

## Fall 2023 Partner Family Application

#### Dear Applicant:

Thank you for your interest in the Habitat Homeownership Program!

Please fully complete and return the enclosed application and supporting documents from Section B on page 4.

Failure to provide all requested supporting documentation will delay the processing of your application. The deadline for submitting your application and all supporting documentation is **October 31, 2023.** It is important to submit early; in the event you need to resubmit any documentation, all materials must be received by October 31, 2023.

### We will be selecting 1 applicant for home located in Rock Valley.

If you have any questions about the application or what is required, please contact me:

Jeff Frahm, Family Services Manager Siouxland Habitat for Humanity 1150 Triview Ave. Sioux City, IA 51103 712-224-5117 jeff@siouxlandhabitat.org

#### How to submit your completed application:

**BY MAIL:** Siouxland Habitat for Humanity

Attn: Jeff Frahm 1150 Tri-View Avenue Sioux City, IA 51103 PO Box 5318

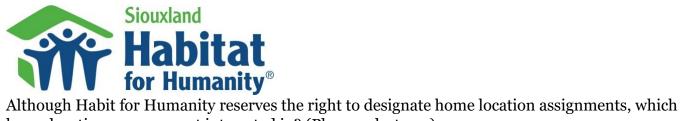
**DROP OFF:** Office or ReStore located at 1150 Tri-View Avenue, Sioux City, IA 51103. Please hand the application to a Siouxland Habitat for Humanity employee.

Our office hours are Monday – Friday, 8:30 AM – 4:30 PM.

The ReStore is open until 5:00 PM on Tuesday, Wednesday, and Thursday. And until 3:00 PM on Fridays. There will be a drop off box in our front entry way for completed applications.

**BY EMAIL:** jeff@siouxlandhabitat.org





home location are you most interested in? (Please select one)	
☐ Sioux County Location — Single Family Home	
WE WILL BE SELECTING ONLY 1 APPLICANT FOR HOME LOCATED IN ROCK VAI	LEY.
How did you hear about the application? (Please circle)	
□ Radio	
$\square$ TV	
□ Website	
□ Family	
☐ Current Habitat Homeowner	
□ Facebook	
□ Pull tab flyer	
□ Through the school system	
□ Other	
What is most appealing about becoming a partner family and gaining homeownership Habitat for Humanity? (Please circle)	through
☐ Partnering with Habitat by helping with the construction of your home	
☐ Having a 0% interest rate on a 30-year home loan	
Having to only save \$1,500 for closing costs vs. \$5,000-\$10,000 through a tradibank	tional
□ Other	





## Fall 2023 Partner Family Application Application Date:

To become a Siouxland Habitat for Humanity (SHFH) homeowner, an applicant must:

- √ meet all of the requirements and conditions listed (Section A)
- √ provide all of the required supporting documents listed (Section B)
- √ complete the Application for Housing (Section C)
- √ be selected as a Family Partner and approved by Habitat's Board of Directors
- √ meet the financial requirements
- ✓ complete all "Sweat Equity" (volunteer work) requirements
- √ demonstrate a true Habitat Partner attitude

#### **SECTION A: Requirements and Conditions**

Please check your household's appropriate answer to each statement/question.

YES	NO	your nousehold's appropriate answer to each statement question.
		My/our gross household income is between the minimum and maximum
		income limits based on the Average Media Income range for our area.
		See charts below for ranges.
		I/we understand we must not be able to qualify for a conventional home
		loan.
		I/we have lived or worked in Dakota, Plymouth, Sioux, Woodbury or
		Union county for the last 12 months.
		I/we understand all mortgage applicants are US Citizens or have Legal
		Permanent Resident Status.
		I/we understand there will be sweat equity hours required.
		I/we am/are willing to complete sweat equity hours with SHFH.
		I/we understand that I/we must contribute \$1,500 towards the home, and
		it is due at the time of signing the loan papers.
		I/we am/are responsible for purchasing one year of homeowner's
		insurance at total replacement cost, with a \$1,000 maximum deductible.
		I/we have not filed bankruptcy in the past two years.
		I/we am/are prepared to make monthly mortgage payments.
		I/we understand that if we have any real estate holdings (i.e. a mobile
		home), we are required to sell it/them prior to closing.
		Does anyone in your household currently have a mortgage in their
		name?

