

Shoals Habitat for Humanity - Residential Rehabilitation Program Application

Habitat for Humanity is a nonprofit organization that helps families build and improve places to call home. We believe affordable housing plays a critical role in strong and stable communities.



We build strength, stability and self-reliance through shelter.

We offer 0% financing for home rehabilitation services to low income homeowners in Lauderdale and Colbert Counties so they can continue to live in safe, decent homes for years to come. Projects that can qualify include HVAC repair, window and exterior door replacement, handicap installations for accessibility, and hot water heater replace

How does Home Preservation work?

Families partner with Habitat based on income, need and willingness to help. An affordable 0% loan is made to the homeowner to cover the cost of the work. Payments are placed in a revolving fund to help Home Preservation serve others in need.

Residential Rehabilitation

Shoals Habitat Residential Rehabilitation Program

We offer 0% financing for home rehabilitation services to low income homeowners in Lauderdale and Colbert Counties so they can continue to live in safe, decent homes for years to come. Projects that can qualify include HVAC repair, window and exterior door replacement, handicap installations for accessibility, and hot water heater replacement.

Apply Today

How does the process work?

Submit an Application

The homeowner starts the process by submitting an application and supporting documents to Shoals Habitat. The application process may take 3 to 6 months

Provide Sweat Equity

Applicants must contribute a minimum of 8 hours of Sweat Equity while participating in this program. The number of volunteer hours required will be based on the project's final dollar value.

Schedule Construction

The schedule of your project will vary depending on the nature of your need and the availability of labor.

Sign Closing Documents

A Promissory Note will be signed once the final cost of the repairs has been determined. Repayment will be based on the final cost of repairs and the homeowner's ability to pay.

Repayment

Shoals Habitat will provide *an affordable 0% interest loan which the homeowner will repay over a period of time.*

What rehabilitation services can qualify?

Financing is Available For These Rehabilitation Services:

- Heating/Cooling Equipment (HVAC) Repair/Replacement
- Roof Repair/Replacement
- Exterior Door Replacement
- Handicap Installations for Accessibility
- Hot Water Heater Replacement

Shoals Habitat for Humanity Residential Rehabilitation Program Application Checklist

This is a checklist of the documentation that we will require to assess your application. Please complete each item and return with your application:

- These forms are included in your application package. Please read, sign, date, and return.**
 - Shoals Habitat Rehabilitation Program Application – Completed in Full
 - Equal Credit Opportunity Act Notice – Signed and Dated by each applicant
 - E-Sign Act Disclosure and Consent – Signed and Dated
 - IRS Form 4506-T – Completed, Signed, and Dated
- Please attach COPIES of the following documents. DO NOT SEND ORIGINAL DOCUMENTS.**
 - Property Deed
 - Power of Attorney, if applicable
 - Homeowners Insurance declaration including agent, coverage limits, payment, and status
 - Property tax proof of payment and status
 - Government issued photo identification (driver's license, Gov. ID, School ID, Military ID, etc.)
 - Social Security Card or Form I-551 Card
 - If you are working, please provide the most recent 3 months' pay stubs. Do not skip any dates.
 - Child Support: a court order and proof of payment for the last six months
 - Alimony: a court order and proof of payment for the last six months
 - Food stamps Award letter or verification of income
 - Social Security Income / Disability Award Letter
 - VA benefits letter
 - Most recent utility bill (electric, gas, water)
 - If you have a bank account, send the last two months' bank statements for all accounts. Statements **must have the bank's information on it**. Be careful when printing statements from on-line sources.
- Credit Report Fee: \$28.05 for single adult head of household or \$47.60 for two adults.**
 - We accept money orders or cashier's checks.

Mail completed application and the above documents to:

Shoals Habitat for Humanity

ATTN: Family Services Manager

PO Box 3135

Florence, AL 35630

Nature of Request for Assistance

1. What sort of repair(s) does your home require?

Check all that apply.

	Nature of Repair
Heating/Cooling Equipment (HVAC)	<input type="checkbox"/>
Window Replacement	<input type="checkbox"/>
Roof Repair/Replacement	<input type="checkbox"/>
Exterior Door Replacement	<input type="checkbox"/>
Handicap Installations for Accessibility	<input type="checkbox"/>
Hot Water Heater Replacement	<input type="checkbox"/>

Applicant Information

2. Applicant Name

3. Residing Address

4. Home Phone

5. Cell Phone

Financial Information

6. Estimated Gross Annual Household Income

7. Number in Household

8. Estimated Monthly Utility Bill

Household Financial Worksheet

Please complete this worksheet about your household members.

