

Mutual Self-Help Housing Pre-Application

Date: _____

Applicant: _____ Co-Applicant: _____

Home/Cell Phone: _____ Home/Cell Phone: _____

Work Phone/Ext: _____ Work Phone/Ext: _____

Address: _____ Current Living Situation: (Check Appropriate Box Below)
 _____ Do you currently - Rent: _____ Own: _____ Other: _____

How long at this address? _____ Amount of Monthly Rent: \$ _____

How did you hear about our program? _____

ARE YOU A GRADUATE OF A HOMEBUYER EDUCATION CLASS? Yes _____ No _____
 (If yes, attach copy of "Certificate of Achievement")

Household and Income Information (Please Print)

Beginning with yourself, list every person living in your household and the information requested.

*** Gross income is total income before taxes or other items are deducted.**

****Sources of income include employment, retirement/pensions, Social Security, SSI, VA benefits, Work First, annuities, alimony, child support, regular contributions from family, rental income, or other regular payments.**

Print First and Last Name	Relation to Applicant	Date of Birth	Social Security #	Gross Annual Income*	Employed by (or Source of Income)**

Debt Information (Please Print)

List all debts (car payments, student loans, bank notes, credit cards, personal loans, etc.) Do not include living expenses such as rent and utilities.

Creditor	Monthly Payment	Remaining Balance

Have either the applicant or the co-applicant had a bankruptcy? Yes _____ No _____ Applicant _____ Co-Applicant _____

If yes, date? _____

Do either the applicant or the co-applicant have unpaid judgments? Yes _____ No _____ Applicant _____ Co-Applicant _____

If yes, please attach a brief summary of the situation

Please be sure to fill out both sides of this application.

Citizenship Status

Is the applicant a US citizen? **Yes** ____ **No** ____ Is the co-applicant a US citizen? **Yes** ____ **No** ____

If either applicant or co-applicant is **not** a US citizen, please describe citizenship status.

Statement of Commitment

The self-help housing program requires that each household work approximately 25 hours per week on home construction. Can you realistically work approximately 25 hours per week? **Yes** ____ **No** ____

In the self help program, you not only work on your own home, but on homes belonging to others in the group, and they work on yours. Groups usually consist of four to eight participants. No member of the group moves in until all the homes are complete. Are you willing to complete all the homes in your group? **Yes** ____ **No** ____

Are you physically able to do light construction? **Yes** ____ **No** ____

Do you have transportation to get to and from the construction site? **Yes** ____ **No** ____

Applicant Rights and Responsibilities

I understand that I have the right to a fair hearing of any action directly concerning this application. I certify that I have read **completely** this application, or that it has been read to me. **I further certify that all information contained herein is true.** I also certify that a false statement or false representation made by me for the purpose of obtaining services makes me subject to prosecution under penalty of law. I also authorize Mountain Housing Opportunities, Inc. to make any and all inquiries to verify the answers I have given, such as release of information listed above to other agencies on my behalf for the purpose of verification in connection with any assistance that may be provided to me.

Applicant's Signature: _____ **Date:** _____

Co-Applicant's Signature: _____ **Date:** _____

Please return pre-application to:

Mountain Housing Opportunities, Inc.
64 Clingman Avenue, Suite 101
Asheville, NC 28801
ATTN: Coryn Harris
Phone: 828-254-4030 x 122
Fax: 828-254-0120