#### **AVERAGE MEDIAN INCOME CHARTS FOR JULY 2023 - JUNE 2024**

Amounts below valid for Sioux County ONLY	1	2	3	4	5	6	7	8
Annual Income Minimum	\$26,700	\$30,550	\$34,350	\$38,150	\$41,250	\$44,300	\$47,300	\$50,400
Annual Income Maximum	\$53,450	\$61,050	\$68,700	\$76,300	\$82,450	\$88,550	\$94,650	\$100,750

<sup>\*\*</sup>Information gathered by SHFH is considered confidential and is only used for our Family Selection Process.



SECTION B: Supporting Documents Checklist

\*Please note, do NOT submit original documents, only copies.

Along with a <a href="mailto:completed">completed</a> and <a href="mailto:signed">signed</a> application (Section C), please include:

benef	of all income receipts (pay stubs, child support verifi fit letter, or unemployment, etc.) for all members of the should align with Section 10 of the application).	•
сору	of current credit report for each applicant (Section 1	5). *Complete this early in the process.
сору	of last month's utility bills (gas/electric, water, TV, pl	hone, internet)
сору	of bank statements for the last two months for all ho	usehold persons with income
	of your <u>Federal</u> and <u>State</u> filed income tax returns fring dependents, gross income, and refund amount—cant	•
сору	of photo IDs for all adult household members	
сору	of social security cards or permanent resident cards	for all household members
poor h	tement indicating what your current housing situation neating or plumbing, leaky roof, overcrowding, unsafecial needs, rent to income ratio (the rent you pay co e)	e or unsanitary conditions
	ned Disclosure & Release Authorization Form (Section eck a sex offender registry and perform a criminal ba	, , ,
•	ed Verification of Employment for all working individu	· · · · · · · · · · · · · · · · · · ·
signed (Section	I Notices: Special Purpose Credit Check Program, E	S-Sign Act, Privacy Notice



#### **SECTION C: HOUSING & FINANCIAL INFORMATION**

Please complete this section thoroughly and accurately. All information you provide will be kept confidential. Your application and all supporting documents will become the property of Siouxland Habitat for Humanity; therefore, we ask that you provide copies and not original documents.

You will receive a response regarding your application's status within 30 days. Throughout the application, you will be asked about your citizenship and residency status. Please note: The applicant(s) must be a US citizen or have legal permanent resident status. The citizenship status of other occupants in the residence will not exclude you from applying or being accepted as a Habitat Partner Family (ex., spouse, in-laws, etc.). However, funding or grant opportunities that have citizenship requirements may impact applying households or specific housing options available.

	1. Applicant Information							
Last Name	First Name	M.I.	Date of Birth		Married/Single/Separated?	Home Phone:		
						Cell Phone:		
Email Address		Driver's Lic	ense Number:	Are	you a US Citizen? Yes	No		
				SSI	N or Lawful Permanent Reside	ent ID#		
Present Address		L	City		State	Zip Code		
Rent Own	How long have you lived at	present add	ress?		<u>—</u>			
Previous Address			City		State	Zip Code		
years. If you require		record info	on a separate piece	of p	aper and attach to applicati			
2. Co-Applic	-		1	rsc	ons 18 and older, mo	•		
LastName	First Name	M.I.	Date of Birth		Married/Single/Separated?			
		1				Cell Phone:		
Email Address		Driver's Lic	ense Number:	Are	you a US Citizen? Yes	No		
				SSI	N or Lawful Permanent Reside	ent ID#		
Present Address			City		State	Zip Code		
Rent Own	How long have you lived at	present add	ress?		_			

