



# Would you like to be a Homeowner?

**What does a Habitat for Humanity home include?**  
**Energy Efficient Construction • Some Decorating Choices • and Much More!**

Dear Applicant Family,

Habitat for Humanity of St. Francois County (HFHSFC) is a nonprofit, ecumenical, Christian housing ministry that partners with families to build safe, decent, affordable homes. HFHSFC then sells these homes at no profit and low to no interest to partner families who could not otherwise afford their own homes. If you have an interest in our ministry, meet our general guidelines, and believe you qualify for a home according to the guidelines below, we encourage you to apply for a Habitat home. All information is considered confidential and is used only for appropriate purposes. To become a HFHSFC homeowner please call our office at (573) 760-1702 and request an application be mailed to you. Be sure to fill out the application completely and return it to our office by mailing it to P.O. Box 743, Farmington, MO 63640.

*Linda Dickerson*

Linda Dickerson  
Executive Director

You, the Applicant Family, will be considered for a Habitat for Humanity St. Francois County (HFHSFC) home if...

1. You are unable to purchase adequate housing through conventional means. You may also be experiencing such factors as overcrowding or heating systems problems.
2. You must have lived in St. Francois County for at least one year prior to applying.
3. All adults living in your home have a combined total income between 30-60% of the median family income in St. Francois County. *(see chart below)*
4. You must have an acceptable credit history. Monthly payments on debts must be less than 41% of the total household income. These debts might include car payments, medical bills, credit cards, loans & house payments. They do not include current expenses such as utilities & phone bills.

Example: 4 person household has a \$25,000 annual income divided by 12 months = \$2,083 per month minus monthly house payment of \$500 per month = approximately \$1500 x .41 (41%) = \$854 minus house payment of \$500, maximum monthly payment on debts = \$354.

Median Income	1 Person	2 People	3 People	4 People	5 People	6 People	7 People	8 People
100%	\$35,490.00	\$40,560.00	\$45,630.00	\$50,700.00	\$54,756.00	\$58,812.00	\$62,868.00	\$66,924.00
60%	\$21,294.00	\$24,336.00	\$27,378.00	\$30,420.00	\$32,854.00	\$35,287.00	\$37,721.00	\$40,154.00
Your Income								
30%	\$10,647.00	\$12,168.00	\$13,689.00	\$15,210.00	\$16,427.00	\$17,644.00	\$18,860.00	\$20,077.00

Since the Applicant Family would be buying the home from HFHSFC, they must demonstrate ability to pay the monthly house payment which consists of Mortgage + Property Taxes + Insurance + \$15 Maintenance Fee. HFHSFC house payments are determined by the cost of building the home. Smaller homes cost less. HFHSFC likes to have 20 year mortgages, however we can adjust this time frame if needed. Currently a three bedroom home with a 20 year mortgage and other payments is between \$500 and \$600 per month. The house payments will be used by HFHSFC to build more homes. The Applicant Family must complete 100 documented hours of volunteer HFHSFC service prior to completion of the selection process & conclusion of the contractual commitment with HFHSFC. The family must complete a minimum of 500 documented hours of volunteer service prior to conclusion of the contractual commitment with HFHSFC via sweat equity. Equity is the value of the property beyond the amount owned on it. Sweat equity is equity Applicant Families earn by working to help build the home with HFHSFC volunteers. Of the 500 sweat equity hours that must be completed, 300 hours must be completed by the occupants of the house & the other 200 hours may be completed by other family & friends. The Applicant Family will be required to work with a Family Partner, and all others affiliated with HFHSFC, who will assist them through the process. The Applicant Family must be present on the building site as requested and they must be a positive advocate for HFHSFC.

**If your family is selected...** The Applicant Family will meet their Family Partner and sign an agreement form & other documents as needed. Family Partner will share all information about the process needed and work with you to help get you started on a successful relationship with HFHSFC. Family Partner will work with the Applicant Family to determine whether HFHSFC has or can obtain a lot in a neighborhood in which they wish to live. The Applicant Family will be asked to complete 100 hours of documented sweat equity performing tasks such as lawn mowing, office work, restore work, etc as deemed necessary by HFHSFC. HFHSFC will work with the Applicant Family to select a floor plan that can be modified to meet the needs of the family. An architect will review this layout. There will be a ground breaking ceremony. The ground preparation work will be done and concrete footings poured. Building will begin once a \$500 down payment has been paid to HFHSFC & 100 hours of documented sweat equity hours have been completed by the Applicant Family. During the building process the Applicant Family, their family & friends, and other HFHSFC volunteers will work together. Plumbing, electricity, & other things as determined by HFHSFC will be done by professionals who often volunteer their time. Once the building process is complete, the Applicant Family has met the sweat equity requirements, paid the \$500 down payment, paid the first year homeowners insurance & met other agreed upon requirements. HFHSFC will have a closing and sell the home to the Applicant Family. Finally, we will have a house dedication to celebrate the Applicant Family being a homeowner!

