



Pre-Application Form

for Homeownership

Previous ID # _____ (for office us only)

Habitat for Humanity Silicon Valley is dedicated to partnering with working families with a low income to build decent and affordable homes in the Santa Clara County. If you are interested in homeownership, please complete out this form and email, mail or fax it to: **Homeowner Relations Department, 513 Valley Way, Milpitas, CA 95035** · Fax: **408-942-6446** · apply@hfhsv.org *It will take 4-6 weeks to be processed.*

Check the appropriate boxes for your family size and your Annual Gross Income.

Household Size	
(Include all members in your household)	
<input type="checkbox"/>	less than 3. If less than 3 how many? _____
<input type="checkbox"/>	3
<input type="checkbox"/>	4
<input type="checkbox"/>	5
<input type="checkbox"/>	6
<input type="checkbox"/>	7
<input type="checkbox"/>	8 <input type="checkbox"/> more than 8

Annual Gross Household Income	
(Include all wage earners 18+ who are not full-time students)	
<input type="checkbox"/>	\$33,959.00 or less
<input type="checkbox"/>	\$33,960.00 - \$42,450.00
<input type="checkbox"/>	\$42,451.00 - \$53,050.00
<input type="checkbox"/>	\$53,051.00 - \$61,550.00
<input type="checkbox"/>	\$61,551.00 - \$70,050.00
<input type="checkbox"/>	\$70,051.00 - \$84,060.00
<input type="checkbox"/>	\$84,061.00 or more

Answer Yes or No to the following questions

- | | Yes | No |
|--|--------------------------|--------------------------|
| • Have you or your co-applicant owned a home in the past three years? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Are both the applicant and co-applicant citizens or a legal permanent resident of the U.S.?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| • Did you file income tax returns for 2007 and 2008?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| • Have all the household members lived together for at least one year?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| • Would you or a member of your household benefit from a wheelchair accessible unit?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| • Will your household be willing to work at least 500 hours of "sweat equity" building your home? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Where did you receive this Pre-Application? _____ | | |

Applicant

Co-Applicant

Name: _____

Name: _____

Home Address: _____

Home Address: Same as Applicant

City, State, Zip: _____

City, State, Zip: _____

Home Phone: _____

Home Phone: _____

Cell Phone : _____

Cell Phone : _____

Email: _____

Email: _____

Current Monthly Salary: \$ _____

Current Monthly Salary: \$ _____

Annual Gross Income: \$ _____

Annual Gross Income: \$ _____

City of Employment: _____

City of Employment: _____

How long have you lived at this address? _____

How many members are in your household? _____

I (We) understand that my (our) application will not be processed if the statements and information submitted on this pre-application form is not true and correct. I (We) understand that if we are eligible to apply we will be asked to submit a full Application Packet including W2s, Tax Returns, Bank Statements, Pay Stubs and other relevant documents.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

