

Fall 2022 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, 2022.** It is important to submit early; in the event you need to resubmit any documentation, all materials need to be received by October 31, 2022.

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

Emily Vondrak, Marketing & Outreach Manager

Siouxland Habitat for Humanity 1150 Tri-View Avenue Sioux City, Iowa 51103 712-255-6244 evondrak@siouxlandhabitat.org

How to submit your completed application:

BY MAIL: Siouxland Habitat for Humanity

Attn: Emily Vondrak 1150 Tri-View Avenue Sioux City, IA 51103

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, 8:00 AM – 4:30 PM.

The ReStore is open until 5:00 PM on Tuesday and Thursday, and open until 7:00 PM on Wednesdays. Please note, our office is currently under construction, so if you come at a time when the ReStore is closed and the doors are locked, please call 712-255-6244 x 7 and we can let you in.

BY EMAIL: evondrak@siouxlandhabitat.org





Although Habit for Humanity reserves the right to designate home location assignments, which home location are you most interested in? (Please select one)

1101110	location are you most interested in: (I lease select one)
	Sioux City Location - Townhome
	Sioux County Location – Single Family Home
How	lid you hear about the application? (Please circle)
	Radio
	TV
	Newspaper
	Website
	Friend
	Family
	Current Habitat Homeowner
	Facebook
	Pull tab flyer
	Through the School system
	Other
	is most appealing about becoming a partner family and gaining homeownership through at for Humanity? (Please circle)
	Becoming a partner with Habitat and being part of your own home build
	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 traditional
	bank
	Other





Fall 2022

Partner Family Application

Application Date	•
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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 nousement supprepriate anower to outer 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 2022 - JUNE 2023

Amounts below valid for Woodbury County ONLY

Number of People in Household	1	2	3	4	5	6	7	8
Annual Income Minimum	\$22,975	\$26,250	\$29,525	\$32,800	\$35,425	\$38,050	\$40,674	\$43,300
Annual Income Maximum	\$45,950	\$52,500	\$59,050	\$65,600	\$70,850	\$76,100	\$81,350	\$86,600

Amounts below valid for Sioux County ONLY

Annual Income Minimum	\$25,250	\$28,850	\$32,450	\$36,050	\$38,950	\$41,825	\$44,750	\$47,600
Annual Income Maximum	\$50,500	\$57,700	\$64,900	\$72,100	\$77,900	\$83,650	\$89,450	\$95,200

^{**}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 completed and signed application (Section C), please include:

copy of all income receipts (pay stubs, child support verified by the content benefit letter, or unemployment, etc.) for all members of the househol days (should align with Section 10 of the application).	•
copy of current credit report for each applicant (Section 15). *Complete	this early in the process
copy of last month's utility bills (gas/electric, water, TV, phone, intern	et)
copy of bank statements for the last two months for all household per	sons with income
copy of your <u>Federal</u> and <u>State</u> filed income tax returns for the most showing dependents, gross income, and refund amount—for EACH a applicant	=
copy of photo IDs for all adult household members	
copy of social security cards or permanent resident cards for all house	ehold members
a statement indicating what your current housing situation is (Section 7 poor heating or plumbing, leaky roof, overcrowding, unsafe or unsanitary or special needs, rent to income ratio (the rent you pay compared to you income)	ary conditions
a signed Disclosure & Release Authorization Form (Section 19) giving S to check a sex offender registry and perform a criminal background checked as a Partner Family	•
a signed Verification of Employment for all working individuals in the honor of the document black.	
signed Notices: Special Purpose Credit Check Program, E-Sign Act, P (Section 21)	rivacy 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. Ap	plicant Informa	itio	n	
Last Name	First Name	M.I.	Date of Birth		Married/Single/Separated?	HomePhone:
						Cell Phone:
Email Address		Driver's Lic	ense Number:	Are	you a US Citizen? Yes	No
				SS	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			City		State	Zip Code
	How long did you live at you e additional space, please				Please provid aper and attach to applicatio	e housing info for the past five (5) on.
2. Co-Applic	cant Information (th	is info ne	eded for all pe	rsc	ons 18 and older, mo	e room on back)
Last Name	First Name	M.I.	Date of Birth		Married/Single/Separated?	
						Cell Phone:
Email Address		Driver's Lic	ense Number:	Are	you a US Citizen? Yes	No
				SS	N or Lawful Permanent Reside	ent ID#
Present Address			City		State	Zip Code
Rent Own	How long have you lived at	present add	ress?			