Household Worksheet <i>Complete the following for persons living in the household, including yourself</i>								
<i>Relationship</i>	<i>First Name</i>	<i>Last Name</i>	<i>DOB</i>	<i>Race</i>	<i>Sex</i>	<i>SS#</i>	<i>¹Disabled?</i>	<i>²Annual Income</i>
Self								\$
								\$
								\$
								\$
								\$

¹ Must be drawing disability benefits such as SSI or VA.
² If others in HH report \$0 income, a notarized letter must accompany application certifying that no income is received.

10. Mortgage Holder

11. Are mortgage payments current?

Check all that apply.

- Yes
- No
- Not Applicable

12. If No or Not Applicable, Explain

13. Are property tax payments current?

Check all that apply.

- Yes
- No
- Not Applicable

14. If No or Not Applicable, Explain

15. Any liens other than a first mortgage?

Check all that apply.

- Yes
- No
- Not Applicable

16. If Yes, Explain

17. Does the property have homeowner insurance coverage?

Check all that apply.

- Yes
- No
- Not Applicable

18. If No or Not Applicable, Explain

Willingness to Partner

19. To be considered for Shoals Habitat's Residential Repair Program, you and your family must be willing to complete a certain number of "sweat equity" hours. These activities may include cleaning, helping with construction, working in the Habitat office or ReStore, attending homeownership classes or other approved activities.

Check all that apply.

	Yes	No
Applicant	<input type="checkbox"/>	<input type="checkbox"/>
Co-applicant	<input type="checkbox"/>	<input type="checkbox"/>

Disclosures

Authorization and Release

I understand that by filing this application, I am authorizing Shoals Habitat for Humanity to evaluate my actual need for the Shoals Habitat Residential Repair Program, my ability to repay an affordable loan, and my willingness to be a partner through sweat equity.

I understand that the evaluation will include personal visits, a credit check, and employment verification. 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 assistance, I may be disqualified from the program and forfeit any rights or claims to assistance. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

I also understand that Habitat for Humanity screens all applicants on the sex offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

Right to Financial Privacy

This notice to you is required by the Right of Financial Privacy Act of 1978. The US Department of Housing and Urban Development, the City of Florence Community Development program, and Shoals Habitat for Humanity have the right to financial records held by any financial institution in connection with the consideration or administration of the Community Development Loan of which you have applied. Financial Records involving your transactions will be available to the US Department of Housing and Urban Development, the City of Florence Community Development Program, and Shoals Habitat for Humanity without further notice or authorization but will not be disclosed or released to another government agency or department without your consent, except as a required or permitted by law.

Penalty for False or Fraudulent Statements

United States Code 18, Section 1001, provides: "...whoever, in any manner within the jurisdiction of any Department or agency of the United States knowingly and willfully falsifies 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 statements of entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years, or both."

The applicant hereby certifies that all information contained in this application and all information furnished in support of this application is true, correct and complete to the best of the applicant's knowledge and belief. The applicant agrees that any assistance so extended is based in the part on information supplied in this application, and that discovery of false information herein shall cause this application to be denied, and any assistance which may have been provided shall become due and payable in full. The applicant further certifies that he or she is not that status of restricted resident aliens.

Application Timeliness and Compliance

It is our desire to process applications for assistance as quickly as possible. Your cooperation is necessary in ensuring all required information for the Residential Rehabilitation Grant Program is provided to Shoals Habitat for Humanity in a timely manner. If any problems should arise in complying with this request for information, please notify this office as soon as possible so that we may continue your active participation in the program. Failure to comply with this request will result in cancellation.

Eligibility and Notification

Applicant eligibility for the Residential Rehabilitation Grant Program will be determined in accordance with HUD income verification policies and procedures. All applicants will be notified by letter via US Mail or approval or denial.

20. Signature of Applicant

21. Date

22. Signature of Co-Applicant

23. Date

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Google Forms

Request for Transcript of Tax Return

- ▶ Do not sign this form unless all applicable lines have been completed.
- ▶ Request may be rejected if the form is incomplete or illegible.
- ▶ For more information about Form 4506-T, visit www.irs.gov/form4506t.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	

5a If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.