For more info contact us today! P.O. Box 743, Farmington, MO 63640 • PHONE: (573) 760-1702

# APPLICATION FOR RURAL ASSISTANCE (NONFARM TRACT) Uniform Residential Loan Application

This application is designed to be completed by the applicant with the lender's assistance. Applicants should complete this form as "Applicant #1" or "Applicant #2", as applicable. All Applicants must provide information (and the appropriate box checked) when  the income or assets of a person other than the "Applicant" (including the Applicant's spouse) will be used as a basis for loan qualification or  the income or assets of the Applicant's spouse will not be used as a basis for loan qualification, but his or her liabilities must be considered because the Applicant resides in a community property state, the security property is located in a community property state, or the Applicant is relying on other property located in a community property state as a basis for repayment of the loan.

### I. TYPE OF MORTGAGE AND TERMS OF LOAN

Mortgage Applied for: <input type="checkbox"/> V.A. <input type="checkbox"/> Conventional <input type="checkbox"/> Other:	Agency Case Number	Lender Account Number
<input type="checkbox"/> FHA <input type="checkbox"/> USDA/Rural Housing Service		
Amount \$	Interest Rate %	No. of Months
	Amortization Type: <input type="checkbox"/> Fixed Rate <input type="checkbox"/> Other (Explain):	<input type="checkbox"/> GPM <input type="checkbox"/> ARM (Type):

### II. PROPERTY INFORMATION AND PURPOSE OF LOAN

Subject Property Address (Street, City, State, ZIP)		No. of Units
Legal Description of Subject Property (Attach description if necessary)		Year Built
Purpose of Loan <input type="checkbox"/> Purchase <input type="checkbox"/> Refinance <input type="checkbox"/> Construction <input type="checkbox"/> Construction-Permanent <input type="checkbox"/> Other (Explain):	Property will be: <input type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment	
<i>Complete this line if construction or construction-permanent loan.</i>		
Year Lot Acquired	Original Cost \$	Amount Existing Liens \$
	(a) Present Value of Lot \$	(b) Cost of Improvements \$
	Total (a + b) \$	
<i>Complete this line if this is a refinance loan.</i>		
Year Acquired	Original Cost \$	Amount Existing Liens \$
	Purpose of Refinance	Describe Improvements <input type="checkbox"/> Made <input type="checkbox"/> To be made
		Cost: \$
Title will be held in what Name(s)	Manner in which Title will be held	Estate will be held in: <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold (Show expiration date)
Source of Down Payment, Settlement Charges and/or Subordinate Financing (Explain)		

### III. APPLICANT INFORMATION

Applicant #1				Applicant #2			
Name (include Jr. or Sr. if applicable)				Name (include Jr. or Sr. if applicable)			
Social Security Number	Home Phone (Incl. Area Code)	DOB mm/dd/yy	Yrs. School	Social Security Number	Home Phone (Incl. Area Code)	DOB mm/dd/yy	Yrs. School
<input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Include single divorced, widowed)	Dependents (Not listed by Applicant #2) No. Ages			<input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Include single divorced, widowed)	Dependents (Not listed by Applicant #1) No. Ages		
Present Address (Street, City State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.				Present Address (Street, City, State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.			
Mailing Address if different from Present Address				Mailing Address if different from Present Address			
<i>If residing at present address for less than two years, complete the following:</i>							
Former Address (Street, City State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.				Former Address (Street, City, State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs.			

**IV. EMPLOYMENT INFORMATION**

Applicant #1			Applicant #2		
Name & Address of Employer	<input type="checkbox"/> Self-Employed	Yrs./Mos. on the job	Name & Address of Employer	<input type="checkbox"/> Self-Employed	Yrs./Mos. on the job
		Yrs./Mos. employed in this line of work/profession			Yrs./Mos. employed in this line of work/profession
Position/Title/Type of Business	Business Phone (Incl. Area Code)		Position/Title/Type of Business	Business Phone (Incl. Area Code)	
<i>If employed in current position for less than two years or if currently employed in more than one position, complete the following:</i>					
Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)	Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)
		Monthly Income			Monthly Income
		\$			\$
Position/Title/Type of Business	Business Phone (Incl. Area Code)		Position/Title/Type of Business	Business Phone (Incl. Area Code)	
Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)	Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)
		Monthly Income			Monthly Income
		\$			\$
Position/Title/Type of Business	Business Phone (Incl. Area Code)		Position/Title/Type of Business	Business Phone (Incl. Area Code)	