	City	State	;	Zip Code				
Rent Own How long did you live at your previous address? Please provide your housing info for the past five (5) years. If you require additional space, please record info on a separate piece of paper and attach to application.								
nly those w	ho will reside in family	y home more tha	an 60% of	f the time)				
Age	Date of Birth		Male	Female				
	•	•						
	Date of Birth		Male	Female				
	nly those w Age	nly those who will reside in family Age Date of Birth al space, please record your informating the home but are not depende	Please provide your information on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on the separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece of paper and attach to application on a separate piece pi	Please provide your housing on a separate piece of paper and attach to application. Note				

4. Applicant Employment Information							
Name and Address of Current E	Employer		Business Phone				
Date of Hire	Hourly Wage / Hours per Week	Average Monthly Income	Are you self-employed?				
Job Title or Description:	Job Title or Description:						
If you have been emplo	If you have been employed at your current job less than one year, please provide your previous employment information						
Name and Address of Previous	Name and Address of Previous 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) E	Employment Information	1 *please provide on separate she	et for all members 18 and older				
Name and Address of Current E	Employer		Business Phone				
Date of Hire	Hourly Wage / Hours per Week	Average Monthly Income	Are you self-employed?				
Job Title or Description:							
lf you have been emplo	yed at your current job less than	one year, please provide your previo	ous employment information				
Name and Address of Previous	Employer		Business Phone				
Employed From: To:	Hourly Wage / Hours per Week	Average Monthly Income	Were you self-employed?				
Job Title or Description:							
	6. Homek	ouyer Information					
Have you ever owned a home before? Yes No If yes, why do you no longer own it?							
Dates of Ownership:_to							
Do you own land? Yes No If yes, please describe, include location:							
Land monthly loan payment: \$ Total unpaid loan balance on land: \$							
Have you ever applied for a home loan? Yes No If yes, were you approved? Yes No							
		oved, how much were you appr					
Have you ever applied for a Habitat home before? Yes No If yes, when?							

7. Current Housing Situation						
Number of Bedrooms:	Number of Bathrooms:					
Other rooms included in the home	where you are currently living:					
	_	_Finished Basement_				
_	s your monthly rent payment? \$					
	ation for your <i>current landlord</i> in the space					
Landlord Name	Address		Phone			
If you have lived at your current	 address for less than one year, pleas	se provide the contact informati	on for your previous landlord:			
Previous Landlord Name	Address		Phone			
In the space below, please descri	L be your current housing situation and/or	house condition. Why do you feel	you need a Habitat Home?			
	8. Willingness	to Partner				
Humanity. Being a long te home, being a good home	bitat home, you and your family return partner means completing a seowner and neighbor once you in long after your home is built.	all partner requirements du	ring the construction of your			
mandatory number of "sv 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 cle location courses, working in the activities. (If you or a family mer mplete your required "sweat equ	Sweat equity" is earned varing a lot, painting, helpe Habitat ReStore or main mber has a physical disabil	when you help to build your ing with home construction, office, helping with special			
Applicant Signature		 Date				
Co- Applicant Signature		 Date				