SHOALS HABITAT FOR HUMANITY - PO BOX 3135, FLORENCE, AL 35630 - PHONE: 256-760-9515 X5

5b Customer file number (if applicable) (see instructions)

Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5a, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ 1040

- a Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days
 - b Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days
 - c Record of Account**, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days
- 7 Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days
- 8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

| 12 / 31 / 17 | 12 / 31 / 18 | 12 / 31 / 19 | / /

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

Phone number of taxpayer on line 1a or 2a

SIGN AND DATE ▶

Signature (see instructions) _____ Date _____

Sign Here ▶

Title (if line 1a above is a corporation, partnership, estate, or trust) _____

SIGN AND DATE ▶

Spouse's signature _____ Date _____

E-Sign Act Disclosure and Consent

This e-Sign Disclosure and Consent (the "Consent") provides the person(s) giving his/her consent below ("you" and "your") with information relating to your electronic receipt of disclosures and notices (collectively, the "Disclosures") in connection with your residential mortgage loan application (the "Loan") pending with Shoals Habitat for Humanity ("Lender"). By providing your consent, you agree that the Lender may send you any Disclosures (which are described below) relating to the Loan in an electronic form so that you may view, download, upload, approve, sign (if requested), and return documents electronically. When the Lender wishes to send you Disclosures electronically, a notice to the electronic mail ("e-mail") address that you have designated below as the e-mail address for the receipt of Disclosures will be sent to you. The Disclosures will be attached to this notice, or the notice will direct you to a website where you will be able to access the Disclosures and view, download, upload, approve, sign (if requested), and return documents electronically.

The Lender reserves the right, in its sole discretion, to send you any of the Disclosures in paper form instead of, or in addition to, electronic form.

- 1. Types of Disclosures and Notices that will be Provided in Electronic Form.** The Disclosures may include, without limitation, disclosures and notices under the Federal Equal Credit Opportunity Act and Regulation B, the Federal Truth-in-Lending Act and Regulation Z, the Federal Home Mortgage Disclosure Act and Regulation C, the Internal Revenue Code, the Federal Homeowners Protection Act of 1998, the Federal Real Estate Settlement Procedures Act of 1974 and Regulation X, the Federal Fair Credit Reporting Act, the Federal Fair Housing Act, the National Flood Insurance Act of 1968, the Federal Flood Disaster Protection Act of 1973, the Federal Electronic Fund Transfer Act and Regulation E, the Federal Home Ownership and Equity Protection Act of 1994, the Federal USA PATRIOT Act of 2001, and Title V of the Federal Gramm-Leach-Bliley Act, together with all rules and regulations that implement the same, as well as all other disclosures that are required by applicable federal, state, and local laws, rules, regulations and ordinances during the mortgage loan origination process. The Disclosures also include any other information, agreements, disclosures and notices that we wish to provide you in connection with the Loan in an electronic form, even if the information, agreements, disclosures, and notices are not required by these laws, rules, regulations, or ordinances.
- 2. Your Right to Receive Paper Copies of the Disclosures.** You are not required to provide your Consent to apply for the Loan. If you prefer not to provide your Consent, all Disclosures will be provided to you in paper form. If you decide to provide your Consent, you may receive paper copies of the Disclosures as described in Section 7 below.