Previous Address	С	ity State		Zip Code
Rent Own How long did you live at your previous addres:  (5) years. If you require additional space, please record info on	s?_ a separate	Please provid piece of paper and attach to applica	e your housii ation.	ng info for the past five
3. Dependents of Applicant/Co-Applicant (only	those who	will reside in family home more	than 60% o	f the time)
Name of Dependents (persons 18 years and under)	Age	Date of Birth	Male	Female
If you have additional dependents and you require additional s	pace, pleas	e record your information on a sep	arate piece o	f paper.
Other Household Residents (list those will live in	the home t	out are not dependents (ex. Moti	ner-in-law, a	dult child, etc.)
Name of Resident	Age	Date of Birth	Male	Female

4. Applicant Employment Information							
Name and Address of Current	Employer		Business Phone				
Date of Hire	Hourly Wage / Hours per Week	Average Monthly Income	Are you self-employed?				
Job Title or Description:			I				
If you have been emplo	yed at your current job less thar	n one year, please provide your p	previous employment information				
Name and Address of Previous	s Employer		Business Phone				
Employed From: To:	Hourly Wage / Hours per Week	Average Monthly Income	Were you self-employed?				
Job Title or Description:	,	-					
5. Co-Applicant(s) l	Employment Information	1 *please provide on separate	sheet for all members 18 and older				
Name and Address of Current	Employer		Business Phone				
Date of Hire	Hourly Wage / Hours per Week	Average Monthly Income	Are you self-employed?				
Job Title or Description:		1	<u> </u>				
If you have been emplo	yed at your current job less thar	n one year, please provide your p	previous employment information				
Name and Address of Previous	s Employer		BusinessPhone				
Employed From: To:	Hourly Wage / Hours per Week	Average Monthly Income	Were you self-employed?				
Job Title or Description:							
6. Homebuyer Information							
Have you ever owned a home	before? Yes No If ye	s, why do you no longer own it?					
Dates of Ownership:_to							
Do you own land? Yes 1	No If yes, please describe, inc	lude location:					
Land monthly loan payment: \$	S Totalunpaid	dloanbalanceonland:\$					
Have you ever applied for a home loan? Yes No If yes, were you approved? Yes No							
	ply? If appr						
Have you ever applied for	or a Habitat home before? Ye	es No If yes, whe	en?				

	7. Current Hous	ing Situation	
Number of Bedrooms:	Number of Bathrooms:	Describe Laundry Facilities:	
Other rooms included in the home	where you are currently living:  n	Finished Basement	1
1			
If you rent your residence, what	is your monthly rent payment? \$		
	nation for your <i>current landlord</i> in the space	ce provided below:	
Landlord Name	Address		Phone
If you have lived at your curren	l at address for less than one year, pleas	se provide the contact informat	on for your previous landlord:
Previous Landlord Name	Address		Phone
In the space below, please descr	Libe your current housing situation and/or	house condition. Why do you fee	I you need a Habitat Home?
	8. Willingness	to Partner	
Humanity. Being a long to home, being a good hom	bitat home, you and your family rem partner means completing a leowner and neighbor once you on long after your home is built.	must be willing to be a long all partner requirements du	iring the construction of your
mandatory number of "si home and the homes of attending homeowner edu events or other approved a	ship phase of your relationship weat-equity" volunteer hours. "others, and it may include cleucation courses, working in the activities. (If you or a family meromplete your required "sweat equals to the complete of the course	"Sweat equity" is earned waring a lot, painting, help e Habitat ReStore or main mber has a physical disabil	when you help to build your ing with home construction, n office, helping with special
Applicant Signature		Date	
Co- Applicant Signature		——————————————————————————————————————	