**V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION**

Gross Monthly Income	Applicant #1	Applicant #2	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income*	\$	\$	\$	Rent	\$	
Overtime				First Mortgage (P&I)		\$
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other (Before completing see the notice in "describe other income," below				Homeowner Assn. Dues		
				Other		
<b>Total</b>	\$	\$	\$	<b>Total</b>	\$	\$

**\*Self Employed Applicant may be required to provide additional documentation such as tax returns and financial statements.**

**Describe Other Income** Notice: *Alimony, child support, or separate maintenance income need not be revealed if the Applicant #1, (A 1) or Applicant #2 (A2) does not choose to have it considered for repaying this loan.*

A1/A2	Describe Other Income	Monthly Amount

**VI. ASSETS AND LIABILITIES**

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Applicants if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise separate Statements and Schedules are required. If the Applicant #2 section was completed about a spouse, this Statement and supporting schedules must be completed about that spouse also.

Completed  Jointly  Not Jointly

<b>ASSETS</b>		<b>Cash or Market Value</b>	<b>Liabilities and Pledged Assets.</b> List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property.		
Description			<b>LIABILITIES</b>	<b>Monthly Payment &amp; Months Left to Pay</b>	<b>Unpaid Balance</b>
Cash deposit toward purchase held by:	\$		Name and Address of Company	\$ Payment/Months	\$
<b>List checking and saving accounts below</b>			Acct. No.		
Name and Address of Bank, S&L, or Credit Union			Name and Address of Company	\$ Payment/Months	\$
Acct. No.	\$		Acct. No.		
Name and Address of Bank, S&L, or Credit Union			Name and Address of Company	\$ Payment/Months	\$
Acct. No.	\$		Acct. No.		
Name and Address of Bank, S&L, or Credit Union			Name and Address of Company	\$ Payment/Months	\$
Acct. No.	\$		Acct. No.		
Name and Address of Bank, S&L, or Credit Union			Name and Address of Company	\$ Payment/Months	\$
Acct. No.	\$		Acct. No.		
Name and Address of Bank, S&L, or Credit Union			Name and Address of Company	\$ Payment/Months	\$
Acct. No.	\$		Acct. No.		
Stocks & Bonds (Company name/number & description)	\$		Name and Address of Company	\$ Payment/Months	\$
	\$		Acct. No.		
	\$		Name and Address of Company	\$ Payment/Months	\$
	\$		Acct. No.		
Life insurance net cash value	\$		Name and Address of Company	\$ Payment/Months	\$
Face amount: \$			Acct. No.		
<b>Subtotal Liquid Assets</b>	\$		Name and Address of Company	\$ Payment/Months	\$
Real estate owned (Enter market value from schedule of real estate owned)	\$		Acct. No.		
Vested interest in retirement fund	\$		Name and Address of Company	\$ Payment/Months	\$
Net worth of business(es) owned (Attach financial statement)	\$		Acct. No.		
Automobiles owned (Make and year)	\$		Name and Address of Company	\$ Payment/Months	\$
	\$		Acct. No.		
	\$		Alimony/Child Support/Separate Maintenance Payments Owed to:	\$	
	\$		Job Related Expense (Child care, union dues, etc.)	\$	
	\$		<b>Total Monthly Payments</b>	\$	
Other Assets (Itemize)	\$				
	\$				
	\$				
	\$				
<b>Total Assets a.</b>	\$		<b>Net Worth (a minus b)</b>		
				<b>Total Liabilities b.</b>	\$

**VI. ASSETS AND LIABILITIES (cont.)**

**Schedule of Real Estate Owned** (If additional properties are owned, use continuation sheet.)

Properly Address (Enter S if sold, PS if pending sale or R if rental being held for income)	Type of Property	Present Market Value	Amount of Mortgage & Liens	Gross Rental Income	Mortgage Payments	Insurance Maintenance Taxes & Misc.	Net Rental Income
		\$	\$	\$	\$	\$	\$
Totals		\$	\$	\$	\$	\$	\$

List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):

Alternative Name	Creditor Name	Account Number

VII. DETAILS OF TRANSACTION		VIII. DECLARATIONS										
a. Purchase price	\$	If you answer "Yes" to any questions a through i, please use continuation sheet for explanation.		<b>Applicant #1</b> <b>Applicant #2</b>								
b. Alterations, improvements, repairs				<table border="1"> <tr> <th>Yes</th> <th>No</th> <th>Yes</th> <th>No</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Yes	No	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes	No			Yes	No							
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>							
c. Land (If acquired separately)				<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>							
d. Refinance (incl. debts to be paid off)				<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>							
e. Estimated prepaid items				<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>							
f. Estimated closing costs				<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>							
g. PMI, MIP, Funding Fee				<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
h. Discount (If Borrower will pay)		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
i. Total Costs (Add items a through h)		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
j. Subordinate financing		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
k. Borrower's closing costs paid by Seller		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
l. Other Credits (Explain)		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
m. Loan amount (Exclude PMI, MIP Funding Fee financed)		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
n. PMI, MIP, Funding Fee financed		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
o. Loan amount (Add m & n)		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
p. Cash from/to Borrower (Subtract j, k, l, & o from i)		<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									

