When complete, return this application and all supplemental documents to the Habitat office.

Habitat for Humanity® of Kosciusko County

We pledged to the letter and spirit of the 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.

EQUAL HOUSING OPPORTUNITY

Home Repair Program Application

This box is for Habitat staff use only. Applicant section begins on page 2.

Family Name: _____ *Date Received:* _____

Meets Minimum Income: ☐*Yes* ☐*No* *Date Incomplete Letter Sent:* _____

Date of Adverse Action Letter: _____ *Home Visit On:* _____

HV Completed By: _____ *HV Score:* _____

Date of Board Approval: _____ *Date of PF Agreement:* _____

This box is for Habitat staff use only. Applicant section begins on page 2.

Before filling out this application, please fully review the Program Guide to ensure you qualify.
Please Note: If more space is needed to complete any section of this application, use the optional last page of this application form. Please mark your additional comments with "A" for Applicant or "C" for Co-Applicant.

1. APPLICANT INFORMATION (Please Print)

Full Name: _____ Age: _____

Date of Birth: _____ Social Security No._____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

Married _____ Single _____ Divorced _____ Separated _____ Unmarried _____

How long have you lived in Kosciusko County? _____

Applicant's dependents: people who live with you in your home

Name	Birth Date	M/F	Relationship

2. CO-APPLICANT INFORMATION (Please Print)

Full Name: _____ Age: _____

Date of Birth: _____ Social Security No._____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

Married _____ Single _____ Divorced _____ Separated _____ Unmarried _____

How long have you lived in Kosciusko County? _____

Co-Applicant's dependents: people who live with you in your home (that aren't already listed by Applicant)

Name	Birth Date	M/F	Relationship

3. WILLINGNESS TO PARTNER

To be considered for a Habitat repair, you and your family must be willing to complete a certain number of "invested-equity" hours. Your help in repairing your home, repairing or helping construct the homes of others is called "invested-equity" and may include clearing lots, painting, helping with construction, working in the Habitat office, attending homeownership and financial literacy classes or other approved activities, as described on page 2 of the Program Guide. By initialing here, you agree to complete any and all requirements of invested-equity:

Applicant initials _____ Co-Applicant initials _____

4. PRESENT HOUSING SITUATION

Currently OWN:

Note: We are UNABLE to perform any repairs on rental houses or multi-unit dwellings, and we can only do furnace replacements for some mobile homes.

How many people live in your current housing: _____ Monthly Payment: _____

How long have you lived in your current housing: _____ Number of Bedrooms: _____

Check all rooms present in current housing: Kitchen ____ Bathroom (how many?) _____ Living Room _____

Dining Room _____ Other (describe)_____

Is your home on a permanent foundation or a mobile home? _____

What is the unpaid mortgage balance: _____ Mortgage Lender: _____

Lender Address: _____ Phone Number: _____

Please check the applicable box for the system in need of repair (check all that apply):

Roof ☐

HVAC: ☐ Furnace ☐ Air Conditioning ☐ Both

Briefly describe the repair needed:_____

_____

_____

_____

Do you own any other property? _____ If yes, please describe, including location: _____

_____

_____

Is there a mortgage on the property? _____ If Yes, what is the monthly payment: _____

Unpaid mortgage balance: _____ (Please supply a copy of the most current mortgage statement.)

5. EMPLOYMENT HISTORY

APPLICANT

Current Employer: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Job Title: _____

Start Date: _____ Average Hours per week: _____ Average Overtime per week: _____

Is your job seasonal? Select one: Yes No If so, how many months of the year do you work: _____

Gross Pay Rate: _____ Frequency: _____ Type of tax form: W-2 1099

Complete this section if you currently have more than one job or if you have been at your current job less than 2 years.

Select one: Second job Previous employer

Employer Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Job Title: _____

Start Date: _____ Average Hours per week: _____ Average Overtime per week: _____

Is your job seasonal? Select one: Yes No If so, how many months of the year do you work: _____

Gross Pay Rate: _____ Frequency: _____ Type of tax form: W-2 1099

Complete this section if you currently have more than one job or if you have been at your current job less than 2 years.