	9. Monthly Expenses and Deb	ot		
Monthly Expenses	Name of Who you Pay	Monthly	Current	Past Due
Misc. Household Expenses				
House Rent				
Gas / Electric				
Trash / Water / Sewer				
Cable / Satellite TV / Internet				
Telephone / Cell Phones				
Loans				
Automonths remaining				
Studentmonths remaining				
Personalmonths remaining				
Medical / Dental				
Doctor / Hospital Visits				
Dental				
Prescriptions				
Ex-Family Expenses				
Child Support				
Alimony				
Other Expenses				
Credit Card:				
Credit Card:				
Childcare & School Expenses				
Other:				
Total Mo	onthly Expenses	\$		

10. Month	10. Monthly Income—Applicant/Co-Applicant								
Monthly Income Source	Applicant Income	Co-Applicant Income	Additional occupants/reside nts	Total household income					
Primary Employment Income (before taxes)									
Secondary Job Income (before taxes)									
AFDC/TANF									
Social Security Income (SSI)									
Social Security Disability Income (SSDI)									
Alimony Income									
Child Support Income									
Total Federal Tax Refund last year									
Total State Tax Refund last year									
11	. Assets (Bank	(Information)							
Please list all Checking and Savings Accounts be	elow:	· · · · · · · · · · · · · · · · · · ·							
Name and Address of Bank, Savings & Loan or Cred	dit Union	Name and Address of Bank, Savings & Loan or Credit Union							
Account Number: Balance	e: \$	Account Number:	Account Number: Balance: \$						
The account above belongs to:		The account above belongs to:							
Name and Address of Bank, Savings & Loan or Cred	dit Union	Name and Address of Bank, Savings & Loan or Credit Union							
Account Number: Balance	e: \$	Account Number:	В	alance: \$					
The account above belongs to:		The account above b	The account above belongs to:						
Please list all other monetary assets below, inclu	ding Money Marke	t Accounts, CD's, Stoc	ks, Savings Bonds, etc.:						
Source	Value		Account Holder						

12. Source of Down Payment and Closing Costs									
If you are approved for a Habitat home, the m \$1,500. How will you ensure you will have this		contribution due for	down	payment	/closing co	osts wi	ll be		
13. Declarations									
			App	olicant	Co-A	Applican	t		
a. Are you currently involved in a lawsuit?			Yes	□ No	□ Yes		No		
b. Do you have debt because of a court decision against		0000	Yes	$\square$ No	☐ Yes		No		
c. Are you presently delinquent or in default on any feder d. Are you a co-signer on another note?	rai debi or any other i	oan?	Yes	□ No	□ Yes		No		
e. Are there any outstanding judgments against you?			Yes		□ Yes		No		
f. Have you declared bankruptcy in the past two years?			Yes Yes	<ul> <li>□ No</li> <li>□ No</li> </ul>	☐ Yes ☐ Yes		No No		
g. Have you had any property foreclosed upon in the pas	st seven years?		Yes	□ No	□ Yes		NO No		
h. Have you had anything repossessed within the past se	even years?		Yes		□ Yes		No		
i. Have any of your accounts been placed into collections	s in the past three yea	ars?	Yes		□ Yes		No		
j. Have you ever been convicted of a felony?			Yes	□ No	□ Yes		No		
k. Are you paying alimony or child support?			Yes	□ No	□ Yes		No		
If you have answered yes to any questions "a" thru "k", p	olease provide a detai	led explanation below:							
14	. Affirmation S	tatement							
I understand that by filing this application, I am authorizing Siouxland Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay a no-interest loan and other expenses of homeownership, and my willingness to be a Habitat partner family. I understand the evaluation will include personal visits, a credit check, a criminal history 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 even if I have already been selected to receive a Habitat home, I may be disqualified from the program. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved along with all of the supporting documentation I have submitted along with this application.									
Applicant Signature	Date	Co-Applicant Signat	ure		Date				

#### 15. Obtaining a Credit Report

Along with this application, you must submit a current copy of your credit report that includes a credit score for the applicant and coapplicant. Contact one of the two organizations listed below to obtain your credit report:

**Center For Siouxland** 

Other (specify):

Call 877-580-5526, or 712-252-1861 ext 47. 715 Douglas Street, Sioux City, IA 51101

**Center For Financial Education** 

Call 712-722-4900

315 1st Ave. NE, Sioux Center, IA 51250

\* Make this a priority in your application process as it takes time. Make sure to make an appointment and tell them the credit report is for a Habitat application. Also, take a photo ID and be prepared to pay a fee.