**IX. ACKNOWLEDGMENT AND AGREEMENT**

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, services, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "loan") will be secured by a mortgage or deed of trust on the property described herein, (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated herein; (6) any owner or servicer of the Loan may verify or reverify any information contained in the application from any source named in this application, and Lender, its successors or assigns may retain the original and/or an electronic record of this application, even if the Loan is not approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the owner or servicer of the Loan may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer credit reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

Applicant's Signature	Date	Applicant's Signature	Date
<b>X</b>		<b>X</b>	

**X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, 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 particular type of loan applied for.)

BORROWER <input type="checkbox"/> I do not wish to furnish this information	CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

<b>To be Completed by Interviewer</b> This application was taken by: <input type="checkbox"/> face-to-face interview <input type="checkbox"/> by mail <input type="checkbox"/> by telephone <input type="checkbox"/> Internet	Interviewer's Name <i>(Print or type)</i>	Name and Address of Interviewer's Employer	
	Interviewer's Signature		Date
	Interviewer's Phone Number <i>(Incl. Area Code)</i>		

**Continuation For/Residential Loan Application**

Use if you need more space to complete the Residential Loan Application Mark A1 for Applicant #1 or A2 for Applicant #2	Applicant #1 (A1)	Agency Account Number:
	Applicant #2 (A2)	Lender Account Number:

# Additional Information Required for RHS Assistance

1. Loan Type: Section 502  Section 504 Loan  Grant

## APPLICANT #1

2. Have you ever obtained a loan/grant from RHS?

Yes  No

4. Are you a relative to an RHS Employee or Closing agent/attorney?

Yes  No

If yes, who? \_\_\_\_\_

Relationship \_\_\_\_\_

6. Are you a Veteran? Yes  No

## APPLICANT #2

3. Have you ever obtained a loan/grant from RHS?

Yes  No

5. Are you a relative to an RHS Employee or Closing agent/attorney?

Yes  No

If yes, who? \_\_\_\_\_

Relationship \_\_\_\_\_

7. Are you a Veteran? Yes  No

8. Complete for all household members.

To be considered eligible for RHS assistance, all household income including any income not shown in Section V of this application, must be disclosed below:

Name	Age	Are you a full time student? y/n	Do you want to be considered for an adjustment from household income because of a disabling condition? y/n	Annual Wage Income	Source of Wage Income (employer)	Annual Non-Wage Income	Source of Non-Wage Income (social security, alimony, child support, separate maintenance, etc.)

9. Child Care (*Minors who are 12 years of age or under for whom you have to hire a babysitter or leave at a child care center*)

Cost per week \$ \_\_\_\_\_ Cost per month \$ \_\_\_\_\_

10. Name, Address and Telephone No. of Child care Provider(s).

11. Characteristics of Present Housing

Does the Dwelling:

Lack complete plumbing

Yes

No

Physically deteriorated or structurally unsound

Yes

No

Lack adequate heating

Yes

No

Overcrowded (More than 2 persons per room)

Yes

No

12. Name, Address and Telephone Number of Present Landlord.

If residing at present address for less than two years, complete the following:

Name, Address and Telephone Number of Previous Landlord(s).

13. (*For Section 504 Grants Only*) I certify that as the condition of the grant, I/we will not engage in unlawful manufacture, distribution, dispensing, possession or use of a controlled substance in conducting any activity with the grant.

14. I am aware RHS does not warrant the condition or value of the property.



15. Notices to Applicant

**Privacy Act. See attached sheet.**

**Social Security Number.** The Debt Collection Act of 1982, Pub. L. 97-365, and 31 U.S.C. 7701(c) require persons applying for a federally insured or guaranteed loan to furnish his or her social security number (SSN). Failure to provide your SSN will result in the rejection of your application.

**Right to Request Copy of Appraisal.** You have the right to a copy of the appraisal report used in connection with your application for credit. If you wish a copy, please write us at the address of the Rural Development Field Office where you made application. In your written request, you must provide us with the complete name and address used when making application as well as a current mailing address. We must hear from you no later than 90 days after we notify you about the action taken on your credit application or you withdraw your application. The creditor, Rural Housing Service, may require you to reimburse the Agency for the cost of the appraisal.

**Right to Financial Privacy Act of 1978,** 12 U.S.C. 3401, et seq. You authorize RHS to have access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your loan and loan application will be available to RHS without further notice or authorization but will not be disclosed or released by RHS to another Government agency or department without your consent except as required or permitted by law.

