



2025-2026 HOMEOWNERSHIP APPLICATION COVER SHEET

WHAT IS HABITAT?

Habitat for Humanity of South Hampton Road's mission is to build affordable homes that strengthens families and communities in South Hampton Roads. We serve all seven geographical entities that comprise South Hampton Roads: Chesapeake, Isle of Wight, Norfolk, Portsmouth, Smithfield, Suffolk, and Virginia Beach if affordable properties are available.

HOW ARE FAMILIES CHOSEN?

➤ **NEED:** Applications are considered if present housing is overcrowded, in poor repair, or is under a subsidized rental program. Applicants cannot have been homeowners within the past three years.

➤ **INCOME:** Total yearly household income from all sources that can be verified for your family size must be within the FY 2025 Income Limits

*This chart has been updated with HUD 2025 rates

FAMILY SIZE	INCOME
1 Person	\$37,300- \$59,650
2 People	\$42,600-\$68,200
3 People	\$47,950-\$76,700
4 People	\$53,250-\$85,200
5 People	\$57,550- \$92,050
6 People	\$61,800- \$98.850
7 People	\$66,050-\$105,650
8 People	\$70,300-\$112,500

➤ **CREDIT HISTORY: Must have credit score 650 and above.** All collections, judgments and liens must be satisfied. Loan and credit payments must be paid on time. Applicants who have filed for bankruptcy must be at least two-year past discharge and have good credit re- established.

➤ **SWEAT EQUITY:** Applicants must be willing to partner with Habitat by earning between 250-500 sweat equity hours working with the staff and volunteers on various Habitat projects, including helping to build their own Habitat home. Relatives and friends may help accumulate hours on behalf of the selected family.

➤ **RESIDENCY:** Applicants must currently live in Norfolk, Portsmouth, Smithfield, Isle of Wight, Suffolk, Chesapeake or Virginia Beach for at least one year. We currently have no future plans to build in Virginia Beach.

HOW DO I APPLY?

CHECKLIST FOR APPLICATION SUBMISSION-HABITAT WILL NOT MAKE COPIES

- Completed application – Ensure application is signed.
- Processing fee of **\$25.00** for single applicant or **\$35.00** if there is a co-applicant (MUST be money order)
- Readable **copies** of all supporting documents – Documents will not be returned, make sure no originals are included in your package. **SUPPORTING DOCUMENTS MUST BE INCLUDED WITH YOUR APPLICATION AT THE TIME OF DROP OFF**
- Drop off in person at our HFH Administration office at 900 Tidewater Drive, Norfolk, VA 23504
- Sharon.Chittim@shrhhabitat.org – Be sure to add this email address to your contacts and check your junk folder for missed emails

APPLICATION PROCESSING FEES ARE NON-REFUNDABLE.

ADDITIONAL FACTS

HFH does NOT provide emergency housing. Our homebuyer program could take two years (sometimes longer depending on the project schedule), be willing to patiently wait.

Monthly mortgage payment is based on families affordability (includes escrow for real estate tax and home insurance).

Families make a down payment of 1% of the home price prior to closing.

Utilities are paid by the homebuyer. Once Construction begins, completion could take at least 6 to 9 months.

If your application payment does not go through for any reason, your application may be denied.

If your credit reports are FROZEN, you must contact all 3 credit bureaus to unfreeze and notify the Family Services Manager when it is accessible.

This information is subject to change.

Updated 04/24/2025



Habitat
for Humanity®



Habitat for Humanity of South Hampton Roads
900 Tidewater Drive, Norfolk VA 23504

We are pledged to the letter and 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 because of race, color, religion, sex, handicap, familial status or national origin

2025-26 Application Habitat Homeownership Program

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. **All information provided is subject to verification, therefore; applying does not guarantee acceptance.**

1. APPLICANT INFORMATION																																																	
Applicant	Co-applicant																																																
Applicant's name:	Co-applicant's name:																																																
Social security number:	Social security number:																																																
Email Address _____	Email Address _____																																																
Cell phone _____ Birth date _____	Cell phone _____ Birth date _____																																																
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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)																																																
<table border="0"> <thead> <tr> <th>Name</th> <th>Age</th> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Name	Age	Male	Female	_____	____	<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"/>	<table border="0"> <thead> <tr> <th>Name</th> <th>Age</th> <th>Male</th> <th>Female</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>_____</td> <td>____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Name	Age	Male	Female	_____	____	<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"/>
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_____	_____																																																
Number of years _____	Number of years _____																																																
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	Present address (street, city, state, ZIP code) <input type="checkbox"/> Own <input type="checkbox"/> Rent																																																
_____	_____																																																
Number of years _____	Number of years _____																																																

2. WILLINGNESS TO PARTNER

To be considered for Habitat homeownership, you and your family must be willing to complete a certain number of "sweat-equity" hours. Your help in building your home and the homes of others is called "sweat equity" and may include clearing the lot, painting, helping with construction, working in the Habitat office, attending homeownership classes or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:

	Yes	No
Applicant	<input type="checkbox"/>	<input type="checkbox"/>
Co-applicant	<input type="checkbox"/>	<input type="checkbox"/>

3. MILITARY SERVICE

Did you (or your deceased spouse) serve, or are you currently serving, in the United States Armed Forces?

(Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, Reserve or National Guard) Yes No

If yes, check all that apply:

Currently serving on active duty with projected expiration date of service/tour ____/____/____ (mm/dd/yyyy)

Currently retired, discharged, or separated from service

Only period of service was as a non-activated member of the Reserve or National Guard

Surviving spouse

Is anyone else in your household serving, or did they serve, in the United States Armed Forces? Yes No

If yes, check all that apply:

Currently serving on active duty with projected expiration date of service/tour ____/____/____ (mm/dd/yyyy)

Currently retired, discharged, or separated from service

Only period of service was as a non-activated member of the Reserve or National Guard

4. PRESENT HOUSING CONDITIONS

Number of bedrooms (please circle) 1 2 3 4 5

If you rent your residence, what is your monthly rent payment? \$ /month

Do you receive any housing allowance? Section 8, Housing Voucher, Subsidy, etc If so, how much? _____
(Please supply a copy of your lease and proof of rental payments.)

Name, address, phone number and email address of current landlord:

In the space below, describe the condition of the house or apartment where you live. Why do you need a Habitat home?

5. PROPERTY INFORMATION

If you own property, what is your monthly mortgage payment? \$ _____ /month Unpaid balance \$ _____

Do you own land? No Yes Monthly payment \$ _____ /month Unpaid balance \$ _____

If you wish your property to be considered for building your Habitat home, please attach the deed, any existing appraisal and information about any liens. Note: A separate approval process will apply with respect to any such requests, as each parcel of land is unique and may not be suitable for building on through the Habitat program

6. EMPLOYMENT INFORMATION

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 \$		Monthly (gross) wages \$
Type of business and job title	Business phone	Type of business and job title	Business phone

If working at current job less than one year, complete the following information-you may also add a second job, if applicable

Name and address of LAST employer	Years on this job	Name and address of LAST employer	Years on this job
	Monthly (gross) wages \$		Monthly (gross) wages \$
Type of business and job title	Business phone	Type of business and job title	Business phone

7. MONTHLY INCOME

Income source	Applicant	Co-applicant	Others in household	Total
Salary/Wages (gross)	\$	\$	\$	\$
TANF	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Social Security	\$	\$	\$	\$
SSI	\$	\$	\$	\$
Disability	\$	\$	\$	\$
VA Compensation	\$	\$	\$	\$
Retirement	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Total	\$	\$	\$	\$

PLEASE NOTE: Self-employed applicants may 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

8. SOURCE OF DOWN PAYMENT AND CLOSING COSTS

Where will you get the money to make the down payment or pay for closing costs (for example, savings or parents)? If you borrow the money, whom will you borrow it from, and how will you pay it back?

9. ASSETS

Name of bank, savings and loan, credit union, 401K etc.	Address	City, state	ZIP		Current balance
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$

10. DEBT

TO WHOM DO YOU AND THE CO APPLICANT(S) OWE MONEY?

Account	APPLICANT			CO APPLICANT		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Other motor vehicle	\$	\$		\$	\$	
Installment/Personal Loans	\$	\$		\$	\$	
Furniture, appliance, TVs (includes rent-to-own)	\$	\$		\$	\$	
Alimony	\$	\$		\$	\$	

Child support	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Credit card	\$	\$		\$	\$	
Student Loans	\$	\$		\$	\$	
Total medical	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
Other	\$	\$		\$	\$	
Total	\$	\$		\$	\$	

MONTHLY EXPENSES

Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities	\$	\$	\$
Insurance	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$
Land line	\$	\$	\$
Business expenses	\$	\$	\$
Union dues	\$	\$	\$
Transportation (gas, tolls, maintenance)	\$	\$	\$
Entertainment	\$	\$	\$
Other	\$	\$	\$
Total	\$	\$	\$

11. 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? Explain	<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 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?	<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. Are you a U.S. citizen or permanent resident?	<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 h, or "no" to question i, please explain on a separate piece of paper.

Please circle which cities you would be willing to live or move to:

Chesapeake Suffolk Portsmouth Norfolk

12. 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 loan and other expenses of homeownership, and my willingness to be a partner through sweat equity and otherwise according to Habitat for Humanity policy.

I understand that the evaluation will include personal visits, a credit check and employment verification. I have answered all the questions on this application truthfully and accurately and if any of the information provided changes after I submit this application, I will supplement this application, as applicable. 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.

If this application is created as (or converted into) an "electronic application," I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable federal and/or state electronic transaction laws. I intend to sign and have signed this application either using my: (a) electronic signature or (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.

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.

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

PLEASE NOTE: If more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application. Please mark your additional comments with "A" for applicant or "C" for co-applicant.

13. RIGHT TO RECEIVE COPY OF APPRAISAL

This is to notify you that we may order an appraisal in connection with your loan and we may charge you for this appraisal. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close.

Applicant's Signature: _____ Co-applicant's Signature: _____



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 **East Central Region, 1111 Superior Ave., Suite ,Cleveland, OH 44114-2507**, 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.

Applicant(s) Signature:

X _____

Co-applicant(s) Signature:

X _____

Print Name: _____

Print Name: _____

Date: _____

Date: _____

14. 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 or surname.

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 Birthdate: - / Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)	<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 Birthdate: - / Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)

To be completed only by the person conducting the interview	
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> Electronically	Interviewer's name (print or type)
	Interviewer's signature Date

Supporting Documents Checklist

PLEASE PROVIDE READABLE COPIES OF ALL DOCUMENTS
(THESE WILL NOT BE RETURNED)

Attach your documents in the order listed and attach to this page. Circle 'Yes' if you provide the information and 'NA' if it does not apply to you. **YOU MUST ANSWER EACH REQUEST WITH YES OR NA.**

1. Yes NA Pay stubs for the most recent 30 days for all jobs held by Applicant (last 6 stubs if paid bi-weekly)
2. Yes NA Pay stubs for the most recent 30 days for all jobs held by Co-applicant (last 6 stubs if paid bi-weekly)
3. Yes NA Pay stubs for the most recent 30 days for anyone else living with you (last 6 stubs if paid bi-weekly)
4. Yes NA Award letter for each person who receives Social Security and proof of payment
5. Yes NA Award letter for each person who receives SSI and proof of payment
6. Yes NA Award letter for each person who receives Disability payments and proof of payment
7. Yes NA Award letter for each person who receives VA Disability Compensation and proof of payment
8. Yes NA Award letter for each person who receives TANF and proof of payment
9. Yes NA Court order for child support for every child who receives it and payment printout
10. Yes NA Court order for alimony
11. Yes NA Previous **2 years** W-2's (NOT IRS tax form 1040) for all jobs of all working household members
12. Yes NA Previous **2 years** Tax Returns (1040 IRS form) for all jobs of all working household members
13. Yes NA If self-employed, include most recent balance sheet and profit-loss statement
14. Yes NA If self-employed, include IRS Form 1040 for previous 3 years
15. Yes NA Current Two Months of Bank statements for all accounts
16. Yes NA Current Two Months of ALL Credit card statements and
17. Yes NA Current two month of childcare receipts
18. Yes NA Separation Agreement if you are separated
19. Yes NA Divorce Decree if you are divorced
20. Yes NA DD214 Form (Member 4) if you are a military veteran
21. Yes NA Bankruptcy papers: Petition, schedule of debts, and discharge
22. Yes NA Copy of lease for present housing, Section 8 agreement (if applicable), plus letter or printout from landlord showing consistent rental payment history.
23. Yes NA Copy of cancelled check, receipt or printout of last 6 months of rental payments
24. Yes NA 2 most recent electric bills and proof of payment
25. Yes NA 2 most recent water/sewer bills and proof of payment
26. Yes NA 2 most recent gas bills and proof of payment
27. Yes NA Copy of Social Security Card and State Issued ID Card or Driver's License.

Name: _____ Email: _____ Mobile Phone: _____