Their credit counselor will provide you with your credit score and explain the key factors that determine your score, offer a step-by-step process to improve your score, and discuss how to dispute inaccurate information on your report.						
10	6. Recru	ited Sweat Equity Cor	ntact			
Please list three people that you Name	ı have as	ked to help you with your	sweat equity, an Contact In		reed to help.	
17. Affilia	ate Proc	edures for Applicants	with Disabilit	ies or Challe	nges	
Siouxland Habitat for Humanity ac English as a second language, vi We are pledged to the letter and s opportunity throughout Siouxland marketing program in which there religion, sex, handicap, familial sta	sually imp pirit of U.S . We enco are no b	paired, hearing impaired, east policy for the achievem ourage and support an affarriers to obtaining housing	etc. ent of equal hou irmative advertis	sing ing and	EQUAL HOUSING OPPORTUNITY	
18. Information for Government Monitoring Purposes						
Please read this statement before completing the information below: The following information is requested by the federal government for loans related to the purchase of homes, in order to monitor lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below indicating so. (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 loan applied for).						
Applicant Name:			I do not wish	to furnish this inf	ormation	
Race/Ethnicity (circle all that apply):  American Indian or Alaskan Native  Other (specify):	Asian	Black/African American	Caucasian	Hispanic		
Co-Applicant Name:			I do not wish	to furnish this inf	ormation	
Race/Ethnicity (circle all that apply):						
American Indian or Alaskan Native	Asian	Black/African American	Caucasian	Hispanic		

#### 19. Disclosure and Release Authorization

# Siouxland Habitat for Humanity

1150 Tri View Ave., Sioux City, IA 51103 Phone: (712) 255-6244 Fax: (712) 255-7203

**Disclosure:** Under the applicable provisions of the Federal Fair Credit Reporting Act (FCRA) and the Driver Privacy Protection Action (DPPA), notice is hereby given that Investigative Reports are being requested from local Law Enforcement Agencies and/or other third-party investigative sources. The report may include, but not limited to, the following types of information: employment history, driving record, worker's compensation claims, credit, criminal records and civil records.

Release Authorization: I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY SIOUXLAND HABITAT FOR HUMANITY TO FURNISH THE ABOVE-MENTIONED INFORMATION. I HEREBY ACKNOWLEDGE THAT A PHOTOGRAPHIC COPY OR FAX OF THIS NOTICE SHALL BE VALID AS THE ORIGINAL. I AGREE TO RELEASE AND HOLD HARMLESS HABITAT FROM ANY LIABILITY ARISING FROM ANY ERRORS IN INFORMATION IT IS PROVIDED.

Applicant Name (print):	Da	ate of Birth:
Social Security #:		
Address:		
City:		
Signature:		Date:
Co-Applicant Name (print):		Date of Birth:
Social Security #:	DL #:	State:
Address:		
City:	State:	Zip Code:
Signature:		Date:



**Applicant**: please sign and date only (see arrows on left-hand side). Do not complete the right column. Submit one for each working adult in the household.

**HR DEPT**: this individual is applying to be a Habitat for Humanity Partner Family. Please provide verification of employment below to help us continue processing this application.