**Federal collection policies for consumer debts:** Delinquencies, defaults, foreclosures and abuses of mortgage loans involving programs of the Federal Government can be costly and detrimental to your credit, now and in the future. The Federal Government, as mortgage lender in this transaction, its agencies, agents and assigns, are authorized to take any and all of the following actions in the event loan payments become delinquent on the mortgage loan covered by this application: (1) Report your name and account information to a credit bureau; (2) Assess additional interest and penalty charges for the period of time that payment is not made; (3) Assess charges to cover additional administrative costs incurred by the Government to service your account; (4) Offset amounts owed to you under other Federal programs, (5) Refer your account to a private attorney, the United States Department of Justice, a collection agency, or mortgage servicing agency to collect the amount due, and foreclose the mortgage, sell the property, and seek judgment against you for any deficiency; (6) If you are a current or retired Federal employee, take action to offset your salary, or civil service retirement benefits; (7) Refer your debt to the Internal Revenue Service for offset against any amount owed to you as an income tax refund; and (8) Report any resulting written-off debt of yours to the Internal Revenue Service as your taxable income. All of these actions can and will be used to recover any debts owed when it is determined to be in the interest of the lender and/or Federal Government to do so.

**Unlawful Discrimination.** "The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer."

The Fair Housing Act prohibits discrimination in real estate-related transactions, or in the terms or conditions of such a transaction, because of race, color, religion, sex, disability, familial status, or national origin. If you believe you have been discriminated against for any of these reasons you can write the U. S. Department of Housing and Urban Development, Washington, D.C. 20410 or call (800) 669-9777.

**Certification.** As the applicant, I certify to the best of my knowledge and belief: (1) I am not presently debarred, suspended, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency; (2) I have not within a three year period preceding this proposal been convicted or had a civil judgment rendered against me for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state, or local) transaction or contract under a public transaction; or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statement, or receiving stolen property; (3) I am not a judgment debtor on an outstanding judgment in favor of the United States which was obtained in any Federal court other than the United States Tax Court; and (4) I am not delinquent on any outstanding debt to the Federal Government (including any Federal agency or department).

**The Federal Equal Credit Opportunity Act** prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, sex, disability, familial status, national origin, marital status, age (provided the borrower has the capacity to enter into a binding contract), because all or a part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. If you believe you were denied a loan for this reason, you should contact the Federal Trade Commission, Washington, DC. 20580.



16. I AM unable to provide the housing I need on my own account, and I am unable to secure the credit necessary for this purpose from other sources upon terms and conditions which I can reasonably fulfill. I certify that the statements made by me in this application are true, complete to the best of my knowledge and belief and are made in good faith to obtain a loan.

**SECTION 1001 OF TITLE 18, UNITED STATES CODE PROVIDES: "WHOEVER, IN ANY MATTER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES KNOWINGLY AND WILLFULLY FALSIFIES, CONCEALS OR COVERS UP BY ANY TRICK, SCHEME, OR DEVICE A MATERIAL FACT, OR MAKES ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENTS OR REPRESENTATIONS, OR MAKES OR USES ANY FALSE WRITING OR DOCUMENT KNOWING THE SAME TO CONTAIN ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENT OR ENTRY, SHALL BE FINED UNDER THIS TITLE OR IMPRISONED NOT MORE THAN FIVE YEARS, OR BOTH."**

NOTE TO APPLICANT: IF ANY INFORMATION ON THIS APPLICATION IS FOUND TO BE FALSE OR INCOMPLETE, SUCH FINDING, IN ADDITION TO POSSIBLE LIABILITY UNDER CIVIL AND CRIMINAL STATUS, MAY BE GROUNDS FOR DENIAL FOR THE REQUESTED CREDIT AND MAY BE A BASIS FOR DEBARMENT FROM PARTICIPATION IN ALL FEDERAL PROGRAMS UNDER 7 C.F.R. PART 3017.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_  
**X**  
Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_  
**X**

17. Date	Signature of Loan Approval Official	Determination of Eligibility _____ Eligible _____ Not Eligible	Racial Data Provided by _____ Applicant _____ RHS
----------	-------------------------------------	---	--

18. Application received on \_\_\_\_\_  
Application completed on \_\_\_\_\_

19. Credit Report Fee  
Date Received: \_\_\_\_\_ Amount Received: \$ \_\_\_\_\_  
Initial: \_\_\_\_\_

## NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

The information requested on this form is authorized to be collected by the Rural Housing Service (RHS), Rural Business-Cooperative Services (RBS), Rural Utilities Service (RUS) or the Farm Service Agency (FSA) ("the agency") by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471 et seq.) or by the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et seq.), or by other laws administered by RHS, RBS, RUS or FSA.