3. **Your Right to Withdraw Your Consent.** You have the right to withdraw your Consent at any time. You will not be charged any fees because of the withdrawal of your Consent. If you withdraw your Consent, any Disclosures provided to you after the effective date of the withdrawal will be provided in paper form. You may also receive paper copies of any Disclosures that were previously provided to you electronically as described in Section 7 below.
4. **Scope of Your Consent.** Your Consent applies only to your electronic receipt of Disclosures and electronic signature (if requested) in connection with the origination, closing, and servicing of the Loan. Your Consent does not apply to other transactions that you may wish to enter with us or any of our affiliates.
5. **Procedures to Withdraw Your Consent.** You can withdraw your Consent by sending an email stating your withdrawal to family.services@shoalshabitat.org or sending a written communication to: Family Services Manager, Shoals Habitat for Humanity, PO Box 3135, Florence AL 35630. Your withdrawal of Consent will be effective as of the end of the following Business Day if sent by email or as of the end of the third Business Day if sent by US Mail. For purposes of this Consent, a "Business Day" means any day from Monday through Friday, excluding Saturdays, Sundays, and federal holidays.
6. **Change of Your Designated E-Mail Address.** If you wish to change your designated e-mail address, you must notify us by sending an email to family.services@shoalshabitat.org. Your change of designated e-mail address will be effective as of the end of the following Business Day.
7. **How to Receive Paper Copies.** After you provide your Consent, you may receive, without charge, a paper copy of any Disclosures that have been provided to you electronically by requesting paper copies in one of several ways. First, once you have consented to this Consent and are viewing any electronic Disclosures, you may print copies of the Disclosures from your computer if your computer is connected to a printer. Second, you may request a paper copy of any electronic Disclosure by sending an email request to family.services@shoalshabitat.org or by sending written communication stating the Disclosure(s) you wish to receive to: Family Services Manager, Shoals Habitat for Humanity, PO Box 3135, Florence AL 35630.
8. **Computer Hardware, Software and Other Requirements.** You must have the following listed items and features to receive Disclosures electronically, to print copies of the Disclosures, and to retain electronic copies of the Disclosures:
 - A personal computer with monitor, keyboard, and mouse capable of accessing the Internet and sending and receiving e-mail:
 - If you use Windows: 1.3GHz or faster processor; Microsoft Windows XP with Service Pack 3 for 32 bit or Service Pack 2 for 64 bit; Windows

Server® 2003 R2 (32 bit and 64 bit); Windows Server 2008 or 2008 R2 (32 bit and 64 bit); Windows 7 (32 bit and 64 bit); Windows 8 or 8.1 (32 bit and 64 bit); 256MB of RAM (512MB recommended); 320MB of available hard-disk space

- If you use Macintosh: PowerPC® G4, PowerPC G5, or Intel processor; Mac OS X v10.4.11–10.5.8 (PowerPC); Mac OS X v10.4.11–10.6.3 (Intel); 128MB of RAM (256MB recommended); 405MB of available hard-disk space (additional space required for installation)
- Internet access
- One of the following Internet browsers:
 - Chrome 31.0 or higher
 - Microsoft Internet Explorer 9 or higher
 - Mozilla Firefox ESR and 23.0 or higher
 - Safari 6.1 or higher
- Adobe Acrobat Reader® version 6.0 or higher
- A valid e-mail address
- A printer capable of printing text screens, if you wish to print copies of the Disclosures

If the above computer hardware or software requirements change, advanced notice of the new requirements will be provided to you. You may withdraw your Consent as described in Section 5 above, and you will not be charged any fees because of the withdrawal of your Consent.

Applicant(s):

X _____
Print Name: _____
Date: _____
E-mail: _____

X _____
Print Name: _____
Date: _____
E-mail: _____



Equal Credit Opportunity Act Notice

Provide 2 copies with each application

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or 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. The Federal Agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices at: [FTC Regional Office for the Southeastern region, Federal Trade Commission, Suite 1500, 225 Peachtree St NE, Atlanta GA 30303, or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support, and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete and we will be unable to invite you to participate in the Habitat program.

Applicant(s):

X _____
Print Name: _____
Date: _____

X _____
Print Name: _____
Date: _____



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You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support, and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete and we will be unable to invite you to participate in the Habitat program.

Applicant(s):

X _____

Print Name: _____

Date: _____

X _____

Print Name: _____

Date: _____



Privacy Statement and Notice

At Shoals Habitat for Humanity (“SHFH”), we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data — such as tax returns, pay stubs, credit reports, employment verifications, and payment history — internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us or others; and
- Information we receive from a consumer reporting agency.

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on application or other forms, such as your name, address, Social Security number, etc.
- Information about your transactions with us or others such as your loan balance, payment history, the terms of your note and mortgage, information required to close your loan, information required to service your line, etc.
- Information we receive from a consumer reporting agency such as your credit worthiness and credit history, etc.

SHFH employees and volunteers are subject to written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents;
- Nonprofit organizations, government entities, or other subsidy providers;
- Others with a legitimate business purpose as permitted by law.

If you prefer that we did not disclose nonpublic personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). If you wish to opt out of disclosures to nonaffiliated third parties, you may call SHFH at (256) 760-9515.