



Habitat for Humanity in Whatcom County, Inc.
 1825 Cornwall Ave, WA 98225
 (360) 715-9170



Preliminary Eligibility Interest Form

Dear Applicant: We will be processing applications again in April 2019. This form indicates your interest in applying for a Habitat home, and helps Habitat determine if you meet the basic criteria to become eligible for a Habitat home and mortgage. If you are *not* eligible, you will be notified as soon as possible. If you *are* currently eligible, you will be invited to apply in April 2019.

APPLICANT INFORMATION

APPLICANT		CO-APPLICANT	
Name: _____	DOB: _____	Name: _____	DOB: _____
Home Phone: _____		Home Phone: _____	
Mobile: _____		Mobile: _____	
Work: _____		Work: _____	
Which is the best way to contact you? Home Work Mobile		Which is the best way to contact you? Home Work Mobile	
Email: _____		Email: _____	
Is email a reliable way to contact you? Yes No		Is email a reliable way to contact you? Yes No	
Dependents and others who will live with you (not listed by co-applicant).		Dependents and others who will live with you (not listed by applicant).	
Name: _____	DOB _____	M <input type="checkbox"/>	F <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) <input type="checkbox"/> Own <input type="checkbox"/> Rent		Present Address (Street, City, State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent	
<input type="checkbox"/> Living w/ Family		<input type="checkbox"/> Living w/ Family	
Number of bedrooms _____		Number of bedrooms _____	
Rent or mortgage payment \$ _____/Month		Rent or mortgage payment \$ _____/Month	
Years at current address _____		Years at current address _____	
Years living in Whatcom County _____		Years living in Whatcom County _____	

Knowingly providing false information on this application will disqualify the applicant from further consideration.



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APPLICANT INFORMATION

APPLICANT	CO-APPLICANT
Income: Wages: _____ /Month Other (Include child support, SSI, EBT/Food stamps, etc): Type: _____ Amount _____ /Month Type: _____ Amount _____ /Month	Income: Wages: _____ /Month Other (Include child support, SSI, EBT/Food stamps, etc): Type: _____ Amount _____ /Month Type: _____ Amount _____ /Month

Tell us about any dangerous or unhealthy conditions regarding your current living conditions :

Tell us about why you feel that you need and are eligible for a Habitat for Humanity home:

I understand that by filing this application, I am authorizing Habitat for Humanity in Whatcom County to evaluate my actual need for a Habitat home, my ability to afford the purchase price of a Habitat home, other expenses of homeownership and my willingness to be a Partner Homebuyer. I understand that the evaluation will include a sex offender and criminal background check. 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 that even if I have already been selected to receive a Habitat home, I may be disqualified from the program.

Signature: _____	Date: _____	Signature: _____	Date: _____
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In the event that we can not contact you, is there a third party you would like us to contact on your behalf?
 No Yes Name: _____ Relationship: _____

Phone Number or Best Way to contact them: _____

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