Disclosure of information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Identification Number, may result in a delay in the processing of an application or its rejection. Information provided may be used outside of the agency for the following purposes:

1. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or order issued pursuant thereto, disclosure may be made to the appropriate agency, whether Federal, foreign, State, local, or tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity.
2. A record from this system of records may be disclosed to a Member of Congress or to a congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
3. Rural Development will provide information from this system to the U.S. Department of the Treasury and to other Federal agencies maintaining debt servicing centers, in connection with overdue debts, in order to participate in the Treasury Offset Program as required by the Debt Collection Improvement Act, Pub. L. 104-134, Section 31001.
4. Disclosure of the name, home address, and information concerning default on loan repayment when the default involves a security interest in tribal allotted or trust land. Pursuant to the Cranston-Gonzales National Affordable Housing Act of 1990 (42 U.S.C. 12701 et seq.), liquidation may be pursued only after offering to transfer the account to an eligible tribal member, the tribe, or the Indian Housing Authority serving the tribe(s).
5. Referral of names, home addresses, social security numbers, and financial information to a collection or servicing contractor, financial institution, or a local, State, or Federal agency, when Rural Development determines such referral is appropriate for servicing or collecting the borrower's account or as provided for in contracts with servicing or collection agencies.
6. It shall be a routine use of the records in this system of records to disclose them in a proceeding before a court or adjudicative body, when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee, or (d) the United States is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation, provided; however, that in each case, the agency determines that disclosure of the records is a use of the information contained in the records that is compatible with the purpose for which the agency collected the records.
7. Referral of names, home address, and financial information for selected borrowers to financial consultants, advisors, lending institutions, packagers, agents and private or commercial credit sources, when Rural Development determines such referral is appropriate to encourage the borrower to refinance the Rural Development indebtedness as required by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471), or to assist the borrower in the sale of the property .
8. Referral of legally enforceable debts to the Department of the Treasury, Internal Revenue Service (IRS), to be offset against any tax refund that may become due the debtor for the tax year in which the referral is made, in accordance with the IRS regulations at 26 C.F.R. 301.6402-6T, Offset of Past Due Legally Enforceable Debt Against Overpayment, and under the authority contained in 31 U.S.C. 3720A.
9. Referral of information regarding indebtedness to the Defense Manpower Data Center, Department of Defense, and the United States Postal Service for the purpose of conducting computer matching programs to identify and locate individuals receiving Federal salary or benefit payments and who are delinquent in their repayment of debts owed to the U.S. Government under certain programs administered by Rural Development in order to collect debts under the provisions of the Debt Collection Act of 1982 (5 U.S.C. 5514) by voluntary repayment, administrative or salary offset procedures, or by collection agencies.
10. Referral of names, home addresses, and financial information to lending institutions when Rural Development determines the individual may be financially capable of qualifying for credit with or without a guarantee.
11. Disclosure of names, home addresses, social security numbers, and financial information to lending institutions that have a lien against the same property as Rural Development for the purpose of the collection of the debt. These loans can be under the direct and guaranteed loan programs.
12. Referral to private attorneys under contract with either Rural Development or with the Department of Justice for the purpose of foreclosure and possession actions and collection of past due accounts, in connection with Rural Development.
13. It shall be a routine use of the records in this system of records to disclose them to the Department of Justice when: (a) The agency or any component thereof; or (b) any employee of the agency in his or her official capacity where the Department of Justice has agreed to represent the employee; or (c) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

**NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION- CONTINUED**

14. Referral of names, home addresses, social security numbers, and financial information to the Department of Housing and Urban Development (HUD) as a record of location utilized by Federal agencies for an automatic credit prescreening system.

15. Referral of names, home addresses, social security numbers, and financial information to the Department of Labor, State Wage Information Collection Agencies, and other Federal, State, and local agencies, as well as those responsible for verifying information furnished to qualify for Federal benefits, to conduct wage and benefit matching through manual and/or automated means, for the purpose of determining compliance with Federal regulations and appropriate servicing actions against those not entitled to program benefits, including possible recovery of improper benefits.

16. Referral of names, home addresses, and financial information to financial consultants, advisors, or underwriters, when Rural Development determines such referral is appropriate for developing packaging and marketing strategies involving the sale of Rural Development loan assets.

17. Rural Development, in accordance with 31 U.S.C. 3711(e)(5), will provide to consumer reporting agencies or commercial reporting agencies information from this system indicating that an individual is responsible for a claim that is current.

18. Referral of names, home addresses, home telephone numbers, social security numbers, and financial information to escrow agents (which also could include attorneys and title companies) selected by the applicant or borrower for the purpose of closing the loan.

19. Disclosures pursuant to 5 U.S.C. 552a(b)(12): Disclosures may be made from this system to consumer reporting agencies as defined in the Fair Credit Reporting Act (15 U.S.C. 168a(f) or the Federal Claims Collection Act (31U.S.C. 3701(a)(3)).

