magazine
- Another Agency Who? Other Where?

Where did you get this questionnaire?

- Friend or Family Member Habitat for Humanity of Greater Chattanooga Office
- Internet Another Agency Who?
- Habitat Homeowner / Partner Family Who?

By signing and submitting this questionnaire, I/we request consideration for Habitat for Humanity of Greater Chattanooga’s homeownership program. I understand that my credit report will be used to help determine my eligibility.

Applicant Signature

Co-Applicant Signature

DATE _____

Please mail or return this questionnaire to:

Habitat for Humanity of Greater Chattanooga
Attn: Connie O’Neal
1201 E. Main Street
Chattanooga, TN 37408
Fax: 423-756-0509