20. VERIFICATION OF EMPLOYMENT		
(SIOUXLAND HABITAT FOR HUMANITY)	EMPLOYED SINCE: OCCUPATION:	
(SIOUXLAND HABITAT FOR HUMANITY)  AUTHORIZATION: FEDERAL REGULATIONS REQUIRE US TO VERIFY EMPLOYMENT INCOME OF ALL MEMBERS OF THE HOUSEHOLD APPLYING FOR PARTICIPATION IN THE HOME PROGRAM WHICH WE OPERATE AND TO REEXAMINE THIS INCOME PERIODICALLY. WE ASK YOUR COOPERATION IN SUPPLYING THIS INFORMATION. THIS INFORMATION WILL BE USED ONLY TO DETERMINE THE ELIGIBILITY STATUS AND LEVEL OF BENEFIT OF THE HOUSEHOLD.  YOUR PROMPT RETURN OF THE REQUESTED INFORMATION WILL BE APPRECIATED. A SELF- ADDRESSED RETURN ENVELOPE IS ENCLOSED.	EMPLOYED SINCE:OCCUPATION:SALARY:  EFFECTIVE DATE OF LAST INCREASE:  BASE PAY RATE: \$/Week; or \$/Month  Average hours/week at base pay rate: Hours  No. weeks, or No. weeks worked/Year  Overtime pay rate: \$/Hour  EXPECTED AVERAGE NUMBER OF HOURS OVERTIME WORKED  PER WEEK DURING NEXT 12 MONTHS  Any other compensation not included above  (specify for commissions, bonuses, tips, etc.):  FOR: \$ PER  IS PAY RECEIVED FOR VACATION? • YES • NO  IF YES, NO. OF DAYS PER YEAR  TOTAL BASE PAY EARNINGS FOR PAST 12 MOS. \$  PROBABILITY AND EXPECTED DATE OF ANY PAY INCREASE:	
	DOES THE EMPLOYEE HAVE ACCESS TO A RETIREMENT ACCOUNT? • YES • NO  IF YES, WHAT AMOUNT CAN THEY GET ACCESS TO: \$	
RELEASE: I HEREBY AUTHORIZE THE RELEASE OF THE REQUESTED INFORMATION.	Signature of Authorized Representative	
(SIGNATURE OF APPLICANT)	Title:	
Date:	Date:	
<u></u>	TELEPHONE:	

WARNING: TITLE 18, SECTION 1001 OF THE U.S. CODE STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY

DEPARTMENT OF THE UNITED STATES GOVERNMENT.



**Applicant**: please sign and date only (see arrows on left-hand side). Do not complete the right column. Submit one for each working adult in the household.

**HR DEPT**: this individual is applying to be a Habitat for Humanity Partner Family. Please provide verification of employment below to help us continue processing this application.

20. VERIFICATION OF EMPLOYMENT		
(NAME OF HOME PARTICIPATING JURISDICTION)  AUTHORIZATION: FEDERAL REGULATIONS REQUIRE US TO VERIFY EMPLOYMENT INCOME OF ALL MEMBERS OF THE HOUSEHOLD APPLYING FOR PARTICIPATION IN THE HOME PROGRAM WHICH WE OPERATE AND TO REEXAMINE THIS INCOME PERIODICALLY. WE ASK YOUR COOPERATION IN SUPPLYING THIS INFORMATION. THIS INFORMATION WILL BE USED ONLY TO DETERMINE THE ELIGIBILITY STATUS AND LEVEL OF BENEFIT OF THE HOUSEHOLD.  YOUR PROMPT RETURN OF THE REQUESTED INFORMATION WILL BE APPRECIATED. A SELF- ADDRESSED RETURN ENVELOPE IS ENCLOSED.	EMPLOYED SINCE:OCCUPATION:  SALARY:  EFFECTIVE DATE OF LAST INCREASE:  BASE PAY RATE: \$/Week; or \$/Month Average hours/week at base pay rate: Hours  No. weeks, or No. weeks worked/Year  OVERTIME PAY RATE: \$/HOUR  EXPECTED AVERAGE NUMBER OF HOURS OVERTIME WORKED PER WEEK DURING NEXT 12 MONTHS  Any other compensation not included above (specify for commissions, bonuses, tips, etc.):  FOR:\$PER  IS PAY RECEIVED FOR VACATION? • YES • NO  IF YES, NO. OF DAYS PER YEAR  TOTAL BASE PAY EARNINGS FOR PAST 12 MOS. \$  PROBABILITY AND EXPECTED DATE OF ANY PAY INCREASE:  DOES THE EMPLOYEE HAVE ACCESS TO A RETIREMENT ACCOUNT? • YES • NO  IF YES, WHAT AMOUNT CAN THEY GET ACCESS TO: \$	
RELEASE: I HEREBY AUTHORIZE THE RELEASE OF THE REQUESTED INFORMATION.	Signature of Authorized Representative	
(SIGNATURE OF APPLICANT)	Title:	
Date:	Date:	
	TELEPHONE:	
WARNING: TITLE 18, SECTION 1001 OF THE U.S. CODE STATES THAT A PERSON TO ANY DEPARTMENT OF THE UNITED STATES GOVERNMENT.	ON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS	