**United States Department of Agriculture  
Rural Development  
Rural Housing Service**

**AUTHORIZATION TO RELEASE INFORMATION**

TO: \_\_\_\_\_

RE: \_\_\_\_\_  
Account or Other Identifying Number

\_\_\_\_\_  
Name of Customer

I, and/or adults in my household, have applied for or obtained a loan or grant from the Rural Housing Service (RHS), part of the Rural Development mission area of the United States Department of Agriculture. As part of this process or in considering my household for interest credit, payment assistance, or other servicing assistance on such loan, RHS may verify information contained in my request for assistance and in other documents required in connection with the request.

I, or another adult in my household, authorize you to provide to RHS for verification purposes the following applicable information:

- Past and present employment or income records.
- Bank account, stock holdings, and any other asset balances.
- Past and present landlord references
- Other consumer credit references.

If the request is for a new loan or grant, I further authorize RHS to order a consumer credit report and verify other credit information.

I understand that under the Right to Financial Privacy Act of 1978, 12 U.S.C. 3401, et seq., RHS is authorized to access my financial records held by financial institutions in connection with the consideration or administration of assistance to me. I also understand that financial records involving my loan and loan application will be available to RHS without further notice or authorization, but will not be disclosed or released by RHS to another Government agency or department or used for another purpose without my consent except as required or permitted by law.

This authorization is valid for the life of the loan.

The recipient of this form may rely on the Government's representation that the loan is still in existence.

The information RHS obtains is only to be used to process my request for a loan or grant, interest credit, payment assistance, or other servicing assistance. I acknowledge that I have received a copy of the Notice to Applicant Regarding Privacy Act Information. I understand that if I have requested interest credit or payment assistance, this authorization to release information will cover any future requests for such assistance and that I will not be renofified of the Privacy Act information unless the Privacy Act information has changed concerning use of such information.

**A copy of this authorization may be accepted as an original.**

Your prompt reply is appreciated.

\_\_\_\_\_  
Signature (*Applicant or Adult Household Member*)

\_\_\_\_\_  
Date

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless as displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

## NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

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Disclosure of information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Identification Number, may result in a delay in the processing of an application or its rejection. Information provided may be used outside of the agency for the following purposes:

1. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or order issued pursuant thereto, disclosure may be made to the appropriate agency, whether Federal, foreign, State, local, or tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity.
2. A record from this system of records may be disclosed to a Member of Congress or to a Congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
3. Rural Development will provide information from this system to the U.S. Department of the Treasury and to other Federal agencies maintaining debt servicing centers, in connection with overdue debts, in order to participate in the Treasury Offset Program as required by the Debt Collection Improvement Act, Pub. L. 104-134, Section 31001.
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6. It shall be a routine use of the records in this system of records to disclose them in a proceeding before a court or adjudicative body, when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee, or (d) the United States is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation, provided; however, that in each case, the agency determines that disclosure of the records is a use of the information contained in the records that is compatible with the purpose for which the agency collected the records.
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11. Disclosure of names, home addresses, social security numbers, and financial information to lending institutions that have a lien against the same property as Rural Development for the purpose of the collection of the debt. These loans can be under the direct and guaranteed loan programs.
12. Referral to private attorneys under contract with either Rural Development or with the Department of Justice for the purpose of foreclosure and possession actions and collection of past due accounts in connection with Rural Development.
13. It shall be a routine use of the records in this system of records to disclose them to the Department of Justice when: (a) The agency or any component thereof; or (b) any employee of the agency in his or her official capacity where the Department of Justice has agreed to represent the employee; or (c) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

**NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION- CONTINUED**

14. Referral of names, home addresses, social security numbers, and financial information to the Department of Housing and Urban Development (HUD) as a record of location utilized by Federal agencies for an automatic credit prescreening system.

15. Referral of names, home addresses, social security numbers, and financial information to the Department of Labor, State Wage Information Collection Agencies, and other Federal, State, and local agencies, as well as those responsible for verifying information furnished to qualify for Federal benefits, to conduct wage and benefit matching through manual and/or automated means, for the purpose of determining compliance with Federal regulations and appropriate servicing actions against those not entitled to program benefits, including possible recovery of improper benefits.

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19. Disclosures pursuant to 5 U.S.C. 552a(b)(12): Disclosures may be made from this system to consumer reporting agencies as defined in the Fair Credit Reporting Act (15 U.S.C. 168a(f) or the Federal Claims Collection Act (31U.S.C. 3701(a)(3)).



**Habitat**  
for Humanity  
of St. Francois County

*Carolyn Delaney*  
Executive Director

Building  
homes,  
building  
hope

## EMPLOYMENT VERIFICATION FORM

Date: \_\_\_\_\_

\_\_\_\_\_ Has been employed by \_\_\_\_\_

Since \_\_\_\_\_, He/she works \_\_\_\_\_ hours per  
week at an hourly wage of \_\_\_\_\_.