Select one: Third job Previous employer

Employer Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Job Title: _____

Start Date: _____ Average Hours per week: _____ Average Overtime per week: _____

Is your job seasonal? Select one: Yes No If so, how many months of the year do you work: _____

Gross Pay Rate: _____ Frequency: _____ Type of tax form: W-2 1099

CO-APPLICANT (continued on next page)

Current Employer: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Type of Business: _____

Start Date: _____ Average Hours per week: _____ Average Overtime per week: _____

Is your job seasonal? Select one: Yes No If so, how many months of the year do you work:

Gross Pay Rate _____ Frequency_____ Type of tax form: W-2 1099

Complete this section if you currently have more than one job or if you have been at your current job less than 2 years.

Select one: ◯ Second job ◯ Previous employer

Employer Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Type of Business: _____

Start Date: _____ Average Hours per week: _____ Average Overtime per week: _____

Is this job seasonal? Select one: ◯ Yes ◯ No If so, how many months of the year do you work:

_____ Gross Pay Rate _____ Frequency_____ Type of tax form: ◯ W-2 ◯ 1099

Complete this section if you currently have more than one job or if you have been at your current job less than 2 years.

Select one: ◯ Third job ◯ Previous employer

Employer Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Type of Business: _____

Start Date: _____ Average Hours per week: _____ Average Overtime per week: _____

Is this job seasonal? Select one: ◯ Yes ◯ No If so, how many months of the year do you work:

Gross Pay Rate _____ Frequency_____ Type of tax form: ◯ W-2 ◯ 1099

6. MONTHLY INCOME

Income Source	Applicant	Co-Applicant	Others in Household	Total
Monthly Gross Wages (All Jobs)	$	$	$	$
TANF	$	$	$	$
Alimony	$	$	$	$
Child Support	$	$	$	$
Social Security	$	$	$	$
Supplemental Security Income (SSI)	$	$	$	$
Disability	$	$	$	$
Pension / Retirement	$	$	$	$
Other: _____	$	$	$	$
Other: _____	$	$	$	$
Other: _____	$	$	$	$
Total	**$**	**$**	**$**	**$**

7. BANK ACCOUNT BALANCES

This includes checking, savings, Direct Express cards, and digital wallet apps such as PayPal, Cash App, Venmo, etc.

Name of bank/credit union	Address	Checking	Savings	Retirement	Balance
		$	$	$	$
		$	$	$	$
		$	$	$	$
		$	$	$	$

8. DEBT

	APPLICANT			CO-APPLICANT		
Account	Monthly payment	Unpaid Balance	Months left to pay	Monthly payment	Unpaid Balance	Months left to pay
Car Loan	$	$		$	$	
Student Loans	$	$		$	$	
Alimony	$	$		$	$	
Child Support	$	$		$	$	
Credit Card	$	$		$	$	
Credit Card	$	$		$	$	
Credit Card	$	$		$	$	
Medical	$	$		$	$	
Furniture	$	$		$	$	
Judgements	$	$		$	$	
Other	$	$		$	$	
Total	$	$	N/A	$	$	N/A

9. MONTHLY BILLS

Mortgage	$	Other:	$
Utilities: Gas, Water, Electric	$	Other:	$
Auto Insurance	$	Other:	$
Phone & Internet	$	Total Monthly Bills	$

Current Vehicles (Applicant and Co-Applicant): Make_____ Model_____ Year_____

Make_____ Model_____ Year_____

Make_____ Model_____ Year_____

10. DECLARATIONS		
Habitat for Humanity analyzes each applicant and co-applicant's credit report. This section of the application is your opportunity to explain any problems or irregularities that may appear on your credit report.		
Circle the appropriate answer.	Applicant	Co-applicant
1. Do you have any outstanding judgements because of a court decision against you and/or any debts in collections?	Yes No	Yes No
2. Have you filed for bankruptcy within the past 2 years?	Yes No	Yes No
3. Have you had property foreclosed on or deed in lieu of foreclosure in the past 7 years?	Yes No	Yes No
4. Are you currently involved in a lawsuit?	Yes No	Yes No
5. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgement?	Yes No	Yes No
6. Are you currently delinquent or in default on any federal debt or any other loan, mortgage, financial obligation, or loan guarantee?	Yes No	Yes No
7. Are you paying alimony or child support or separate maintenance?	Yes No	Yes No
8. Are you a co-signer or endorser on any loan?	Yes No	Yes No
9. Are you behind or delinquent on your present mortgage, property taxes, sewer bills, and/or homeowner's insurance?	Yes No	Yes No
10. Are you a U.S. citizen or permanent resident?	Yes No	Yes No
If you answered "yes" to questions 1-9, or "no" to question 10, please explain on page 10.		

