

HOMEOWNERSHIP APPLICATION & INSTRUCTIONS

This homeownership opportunity has **specific income requirements** listed in the box below. Add up the number of household members you have living with you plus add yourself to find your family size. Your household's yearly income must fall between the minimum and maximum incomes listed.

PLEASE NOTE:

- We will contact you via **EMAIL** regarding your application so please make sure your email address is correct. Please check your junk and spam folders regularly.
- We do not accept incomplete applications.

If you have any questions or need assistance with applying, we are here to help. Reach out to apply@habitatliny.org or call 631-422-4828 x 114.

2025/26 INCOME GUIDELINES		
Household Annual Income must fall within these limits according to family size, including yourself.		
Family Size #	Minimum Gross Income	Maximum Gross Income
1	\$69,750	\$ 92,350
2	\$74,250	\$105,550
3	\$79,200	\$118,750
4	\$82,450	\$131,900
5	\$89,050	\$142,500
6	\$95,650	\$153,050
7	\$102,750	\$163,600
8	\$108,850	\$174,150



We are pledged to the letter & spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing regardless of race, creed, color, national origin, sexual orientation, gender identity or expression, military status, sex, age, disability, marital status, lawful source of income or familial status.

Dear Applicant: Please complete this application to determine if you qualify for the Habitat for Humanity homeownership program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act.

2026A

APPLICANT INFORMATION

Applicant	Co-applicant (if any)
Applicant's last name _____ Applicant's first name _____	Co-applicant's last name _____ Co-applicant's first name _____
Date of Birth: _____ Mobile Phone Number: _____ Email: _____ Social Security number: _____ Check One: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)	Date of Birth: _____ Mobile Phone Number: _____ Email: _____ Social Security number: _____ Check One: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)

Household members (anyone who would live in the Habitat house with you if you are selected)

Name	Age	Male	Female	Monthly gross wages (before taxes)
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years _____	Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years _____
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If you have lived at your present address for less than two years, complete the following:

Last address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years _____	Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ _____ Number of years _____
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WILLINGNESS TO PARTNER

Applicant		Co-applicant	
Name and address of CURRENT employer	Years on this job	Name and address of CURRENT employer	Years on this job
	Monthly gross wages (before taxes) \$		Monthly gross wages (before taxes) \$
Your position	Business phone	Your position	Business phone

If working at current job less than 2 years, or if you have a second job complete the following information

Name and address of LAST employer	Years on this job	Name and address of LAST employer	Years on this job
	Monthly gross wages (before taxes) \$		Monthly gross wages (before taxes) \$
Your position	Business phone	Your position	Business phone

MONTHLY INCOME OF YOUR HOUSEHOLD

Income source	Applicant	Co-applicant	Others in household	Total
Employment wages	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
Pension	\$	\$	\$	\$
Disability	\$	\$	\$	\$
Section 8 housing	\$	\$	\$	\$
Other	\$	\$	\$	\$
Total	\$	\$	\$	\$

PLEASE NOTE:
Self-employed applicants **will be required** to provide additional documentation such as tax returns and financial statements.

HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE

Name	Income source	Monthly income	Date of birth

ASSETS (list ALL applicant(s) checking, savings and retirement accounts (if any))

Please note: You must have a minimum of \$5,000 in bank assets to qualify

Name of banking institution	Last 4 digits of account number	Last statement's balance
		\$
		\$
		\$
		\$
		\$

DEBTS (list who applicant(s) owe money to)

Type of Debt	Creditor's Name	Amount due monthly	Total Amount Owed
Auto loan (or lease payment)		\$	\$
Student loan		\$	\$
Personal loan		\$	\$
Credit card(s)		\$	\$
Credit card(s)		\$	\$
Other		\$	\$

DECLARATIONS

Please check the box beside the word that best answers the following questions for you and the co-applicant

	Applicant	Co-applicant
a. Do you have any outstanding judgments because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Have you been declared bankrupt within the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had property foreclosed on or deed in lieu of foreclosure in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you currently involved in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you currently delinquent or in default on your rent payments, any federal debt or any other loan, mortgage financial obligation or loan guarantee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
g. Are you paying alimony or child support or separate maintenance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
h. Are you a co-signer or endorser on any loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
i. Have you ever been evicted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
j. Are you a U.S. citizen or legal, permanent resident (have US birth certificate or green card)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered "yes" to any question a through i, or "no" to question j, please explain on a separate sheet of paper and attach here

AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat homeownership program, my ability to repay an affordable mortgage and other expenses of homeownership, and my willingness to be a partner through sweat equity. I understand that the evaluation will include a credit check and may also include interviews and a home visit. I have answered all of 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 a Habitat home, I may be disqualified from the program and forfeit any rights or claims to a Habitat home. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved. I understand that I will not receive this application back nor or any of the documentation I submit with it. 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. Habitat for Humanity of Long Island, Inc. will communicate with me on the status and/or outcome of this application by email only and I have provided a valid email address on page 1. By signing below, I am consenting to Habitat's email policies and to receiving Habitat's email communications regarding this application.

X _____ X _____
 Applicant's signature Date Co-applicant's signature Date

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation.