If hours vary from week to week, the average number of hours this employee works per  
week is \_\_\_\_\_ at \_\_\_\_\_ per hour.

\_\_\_\_\_  
Employer/Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employers Phone Number

---

I hereby authorize my employer to release the above information concerning my income  
and employment history.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

PO Box 743  
Farmington, MO 63640  
Phone: (573) 786-1702  
Fax: (573) 786-2476



**LANDLORD'S VERIFICATION**

The Rural Housing Service (RHS) is evaluating the below named applicant's eligibility for a home ownership loan and we need to evaluate the applicant's rental payment history and care of the rental property. Please see the attached Form RD 3550-1, "Authorization to Release Information." RHS appreciates your assistance in helping us evaluate the applicant's credit history. A postage paid return envelope is provided for convenience in returning this verification. Please return this complete form to:

Applicant's Name and Address:

USDA, Rural Development  
Rural Housing Service

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

**LANDLORD - Please complete all of the following information:**

Date of occupancy: From: \_\_\_\_\_ To: \_\_\_\_\_ Current rent amount: \_\_\_\_\_  
Rent due date: \_\_\_\_\_ Is rent subsidized? \_\_\_\_\_  
If subsidized, amount: \$ \_\_\_\_\_ Who pays subsidy? \_\_\_\_\_  
Lease expiration date: \_\_\_\_\_  
Does rent include utilities or allowances? \_\_\_\_\_ Amount of utilities or allowances included in rent: \$ \_\_\_\_\_

List names and approximate ages of all persons occupying the property:

**RENTAL HISTORY DURING THE LAST 24 MONTHS:**

(please check one)

Always pays by the due date  
 Pays over 30 days late: (Dates of Occurrences: \_\_\_\_\_ )  
 Generally stays behind schedule

**CURRENT STATUS OF RENT:**

Current?  Behind?   
Amount behind: \$ \_\_\_\_\_  
Date last paid: \_\_\_\_\_  
Next due date: \_\_\_\_\_

\_\_\_\_\_  
Landlord's signature

\_\_\_\_\_  
Date completed

SEE ATTACHED PRIVACY ACT NOTICE

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

UNITED STATES DEPARTMENT OF AGRICULTURE  
Rural Development  
**PRIVACY ACT STATEMENT TO REFERENCES**

Rural Development is authorized by the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et. seq.); and Title V of the Housing Act of 1949, as amended (42 U.S.C. 1471 et. seq.), to solicit the information requested.

Disclosure of the information requested is voluntary. However, information provided is of considerable value to Agencies in determining the repayment ability of individuals and their eligibility for Agency programs. There will be no consequences to you if you do not provide the information requested.

Your name, and the information you provide, will be released to the applicant at the applicant's request. Some information will be available to any requester under the provisions of the Freedom of Information Act.

The information you provide may be referred to another agency, whether Federal, State, local or foreign, charged with the responsibility of investigating or prosecuting a violation of law, or of enforcing or implementing the statute, rule, regulation or order issued pursuant thereto, of any record within this system when information available indicates a violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by rule, regulation or order issued pursuant thereto.

*Rural Development is a Equal Opportunity Lender.  
Complaints of discrimination based on race, sex, religion,  
national origin or marital status should be sent to:  
Secretary of Agriculture. Washington D. C. 20250*

HABITAT FOR HUMANITY OF ST. FRANCOIS COUNTY, INC.  
(573) 760-1702

**VERIFICATION OF CHILD / DEPENDENT CARE**

Regulations require us to verify financial information provided by applicants who apply for housing assistance. We ask for your cooperation in supplying the information requested. I have attached form "authorization to release information", which allows you the right to complete the form to the best of your knowledge without repercussion for releasing confidential information to a third party. Habitat for Humanity of SFC appreciates your assistance in helping us to evaluate the applicant's income and expenses.

**APPLICANT IDENTIFICATION**

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

**REQUESTED INFORMATION**

Name of Person or Agency Providing Care: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name(s) of person or persons cared for:


Specify Hours of Care: \_\_\_\_\_ Specify Days of Care: \_\_\_\_\_

Average Amount Paid for Care: \_\_\_\_\_ Per: Week / Month / Day / Year (Please circle One)

Estimated Amount to be Paid in coming 12 months including full-time summer care of school aged children, if applicable): \$ \_\_\_\_\_

Will any amount of this expense be reimbursed by an outside source? Yes or No  
(please circle one)

**VERIFIER INFORMATION:** Please sign this verification form and print the name and telephone number of the verifier.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Signature of Verifier: \_\_\_\_\_ Date: \_\_\_\_\_