11. AUTHORIZATION AND VERIFICATION

I understand that by filling out this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat Home Repair Program, my ability to repay any loan and other expenses for the repair, and my willingness to be a partner through sweat-equity. I understand that the evaluation will include personal visits, a credit check, a sex-offender check, a criminal background check and income verification. I submit any person listed in this application to such inquiry.

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 repair, 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. I understand this statement and realize all information is confidential. I understand that Habitat does not charge for services.

_____ _____

Applicant Signature Date Co-Applicant Signature Date

Wet signature required. If submitted digitally, Habitat staff will print the application for you to sign at your appointment.

APPENDIX A	
PLEASE ENSURE THE FOLLOWING SECTIONS OF YOUR APPLICATION ARE FILLED OUT COMPLETELY	
	Applicant Employment – Names and addresses of current and former employers for 2 years filled out.
	Co-Applicant Employment – Names and addresses of current and former employers for 2 years filled out.
	Mortgage Lender information – Names and address of current mortgage holder
	Income information about ALL members of the household.
	Current mailing address as well as physical address (if different).
	Application Authorization on page 7 is signed and dated.
IN ADDITION TO THE APPLICATION, YOU WILL NEED TO BRING COPIES OF THE FOLLOWING:	
	Last **2 MONTHS** of paystubs (applicant and co-applicant, if applicable).
	Last **3 MONTHS** of bank or digital wallet statements (Direct Express, Chime, Cash App, PayPal, etc.), this includes both checking and savings. Printouts from online banking are acceptable.
	Verification of current homeowner's insurance policy.
	Divorce Decree if applicable.
	Proof of Bankruptcy discharge if applicable.
	Most recent utility bills.
	DRIVERS LICENSE & SOCIAL SECURITY CARD OR PROOF OF US RESIDENCY.
	BIRTH CERTIFICATES AND SOCIAL SECURITY CARDS FOR ALL FAMILY MEMBERS.
	Verification of Social Security/ Disability or Pension/Retirement if applicable.
	Verification of Student Loan Payment/ Status **(even if in forbearance).**
	Verification of Food Stamps / TANF/ AFDC.
	Verification of Child Support Income – if claiming.
	Credit Reports on all applicants (Habitat will do this at the time of application).
	LAST 3 YEARS OF FEDERAL TAX TRANSCRIPTS – available at www.irs.gov/individuals/order-a-transcript or by calling 1-800-829-1040 (Takes 5-10 days).

APPENDIX B

Completed applications and all supplemental documents are due to the Habitat office by

3:00pm on 03/13/2026

- Visit kosciuskohabitat.org/apply or call 574-269-4104 to schedule your application appointment. Bring completed application and all required documents to your appointment. You **must** have an appointment!
- ONLY APPLICATIONS THAT ARE FULLY COMPLETED WILL BE CONSIDERED.
- You must be willing to have someone from the Habitat for Humanity visit your home to assess your present living situation. This will be done a few weeks after submitting your application.
- Know that there may be a 6-12 month waiting period from the time of being chosen until your home repair is started. The average time in the program is 12 months from acceptance to repair completion.
- Partner families are expected to begin earning sweat-equity hours as soon as they are chosen.
- Partner families must budget for and begin saving toward their repair cost.
- Partner Families are expected to be willing to be a part of the Habitat vision and ministry and help make it possible for others to be a recipient of Habitat's programs.
- You must be willing to supply any additional documentation necessary to secure funding needed to cover the cost of your repair work.
- **You are responsible for notifying Habitat for Humanity if your address or phone number changes.**

Applications and supplemental documents are due to the Habitat office by 3:00pm on 03/13/2026

Habitat for Humanity® of Kosciusko County

Habitat for Humanity
Kosciusko County
P.O. Box 1913
Warsaw, IN 46582
574-269-4104
info@kosciuskohabitat.org

EQUAL HOUSING OPPORTUNITY

Optional page for additional housing history, employment history, and/or declarations explanations. Please mark your additional comments with "A" for Applicant or "C" for Co-Applicant and note which section of the application you are including information for.