#### 21. NOTICES

#### **EQUAL CREDIT OPPORTUNITY ACT NOTICE**

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 Midwest region, 230 South Dearborn Street, Suite 3030, Chicago, Illinois 60604 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 <u>do not</u> 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	<u>X</u>	
Print Name:	Print Name:	
Date:	Date:	

#### 21. NOTICES (Cont.)

#### E-SIGN ACT DISCLOSURE AND AGREEMENT

Dear Applicant,

We are pleased to offer you the opportunity to receive information about your account electronically. If you would like to receive correspondence and notices from us electronically, instead of paper copies through the mail, please review this notice and provide your consent.

- 1. Scope of Communications to Be Provided in Electronic Form. When you use a product or service to which this disclosure applies, you agree that we may provide you with any communications in electronic format, and that we may discontinue sending paper communications to you, unless and until you withdraw your consent as described below. Your consent to receive electronic communications and transactions includes, but is not limited to:
  - All legal and regulatory disclosures and communications associated with the product or service available through Siouxland Habitat for Humanity.
  - Notices or disclosures about a change in the terms of your account or associated payment feature and responses to claims.
  - Privacy policies and notices.
- 2. **Method of Providing Communications to You in Electronic Form.** All communications that we provide to you in electronic form will be provided either via e-mail or by access to a web site that we will designate in an e-mail notice we send to you at the time the information is available, or to the extent permissible by law, by access to a web site that we will generally designate in advance for such purpose.
- 3. How to Withdraw Consent. You may withdraw your consent to receive communications in electronic form by contacting us at <u>jeff@siouxlandhabitat.org</u> or 712-224-5117. At our option, we may treat your provision of an invalid email address, or the subsequent malfunction of a previously valid email address, as a withdrawal of your consent to receive electronic communications. We will not impose any fee to process the withdrawal of your consent to receive electronic communications. Any withdrawal of your consent to receive electronic communications will be effective only after we have a reasonable period of time to process your withdrawal.
- 4. **How to Update Your Records.** It is your responsibility to provide us with true, accurate and complete e-mail address, contact, and other information related to this E-Sign Act disclosure and your account, and to maintain and update promptly any changes in this information. You can update information (such as your e-mail address) by contacting us at <a href="mailto:jeff@siouxlandhabitat.org">jeff@siouxlandhabitat.org</a>.
- 5. **Hardware and Software Requirements.** In order to access, view, and retain electronic communications that we make available to you, you may need to have:
  - an Internet browser that supports 128 bit encryption;
  - sufficient electronic storage capacity on your computer's hard drive or other data storage unit;
  - an e-mail account with an Internet service provider and e-mail software in order to participate in our electronic communications programs;
  - a personal computer (for PC's: Pentium 120 MHz or higher; for Macintosh, Power Mac 9500, Power PC 604 processor 120-MHz Base or higher), operating system and telecommunications connections to the Internet capable of receiving, accessing, displaying, and either printing or