Applicant	Co-applicant
<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male

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 or 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 Northeast region, 1 Bowling Green #318, New York, NY 10004 - 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.

X _____ X _____
Applicant's signature Date Co-applicant's signature Date

DISCLOSURE THAT CONSUMER REPORTS MAY BE OBTAINED FOR APPLICANTS, EMPLOYMENT OR VOLUNTEER PURPOSES

In connection with your anticipated or continued engagement as a volunteer, or for employment purposes or your application for home ownership including but not limited to initial employment (e.g., processing your employment application), promotion, reassignment, or retention, with Habitat for Humanity of Long Island, Inc. as applicable, Habitat for Humanity of Long Island, Inc. is hereby advising you that it may obtain or have prepared one or more consumer reports bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

Such consumer reports, where applicable, would be obtained for the permissible purpose of Habitat for Humanity of Long Island, Inc.'s legitimate business need in connection with your anticipated or continued engagement as a volunteer or applicant, in accordance with your written instruction, and/or for employment purposes. The scope of this notice is all encompassing, allowing Habitat for Humanity of Long Island, Inc. to obtain from any outside organization all manner of consumer reports now and throughout the course of your anticipated and continued engagement as a volunteer, applicant for homeownership or employee to the extent permitted by law. This disclosure is valid for current and future reports, and Habitat for Humanity of Long Island, Inc. intends for this Disclosure to cover both your anticipated engagement as a volunteer, applicant or employee, and any additional consumer reports obtained while you remain a applicant, future homeowner, volunteer or employee.

AUTHORIZATION TO OBTAIN CONSUMER REPORTS FOR VOLUNTEER, APPLICANT OR EMPLOYMENT PURPOSES

I hereby authorize Habitat for Humanity of Long Island, Inc. to obtain or have prepared one or more consumer reports on me in connection with my anticipated or continued engagement as a volunteer or homeownership applicant, in accordance with my written instructions herein, and/or for employment purposes, including but not limited to initial employment, promotion, reassignment, retention of employment, and any other use not prohibited by law as applicable. These reports may contain information regarding my credit history, criminal record history, driving record history, and any other type of information that is permissible by all governing laws. I understand this information may be obtained from previous employers, companies, corporations, law enforcement agencies, persons, educational institutions, and other agencies, businesses and individuals. I hereby authorize and direct all persons who may have information relevant to any such consumer report to disclose it to the Habitat for Humanity of Long Island, Inc. or its agents.

Volunteers and Applicants Only: As applicable, I acknowledge that I am seeking to become or continue as a homeownership applicant or volunteer with Habitat for Humanity of Long Island, Inc. I acknowledge that Habitat for Humanity of Long Island, Inc. has a legitimate business need to obtain my consumer report, including to protect the safety and security of the premises in which volunteer services may be rendered, to ensure the safety of vulnerable populations, including but not limited to, children, the elderly, and the indigent, and to protect the reputation of Habitat for Humanity of Long Island, Inc. and the quality of services it provides.

This Authorization is valid for current and future reports, and I specifically understand that Habitat for Humanity of Long Island, Inc. intends for this Authorization to cover both my anticipated engagement as a volunteer or applicant or my application for employment and, any additional consumer reports obtained while I remain a volunteer, applicant, future homeowner or employee.

X _____ X _____
Applicant's signature Date Co-applicant's signature Date

APPLICATION INSTRUCTIONS

Submit this application with COPIES of the following items FOR EACH APPLICANT:

	Applicant	Co-applicant
A copy of your photo ID;	<input type="checkbox"/>	<input type="checkbox"/>
A copy of your social security card;	<input type="checkbox"/>	<input type="checkbox"/>
Copies of the 2 most recent pay stubs for all jobs for all applicants (if employed) or a copy of the most current award letter (if receiving fixed income such as social security disability income, pension, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Copies of W2s (or 1099s) for each applicant for 2023, 2024 and 2025 (if employed). If self-employed, please supply copies of your last three federal tax returns (Form 1040 plus all schedules)	<input type="checkbox"/>	<input type="checkbox"/>
Copies of ALL PAGES of your last 2 months of bank statements (include copies of ALL ASSET ACCOUNTS including checking, savings and retirement accounts, if any. If your accounts do not show \$5,000 in assets at time of application, you will not qualify.	<input type="checkbox"/>	<input type="checkbox"/>
Copy of proof of citizenship or permanent residency status (US birth certificate, Green Card, or Naturalization Certificate)	<input type="checkbox"/>	<input type="checkbox"/>

All pages of the forms in this packet are required. **Please double check that you filled in all sections and have signed on pages 5, 6 and 7.**

There is a credit check fee of \$40 per applicant which you can pay after your application is accepted. We will email you a link to pay by credit card within 10 days. Credit will not be run until a payment is received.

DROP OFF OR SEND THE APPLICATION TO:

Habitat for Humanity of Long Island, Inc.
2111 Lakeland Avenue
Ronkonkoma, NY 11779
Att: Homeownership Dept.

Please read:

Incomplete applications will not be accepted. We will review your submission once received and, if complete, we will email you further instructions to follow. If incomplete, you will have **10 days to provide the missing documents.** Your application will not be processed until all materials are received and the credit check fee is received.