



**HOMEOWNERSHIP PRE-QUALIFICATION FORM: 70 Boston Rd. #6 & #7,
Westford, MA 01886**

This is a pre-screening questionnaire, not a final application for homeownership.

This form may be emailed to Nancy@lowellhabitat.org, hand delivered, or mailed to the address above.

Applicant Name:

PRINT (first, middle initial, last)

Co-Applicant Name:

PRINT (first, middle initial, last)

Mailing Address _____ City _____ State _____ Zip _____

Email Address: _____

Cell Phone # _____ Home phone #: _____

1. Do you fall within the income range listed on pg.2 ?

Yes _____ No _____

2. Do you live, work or attend school in one of the HFHGL affiliate towns listed on pg. 2 ?

Yes _____ No _____

3. Have you had steady income for at least 6 months?

Yes _____ No _____

4. Have you ever owned a home (now or in the past)?

Yes _____ No _____ (If yes, how long ago: _____)

5. If approved, how many people would be living in the home?

Total # of people: _____

6. **Including yourself**, please provide the names, sex & date of birth for all who will be living in the home.

NAME	AGE	SEX
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Have you ever previously applied for a Habitat home?

Yes _____ No _____ (If Yes, when: _____)

8. Are you a US Citizen? Yes _____ No _____

If no, please note your immigration status:

Permanent Resident _____ Other _____

9. Have you filed bankruptcy or been through a foreclosure within the last 5 years ?

Yes _____ No _____ (If yes, when: _____)

10. If you are accepted into the program, HFHGL requires you to work between 225-450 of sweat equity hours. In addition, you will be required to take homebuyer financial education classes.

Are you willing to make these commitments?

Yes _____ No _____

11. List **ALL** sources of **monthly** household income, including any from members 18 years & older, who will be residing in the home.

List GROSS wages (before taxes & deductions)

Name: _____ **Total Income per month (\$)** _____

12. Please list your **current expenses**:

Rent: \$ _____ Car Loan: \$ _____

Total Credit Card Balances*: \$ _____

*estimate

By my signature, I affirm that the information on this form is true and correct. I understand that providing false information could cause me to be disqualified from the Habitat for Humanity of Greater Lowell program. I also understand that I will learn the results from this questionnaire within 30 days, but this does not constitute additional services from Habitat for Humanity of Greater Lowell. **IF YOU DO NOT SIGN THIS FORM IT WILL RESULT IN IMMEDIATE DENIAL AS THE DOCUMENT WILL BE INVALID.**

Date ____/____/____

Applicant Signature: _____

Date ____/____/____

Co-Applicant Signature: _____