- storing communications received from us in electronic form via a plain text-formatted e-mail or by access to our web site using one of the browsers specified above;
- Adobe Reader version 8.0 or higher.
- 6. Requesting Paper Copies. When we send you electronic communication, we will not send you a paper copy of the same communication, unless you request it or we otherwise deem it appropriate to do so. You can obtain a paper copy of an electronic communication by printing it yourself or by requesting that we mail a paper copy, provided that such request is made within a reasonable time after we first provided the electronic communication to you. To request a paper copy, contact us at <a href="mailto:jeff@siouxlandhabitat.org">jeff@siouxlandhabitat.org</a> or 712-224-5117. We may charge you a reasonable service charge for the delivery of paper copies of any communication provided to you electronically pursuant to this authorization. We reserve the right, but assume no obligation, to provide a paper (instead of electronic) copy of any communication that you have authorized us to provide electronically.
- 7. **Communications in Writing.** All communications in either electronic or paper format from us to you will be considered "in writing." You should print or download for your records a copy of this disclosure and any other communication that is important to you.
- 8. **Federal Law.** You acknowledge and agree that your consent to electronic communications is being provided in connection with a transaction affecting interstate commerce that is subject to the federal Electronic Signatures in Global and National Commerce Act, and that you and we both intend that the Act apply to the fullest extent possible to validate our ability to conduct business with you by electronic means.
- 9. **Termination/Changes.** We reserve the right, in our sole discretion, to discontinue the provision of your electronic communications, or to terminate or change the terms and conditions on which we provide electronic communications. We will provide you with notice of any such termination or change as required by law.
- 10. Consent. By signing below you agree that you have read, understand, and agree to the E-Sign Act. You hereby give your affirmative consent to provide electronic communications to you as described herein. You further agree that your computer satisfies the hardware and software requirements specified above and that you have provided us with a current e-mail address at which we may send electronic communications to you.

Sincerely,

Jeff Frahm, Family Services Manager
Siouxland Habitat for Humanity

Acknowledged and Agreed to by:

Applicant: \_\_\_\_\_ Co-Applicant: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Printed Name: \_\_\_\_\_

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

Applicant's Address: \_\_\_\_\_

#### 21. NOTICES (Cont.)

#### PRIVACY STATEMENT AND NOTICE OF SIOUXLAND HABITAT FOR HUMANITY

At Siouxland Habitat for Humanity, 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

- 1. 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

throughout the process to ensure security and confidentiality.

- Information we receive from a consumer reporting agency.
- 2. We may disclose the following kinds of nonpublic personal information about you:
- Information we receive from you on applications or other forms, including, but not limited to your name, Address, Social Security Number, Assets, Income, etc.
- Information about your transactions with us, our affiliates, or others including, but not limited to your loan balance, payment history, etc.; and
- Information we receive from a consumer reporting agency such as your loan balance, payment history, creditworthiness, credit history.
- 3. We do not disclose any nonpublic personal information about our customers to anyone except as permitted by law.
- 4. We may disclose nonpublic personal information about you to the following types of third parties:
  - Financial service providers, including but not limited to servicing agents;
  - Nonprofit organizations or governments
  - Or as otherwise permitted by law.
- 5. If you prefer we do not disclose non-public 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 any disclosures to nonaffiliated third parties you may call SIOUXLAND HABITAT FOR HUMANITY at 712-224-5117.
  - 6. We restrict access to nonpublic personal information about you to:
    - HFH agents and employees that need to know that information to provide Habitat's services to you;
    - Disclosures to other nonaffiliated third parties as permitted by law. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

personal information.	
Acknowledged and Agreed to by:	
Signature:	Signature:
Printed Name:	Printed Name:
Date:	Date: