



Pre-Application

Pre-Applications must be received on or before:
Wednesday, May 5, 2021 on or before 4:00pm

Please submit your pre-application as per below.
 Also submit: **(1) A copy of your photo ID.**
(2) Copies of 2 of your most recent pay stubs. If self-employed 2019 or 2020 tax return.

Drop off in person 9am-5:00pm M-F: **OR** **Mail to:**

Nevada County Habitat for Humanity Office 236 S. Church Street, GV, CA 95945 Phone: 530-274-1951	Nevada County Habitat for Humanity P.O. Box 2997 Grass Valley, CA 95945
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OR: Email digital copies of pre-application and required ID and pay stubs to: info@nchabitat.org

Dear Applicant: Please complete this pre-application for the Habitat for Humanity homeownership program. Fill out completely and accurately and complete verification of information at end of this form. All information will be kept confidential.

Be accurate in reporting your finances, as this information will be verified during the full application stage.

SECTION 1: APPLICANT INFORMATION			
Applicant's Name:		Co-applicant's Name:	
Phone:	Age:	Phone:	Age:
Email:		Email:	
Present Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent		Present Address: <input type="checkbox"/> Own <input type="checkbox"/> Rent	
Number of Years:		Number of Years:	
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. Single, divorced, widowed)		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. Single, divorced, widowed)	
Dependents and other who will live with you:		Dependents and other who will live with you:	
First Name: _____	Age: _____	Circle Gender M / F	
First Name: _____	Age: _____	Gender M / F	
First Name: _____	Age: _____	Gender M / F	
First Name: _____	Age: _____	Gender M / F	

SECTION 2: MONTHLY INCOME	
Total all your monthly Gross Income (before taxes) sources. Examples include wages, temporary assistance, alimony, child support, Social Security, SSDI, or Section 8. You may average over 3 months if wages are variable. Use the most recent 3 month of complete income:	
Applicant Monthly Total: \$	Co-Applicant Monthly Total: \$

SECTION 3: ASSETS
Total for both applicant and co-application all current bank account assets including checking, savings, loan, credit union, etc...
Total Assets for All Applicants Combined: \$

SECTION 4: DEBT

TO WHOM DO YOU AND THE CO-APPLICANT OWE MONEY? Debts include credit card, furniture, appliances, alimony, student loans, vehicle loans, child support, medical bills, debt to friends or family, rent-to-own, and all other debt.

Type of Account	APPLICANT			CO-APPLICANT		
	Monthly Payment	Unpaid Balance	Months Left to Pay	Monthly Payment	Unpaid Balance	Months Left to Pay
	\$	\$		\$	\$	
	\$	\$		\$	\$	
	\$	\$		\$	\$	
	\$	\$		\$	\$	
Totals:	\$	\$		\$	\$	

SECTION 5: OTHER QUESTIONS

1) Have you, or the Co-Applicant ever filed for bankruptcy? If so, which year was it declared?

Applicant: Yes No Year? _____ Co-Applicant: Yes No Year? _____

2) What is your current credit score? There are many free online options to find credit scores.

Score Applicant: _____ Score Co-Applicant: _____

3) Do you have any outstanding judgements because of a court decision against you, or are you currently involved in a lawsuit?

Applicant: Yes No Co-Applicant: Yes No

4) Are you a U.S. citizen or permanent resident?

Applicant: Yes No Co-Applicant: Yes No

SECTION 6: ADDITIONAL COMMENTS/INFORMATON *OPTIONAL

Optional: Use This space for additional information that did not fit in previous sections.

Note: Fields Below are required fields, once you have completed form and signed below, please save your form with the title of your last name and email form to: info@nchabitat.org

By signing below, I hereby verify that the above statements are true and correct.

Signature of Applicant above. Click and type full name. Date.

Signature of Co-Applicant above. Click and type full name. Date.