

New Home Construction Pre-Qualification Form

Date received by Habitat Office

For office use only

HFHFC partners with qualified area families to build safe, decent, and affordable housing.

Note: The applicant must have been a resident of Franklin County for the past year and cannot have any outstanding judgments. Those who have taken bankruptcy must reestablish a good credit history for a period of at least 2 years from the discharge date for Chapter 7, and at least one year from the discharge date for Chapter 13, before they will be approved to partner with Habitat. All applicants and members of their household will be checked against sex offender and criminal registries.

Applicant Name:	Co-Applicant Name:
Date of birth:	
Address:	Address:
City/State/Zip:	City/State/Zip:
Home/Cell Phone:	Home/Cell Phone:
Email:	Email:
Is any household member Military / Veteran How did you hear about Habitat? Newspaper	Disabled Poster/FlierTalkOther (please specify)
	to your current housing? (check all that apply) Public housing Homeless Maintenance problems Overcrowding Rent too high
Have you tried to get a home loan before?I	f so, with whom, and what was the result?
	g to put in 200 "sweat equity" hours each working on your home?YesNo hours) of homeowner education and financial planning classes?YesNo st you?YesNoNo
INCOME.	
	least one year. Include social security, disability, child support, alimony, wage age weekly income by 52, and then divide by 12 to get your monthly income.
What is the Applicant's MONTHLY gross income?	What is the Co-Applicant's MONTHLY gross income?
List the names, ages, and MONTHLY gross incomes of Name A	ge Relationship MONTHLY Gross Income
What is the TOTAL monthly gross income of your hou Does your household's ANNUAL gross income fall within	usehold?
these limits for the number of people?YesNo	2 People \$34,280 - \$54,848 4 People \$42,850 - \$68,560 6 People \$49,706 - \$79,530
EXPENSES Can you save \$2000 for a down payment plus your fir	rst month's mortgage?YesNo
	ot monthly, add all payments you make annually and divide by 12. rance Child/Spousal support Credit card payments Loan payments \$ \$
Medical bills Student loans Water/Sewer Electric \$ \$ \$	ric Heating Oil/Gas Cable/Internet Phone Child Care \$ \$ \$
County (HFHFC). I hereby give explicit permission for HFHFC t ability to pay for a Habitat home. I also authorize HFHFC to co	requirements for being approved to buy a house with Habitat for Humanity of Franklin to obtain a credit report for the express purpose of evaluating my creditworthiness and onduct a criminal background check. Depending on my income and credit standing, I may nancing. By signing this form, I authorize Habitat to share this application with USDA and
Signature (Applicant)	Social Security Number Date
Signature (Co-Applicant)	Social Security Number Date



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