	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	Monthly Expenses	\$		

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 (Banl	k 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:	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:	Ва	alance: \$			
The account above belongs to:		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 \$1,500. How will you ensure you will have t		y contribution due for	r down	payment	closing co	ests will be
13. Declarations						
			App	olicant	Co-A	pplicant
a. Are you currently involved in a lawsuit?			Yes	□ No	□ Yes	□ No
b. Do you have debt because of a court decision aga			Yes	\square No	□ Yes	□ No
c. Are you presently delinquent or in default on any fe	ederal debt or any other	loan?	Yes	□ No	□ Yes	□ No
d. Are you a co-signer on another note?			Yes	\square No	□ Yes	\square No
e. Are there any outstanding judgments against you? f. Have you declared bankruptcy in the past two years	2		Yes	□ No	☐ Yes	□ No
g. Have you had any property foreclosed upon in the			Yes	□ No	☐ Yes	□ No
h. Have you had anything repossessed within the pas			Yes	□ No	□ Yes	□ No
i. Have any of your accounts been placed into collect		ears?	Yes	□ No	□ Yes	□ No
j. Have you ever been convicted of a felony?			Yes	□ No	□ Yes	□ No
k. Are you paying alimony or child support?			☐ Yes☐ Yes	□ No□ No	□ Yes □ Yes	□ No□ No
If you have answered yes to any questions "a" thru "k	.", please provide a deta	illed explanation below:				
	14. Affirmation S	Statement				
I understand that by filing this application, I a Habitat home, my ability to repay a no-int Habitat partner family. I understand the eva employment verification. I have answered answered the questions truthfully, my appli Habitat home, I may be disqualified from Habitat for Humanity even if the application submitted along with this application.	erest loan and other luation will include all the questions of cation may be denthe program. The	er expenses of homeopersonal visits, a creon this application truited, and even if I havoriginal or a copy o	owners dit chece thfully. ve alre- f this a	hip, and other in the control of the	my willingr inal history and that i selected n will be	ness to be a check, and f I have not to receive a retained by
Applicant Signature	Date	Co-Applicant Signa	ture		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 712-722-3527 313 N. Main Avenue, 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 by-step process to improve your score						ore, offer a step-
16	6. Recru	ited Sweat Ed	quity Con	tact		
Please list three people that you Name	i have asl	ked to help you	with your :	sweat equity, and Contact Info	, ,	reed to help.
17. Affilia	ate Proc	edures for A _l	pplicants	with Disabiliti	es or Challer	nges
Siouxland Habitat for Humanity ac English as a second language, vis 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 in a solicy for the courage and supparriers to obtain	impaired, e achieveme port an affi	tc. ent of equal hous rmative advertisi	ing ng and	EQUAL HOUSING OPPORTUNITY
18. Infor	nation f	or Governme	ent Monito	oring Purpose	S	
Please read this statement before comfor loans related to the purchase of home are not required to furnish this informatio of this information, nor on whether you clender is required to note race and sex of please check the box below indicating so which the lender is subject under applications.	es, in order to n, but are en noose to fur n the basis . (Lender m	to monitor lender's incouraged to do so nish it or not. Howe of visual observationst review the abo	compliance voluments. The law proever, if you choo or surname ove material to	with equal credit oppo ovides that a lender n loose not to furnish i e. If you do not wish	ortunity and fair ho nay neither discrin t, under federal re to furnish the infor	ousing laws. You ninate on the basis gulations this mation below,
Applicant Name:				I do not wish to	o furnish this info	ormation
Race/Ethnicity (circle all that apply): American Indian or Alaskan Native Other (specify):	Asian	Black/African		Caucasian	Hispanic	
Co-Applicant Name:				I do not wish to	o furnish this info	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):	Date of Birth:		
Social Security #:	DL #:	State:	
Address:			
City:	State:	Zip Code:	
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) 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: \$/Hour; or \$/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) Date:	Title: Date: Telephone:		
WARNING: Title 18. Section 1001 of the U.S. Code states that a person is guilt	Y 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. VERIFICAT	ION 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):	
<u>X</u>	X
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 office@siouxlandhabitat.org or 712-255-6244 ext 202. 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 office@siouxlandhabitat.org.
- 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 office@siouxlandhabitat.org or 712-255-6244 ext. 202. 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,

Emily Vondrak, Marketing & Outreach Manager Siouxland Habitat for Humanity

Acknowledged and Agreed to by:

Applicant: _____ Co-Applicant: _____

Printed Name: _____ Printed Name: _____

Date: _____ Date: _____

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 712-255-6244.
 - 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.

Acknowledged and Agreed to by:	
Signature:	Signature:
Printed Name:	Printed Name:
Date:	Date: