Habitat for Humanity® of Greater Sacramento

EQUAL HOUSING OPPORTUNITY

Thank you for your interest in Habitat for Humanity of Greater Sacramento's Homeownership Program.

Please read, sign, and return this Cover Letter with your completed application.

1. HABITAT PACKET: Applicants should ensure that they have received the following documents included in this packet: Homeownership Program Cover Letter (this document), Homeownership Documentation Checklist, Habitat Homeownership Program Application, Monthly Budget, Credit Standards, Privacy Statement and Notice, HUD Income Limits 2026, authorization and consent for electronic communication, authorization and consent for background and credit checks.

2. ORIENTATION: For an application to be considered complete, the applicant(s) MUST view in full the online Application Orientation (attendance at previous year's Orientation does not excuse an applicant from this requirement). The orientation is only available on our website and may be found by visiting www.habitatgreatersac.org/apply. The verification word provided in the orientation will be required to consider your application complete.

3. APPLICATION AND CHECKLIST: A complete application **MUST** include copies of **ALL** items listed on the Homeownership Documentation Checklist and **MUST** be submitted in order of the checklist. Original documents will **NOT** be accepted.

    a. An Application and the Supporting Documents listed on the checklist may be submitted via the online application portal, dropped off to the Habitat office (Monday through Friday 10am to 4pm), or mailed to the Habitat address:

        Habitat for Humanity of Greater Sacramento
        Attn: Homeowner Services- Homeownership Applications
        819 North 10th St.
        Sacramento, CA 95811

4. APPLICATION PERIOD: Complete applications and all required documents will be accepted from **August 17, 2026 – October 16, 2026**. **We will not accept applications before or after this application period**.

    There is no application fee at the time of submission. However, if an application passes through the first round of internal review, we may require a processing fee of $30 per applicant/co-applicant to pull a complete consumer investigation report and $30 for all other household members 18 or older*, to run a formal background check. *A formal background check is required for each household member 18 or older.

IMPORTANT INFORMATION ABOUT DOCUMENT SUBMISSION

Read over this section about document submission to avoid making common application mistakes! Failure to meet these standards may result in the delay of application review or even denial from the program due to insufficient documentation.

1. All submitted documents must have your relevant identifying information visible
2. ALL pages of a document must be submitted, even if the last page is blank. All page numbers need to be readable, and the pages need to be in order to ensure that no information is deliberately concealed or omitted by an applicant.

3. If your household size and or financial conditions change during the application period (i.e. you get a new job, open a new line of credit, or any other incidences that affect your household income or debt), you must inform Habitat as soon as possible. The omission or concealment of pertinent financial information can result in the disqualification of an applicant from the program.

4. Only submit COPIES of the required documentation. Make sure to keep the originals for your own files. Originals will **NOT** be accepted

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IMPORTANT: Please note that until such time as a completed application has been submitted for review, we are unable to comment on or discuss your specific circumstances and/or eligibility for the Homeownership Program.

By signing this cover letter, I/We, _____ (the applicant/co-applicant) agree that I/We have read and understand the above program information entirely. Furthermore, I/We understand that it is my/our responsibility to read the accompanying application documents outlined in the first section of this Cover letter as failure to do so may result in the disqualification of my application from the program due to applicant error.

_____ _____

Applicant Date Co-applicant Date

Sincerely,

Habitat for Humanity of Greater Sacramento
Department of Homeowner Programs
(916) 440-1215
apply@habitatgreatersac.org

Home Ownership Application 2026
DOCUMENTATION CHECKLIST AND TRACK SHEET

Family Name: _____

Habitat for Humanity® of Greater Sacramento

EQUAL HOUSING OPPORTUNITY

SUBMIT PHOTOCOPIES OF YOUR PERSONAL DOCUMENTS, NOT ORIGINALS:

We will NOT allow applicants to make photocopies at our office

Applications MUST be submitted in the order requested below

I. HABITAT-PROVIDED MATERIALS

- ☐ DOCUMENTATION CHECKLIST – this form
- ☐ APPLICATION COVER LETTER
- ☐ ORIENTATION VERIFICATION WORD _____
- ☐ HFHGS HOMEOWNERSHIP APPLICATION PACKET – this packet, fully completed and signed by applicant and co-applicant.
- ☐ MONTHLY BUDGET – **MUST** use the form included in this packet, do not provide your own format.

II. IDENTIFICATION (Note: We will need to see originals of all ID documents at a later stage in the process)

- ☐ CA DRIVER LICENSE OR PHOTO IDENTIFICATION CARD – For **all household members** 18 or older.
- ☐ SOCIAL SECURITY CARDS – A copy for **each** household member.
- ☐ LEGAL U.S. RESIDENCE STATUS - Birth Certificate(s), Proof of Citizenship, Legal Residence Cards for **each** household member.
- ☐ DD214 (if applicable) – copy of DD214 for any veteran household member(s).

III. EMPLOYMENT DOCUMENTATION - **required for Applicant, Co-Applicant and ALL OTHER members of the household who are 18 years or older with income.**

☐ INCOME DOCUMENTS

1) If Employed (i.e. you receive a W2 earnings statement):

- ☐ Employment Verification letter signed and dated by your employer on company letterhead with your employment details, including your name, employer name, start date, job title, etc.
- ☐ Six (6) current, consecutive months' paystubs, starting with **the most recent** pay period. Your name, employer name, pay periods, and all deductions must be visible on all pay stubs.
  - If paid monthly, 6 paystubs
  - If paid twice monthly, 12 paystubs
  - If paid every two weeks, 13 paystubs
  - If paid weekly, 24 paystubs

2) **If you are an Independent Contractor or do Gig Work:**

- ☐ All pages of 2025 and 2024 Personal Tax Returns with a fully completed Schedule C
  - 2025 and 2024 1099s for **all companies worked for**
- ☐ Six (6) current, consecutive months of earning statements from all companies you work for/contract with

3) **If you are Self-Employed and Own Your Own Business** (own an LLC or INC and file separate business tax returns):

- Business Entity Documentation from the Secretary of State
- **All Pages** of 2025 and 2024 Business Tax Returns (1120 or 1120-s; 1065, K1s)
- Six (6) current, consecutive months' Business bank statements (**All Pages**)
- 2026 Profit and Loss Statement completed by your CPA; **must be signed and dated by CPA.**

4) Other Income Documents

- ☐ Social Security Income (if applicable): Current year Social Security Award letter. Award letter and

SUBMIT PHOTOCOPIES OF YOUR PERSONAL DOCUMENTS, NOT ORIGINALS:

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Applications MUST be submitted in the order requested below

payment histories required for similar stable government income sources, i.e. disability income, VA disability income, etc.

- ☐ Pension or Retirement Income (if applicable): Current Benefits Award letter if income is being received from an employer-provided retirement account, or a distribution letter if income is being received from a 401k or other type of investment account.
- ☐ Other Income: Child Support, Alimony, etc. – provide **all pages** of court-ordered documents to support the income. We will also need to see bank statements verifying income being deposited.

IV. OTHER FINANCIAL INFORMATION

- ☐ **Bank Statements:** Checking, Savings, 401k, Retirement Accounts, Investment Accounts
  - ☐ Six (6) current, consecutive months for ALL accounts **(ALL PAGES REQUIRED)**
  - ☐ Habitat cannot accept Bitcoin or cryptocurrency as assets unless converted to a US dollar amount in your checking account. Additional documentation may be required.
- ☐ **2025 and 2024 Federal Tax Returns**
  - ☐ **ALL PAGES** required, including all schedules.
  - ☐ Transcripts will not be accepted in lieu of actual Federal Tax Returns.
- ☐ **2025 and 2024 W2s and 1099s**
  - ☐ **REQUIRED** for **ALL** jobs and/or income received during these years
- ☐ **Public Assistance (if applicable):** A current letter from the county or state to verify that you receive any of the following: disability insurance, unemployment income, cash award, TANF, CalWorks, CalFresh, MediCal, General Assitance, etc.
  - ☐ **NOTE: This type of income is not included in your household income calculation.**

V. CREDIT INFORMATION- For Applicant and Co- Applicant ONLY

- ☐ CURRENT CREDIT REPORT – Request your free yearly report- Only one of the three: Experian OR Equifax OR Transunion. This may be accessed at www.annualcreditreport.com. Please print the **entire** report. Applicants or Co-Applicants with no established credit history are required to provide a report or print out showing no record found from one of the three credit bureaus. Reports provided from any other source that are not full reports from one of the three credit bureaus will not be accepted.

V. ADDITIONAL INFORMATION

- ☐ RENT VERIFICATION – Six (6) months of current, consecutive rent receipts and **full** copy of current lease agreement- including all pages and any addenda
- ☐ SUBSIDIZED HOUSING (if applicable) – Paperwork from a housing authority (i.e. SHRA, HUD, or Section 8/Housing Choice Voucher Program) which indicates you currently live in subsidized housing.
- ☐ VEHICLE REGISTRATION AND INSURANCE – A copy of valid registration and proof of insurance for **each** vehicle owned.
- ☐ UTILITY BILLS – Copies of the most recent month's electricity, gas, and water/sewer/garbage bills.
- ☐ LIST OF 5 REFERENCES – A list with names addresses and phone numbers. You are also welcome to submit letters of reference.
- ☐ PERSONAL STATEMENT– Write a letter to Habitat stating how a Habitat home would impact your and other household members lives and/or how homeownership would affect your household's long-term goals (dated and signed).

Habitat for Humanity® of Greater Sacramento

Habitat for Humanity of Greater Sacramento
819 North 10th Street Sacramento, CA 95811
www.HabitatGreaterSac.org
(916) 440-1215

EQUAL HOUSING OPPORTUNITY

Application

Habitat Homeownership Program

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.

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. For a complete overview of the ways Habitat for Humanity of Greater Sacramento protects and shares information, see the provided Privacy Statement and Notice.

1. APPLICANT INFORMATION

Applicant	Co-applicant
Applicant's FULL legal name	**Co-applicant's FULL legal name**
Social Security Number _____	Social Security Number _____
Gender: ☐ Male ☐ Female ☐ Non-Binary ☐ Prefer not to say	Gender: ☐ Male ☐ Female ☐ Non-Binary ☐ Prefer not to say
Phone Number _____ DOB _____	Phone Number _____ DOB _____
Email Address _____ Veteran? ☐ Yes ☐ No	Email Address _____ Veteran? ☐ Yes ☐ No
☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed)	☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed)

Dependents and all others who currently and/or will live with you

Name	DOB	Relationship to Applicant(s) (child, grandchild, parent, in-law, sibling)	Male	Female
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Current address (street, city, state, ZIP code, County) ☐ Own ☐ Rent Live or work in Citrus Heights ☐ Yes ☐ **No**	Current address (street, city, state, ZIP code, County) ☐ Own ☐ Rent Live or work in Citrus Heights ☐ Yes ☐ **No**

Number of years at this address_____ _____	Number of years at this address _____ _____
If you have lived at your present address for less than two years, complete the following:	
Last address (street, city, state, ZIP code) ☐ Own ☐ Rent Number of years _____	Last address (street, city, state, ZIP code) ☐ Own ☐ Rent _____ _____ Number of years _____

2. WILLINGNESS TO PARTNER

To be considered for Habitat homeownership, you and your household must be willing to complete 500 hours of Sweat Equity. During your Sweat Equity commitment, you will participate in building yours and other Habitat Partner's homes. Work may include 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	☐	☐
Co-applicant	☐	☐

3. CURRENT HOUSING CONDITIONS

Housing Choice Voucher Program: ☐ Yes (If yes, please provide your award letter) ☐ No

Income-adjusted Rental Program (SHRA, Mutual Housing, Mercy Housing, Cottage Housing, etc.): ☐ Yes ☐ No

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

Other rooms in your current residence:

☐ Kitchen ☐ Bathroom; Number of bathrooms: _____ ☐ Living room ☐ Diningroom

☐ Other (please describe) _____

_____

_____

What is your monthly rent payment? $_____/month

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

_____

_____

What makes your current housing difficult? Select every condition that applies. This helps Habitat understand your household's need; it does not disqualify or prioritize an application.

☐ Overcrowding or not enough bedrooms

☐ Unsafe or unhealthy conditions

☐ Unreliable plumbing, electricity, heating or cooling

☐ Risk of eviction, displacement, or homelessness

☐ Other housing challenge

☐ Housing costs are difficult to afford

☐ Structural problems or major repairs needed

☐ Home does not meet accessibility needs

☐ Location creates transportation, school, work, or safety challenges

In the space below, describe the current conditions of your residence. This is your opportunity to provide Habitat with as much information regarding your living conditions in your house or apartment. Please attach another page if this is not enough space.

_____

_____

_____

_____

_____

_____

_____

_____

4. EMPLOYMENT INFORMATION

Applicant		Co-applicant	
Name and address of **CURRENT** employer	Years at this job	Name and address of **CURRENT** employer	Years at this job
	Monthly (gross) wages $		Monthly (gross) wages $
Job Title		Job Title	
If working at current job less than one year, complete the following information			
Name and address of **LAST** employer	Years at this job	Name and address of **LAST** employer	Years at this job
	Monthly (gross) wages $		Monthly (gross) wages $
Job Title		Job Title	

5. MONTHLY INCOME

Income source	Applicant	Co-applicant	*Others in household	Total
Wages	$	$	$	$
Public Assistance	$	$	$	$
Alimony	$	$	$	$
Child support	$	$	$	$
Social Security	$	$	$	$
SSI	$	$	$	$
Disability	$	$	$	$
Other: _____	$	$	$	$
Other: _____	$	$	$	$
Other: _____	$	$	$	$
Other: _____	$	$	$	$
Total	**$**	**$**	**$**	**$**

6. SOURCE OF CLOSING COSTS

This program does not require you to pay a down payment to purchase your home. However, you are responsible to pay standard closing costs. Habitat requires proof of closing costs funds in a household bank account no less than 60 days prior to mortgage closing; this amount is generally between $7-10k. If you do not currently have the funds available, please tell us where they will come from.

7. FINANCIAL ASSETS

Name of bank, credit union, investment firm, etc.	Type of account – checking, savings, 401K, IRA, Robin Hood, Investments etc.	Current balance
		$
		$
		$
		$
		$
		$
		$
		$
		$

8. DEBT

	TO WHOM DO YOU AND THE CO-APPLICANT(S) OWE MONEY?					
	APPLICANT			CO-APPLICANT		
Account	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Vehicle Loan or Lease	$	$		$	$	
Student Loan	$	$		$	$	
Personal Loan	$	$		$	$	
Mortgage or Property Debt	$	$		$	$	
Medical Debt or Payment Plan	$	$		$	$	
Credit card	$	$		$	$	
Credit card	$	$		$	$	
Credit card	$	$		$	$	
Child Support or Alimony Paid	$	$		$	$	
Collection, judgment, or garnishment	$	$		$	$	
Buy now, pay later account (AfterPay, Klarna, etc.)	$	$		$	$	
Other	$	$		$	$	
Total	$	$		$	$	

9. MONTHLY BUDGET

Monthly Expenses	Cost
Housing	
Rent	
Phone	
Electricity	
PG&E	
Water, Sewer, Garbage	
Cable & Streaming Services	
Internet	
Gas	
Other	
Subtotal	
Transportation	
Vehicle 1 payment	
Vehicle 2 payment	
Public Transportation fares	
License	
Fuel	
Maintenance	
Other	
Subtotal	
Insurance	
Renters	
Health	
Life	
Auto	
Other	
Subtotal	
Food	
Groceries	
Dining Out and Delivery	
Household Supplies	
Subtotal	
Children	
School tuition	
School supplies	
Lunch	
Child care	
Sports and other activities	
Other **Subtotal**	
Pets	
Food	
Veterinary	
Grooming	
Other	
Subtotal	
Personal Care	
Medical & Prescriptions	
Clothing	
Other	
Subtotal	

Monthly Expenses	Cost
Legal	
Attorney	
Alimony	
Child Support	
Lien payments	
Other	
Subtotal	
Loans	
Personal	
Student	
Credit cards (all)	
Other	
Subtotal	
Total Expenses	

Monthly Gross Income	Amount
Income 1	
Income 2	
Other	
Public Assistance	
Social Security	
Alimony	
Child Support	
Total Gross Income	
Total Income	
Total Expenses	
Net	

Savings (Regular Contributions)	
Savings account	
Investment account	
Other	
Total	

****

Your application will not be considered complete if this budget form is not fully filled out.

10. 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?	☐ Yes ☐ No	☐ Yes ☐ No
b. Have you declared bankruptcy within the past seven years?	☐ Yes ☐ No	☐ Yes ☐ No
c. Have you had property foreclosed on or deed in lieu of foreclosure in the past seven years?	☐ Yes ☐ No	☐ Yes ☐ No
d. Are you currently involved in a lawsuit?	☐ Yes ☐ No	☐ Yes ☐ 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?	☐ Yes ☐ No	☐ Yes ☐ No
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation, or loan guarantee?	☐ Yes ☐ No	☐ Yes ☐ No
g. Are you paying alimony or child support or separate maintenance?	☐ Yes ☐ No	☐ Yes ☐ No
h. Are you a co-signer or endorser on any loan?	☐ Yes ☐ No	☐ Yes ☐ No
i. Do you currently own any real estate?	☐ Yes ☐ No	☐ Yes ☐ No
j. Have you owned real estate in the last five (5) years?	☐ Yes ☐ No	☐ Yes ☐ No
k. Are you a U.S. citizen or permanent resident?	☐ Yes ☐ No	☐ Yes ☐ No
If you answered “yes” to any question a through j, or "no" to question k, please explain on a separate piece of paper.		

11. AUTHORIZATION AND STATEMENT OF FACT

I understand that by filing this application, I am authorizing Habitat for Humanity of Greater Sacramento to evaluate my qualification for the Habitat Homeownership Program, including assessment of my household's need for better housing, my ability to repay an affordable mortgage and other expenses of homeownership, and my willingness to partner with Habitat through sweat equity and other program requirements.

I understand that the evaluation may include personal visits to my home and in-person meetings with Habitat staff/volunteers, a credit check, and employment verification. I have answered all the questions on this application fully and truthfully to the best of my ability. I understand that if it is found that I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected as a Habitat family partner, 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 and all supporting documents will be retained by Habitat for Humanity of Greater Sacramento, even if the application is not approved, for at least a period of 25 months, per fair lending laws.

I understand that if my application moves forward for consideration, I will be presented at a later date with the disclosures and authorization forms necessary for Habitat for Humanity of Greater Sacramento to run a full Consumer Report on the applicant, the co-applicant, and household members 18 years or older (if applicable), which will include a criminal background check, sex offender registry check, Office of Foreign Assets Control check, and credit report.

I understand that if I am selected as a Future Homeowner Partner, I will not have a choice in the house location, a house location will be assigned to me after completing the first 100 hours of Sweat Equity, and, if I reject the assignment, I will be deselected from the program.

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.

12. 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 Consumer Financial Protection Bureau, 1700 G St. NW, Washington, DC 20552, and the Federal Trade Commission, with offices at FTC Regional Office for the Western Region, Federal Trade Commission 901 Market Street, Suite 570 San Francisco, CA 94103 or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

The law does not require you to 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 do 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 our homeownership program.

Applicant's Signature_____ Co-applicant's Signature _____

13. DISCLOSURE AND AUTHORIZATION FOR CONSUMER REPORTS

In connection with my application to become a homeowner/family partner with Habitat for Humanity of Greater Sacramento (the Company), I understand the Company may obtain an INVESTIGATIVE CONSUMER REPORT that will include information as to my character, general reputation, personal characteristics and mode of living. This report may reveal information about work habits, including oral assessments of my job performance, experiences and abilities, along with reasons for termination of past employment. Such a report may be requested by the Company or on behalf of the Company. Further, I understand and agree that, subject to any legal restrictions imposed by any federal, state or local law, the Company may request information from various federal, state, and other agencies, including public and private sources which maintain records concerning my past activities relating to my driving record, criminal record, civil matters, previous employment, educational background and professional licensing if any.

Credit reports will be ordered from Factual Data, 5100 Hahns Peak Drive, Loveland, CO 80538; telephone 800-929-3400, www.factualdata.com.

Criminal Background reports will be ordered from Backgrounds Online, 1915 21st Street, Sacramento, CA 95811, telephone 800-838-4804, www.backgroundsonline.com.

You have the right, upon written request made within a reasonable period of time (not to exceed 30 days) after receipt of this notice to receive a written disclosure of the nature and scope of any investigation. If a consumer investigative report is obtained and an adverse decision is made affecting your acceptance to the homeownership program, the Company will provide to you, before making the adverse decision, a copy of the investigative consumer report and a description in writing of your rights under the Fair Credit Reporting Act.

14. NOTICE TO CALIFORNIA APPLICANTS

You have a right to obtain a copy of any investigative consumer report obtained by Habitat for Humanity of Greater Sacramento by checking the box provided below. The report will be provided to you within three business days after the report is provided to Habitat for Humanity of Greater Sacramento.

I request to receive a free copy of this report by checking this box. _

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by the consumer reporting agency named above during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at the Consumer Reporting Agency identified above in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. I acknowledge that a fax or copy of this Disclosure and Authorization bearing my signature shall be as valid as the original. This release is valid for all federal, state, county and local agencies and authorities. I acknowledge that I have received a copy of the Summary of Rights pursuant to the Fair Credit Reporting Act (FCRA).

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

Address: _____City:_____State:_____Zip:_____

Applicant Phone: _____ Co-applicant Phone: _____

Applicant SSN: _____ Co-applicant SSN: _____

Applicant Date of Birth: _____ Co-applicant Date of Birth: _____

Applicant's Signature_____ Co-applicant's Signature _____

Date Signed: _____ Date Signed: _____

15. 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 will note it by visual observation or surname.

Applicant	Co-applicant
☐ I do not wish to furnish this information	☐ I do not wish to furnish this information
Race (applicant may select more than one racial designation): ☐ American Indian or Alaska Native ☐ Native Hawaiian or other Pacific Islander ☐ Black/African-American ☐ White ☐ Asian	**Race** (applicant may select more than one racial designation): ☐ American Indian or Alaska Native ☐ Native Hawaiian or other Pacific Islander ☐ Black/African-American ☐ White ☐ Asian
Ethnicity: ☐ Hispanic or Latino ☐ Non-Hispanic or Latino	**Ethnicity:** ☐ Hispanic or Latino ☐ Non-Hispanic or Latino
Sex: ☐ Female ☐ Male ☐ Non-Binary ☐ Decline to answer	**Sex:** ☐ Female ☐ Male ☐ Non-Binary ☐ Decline to answer
Birthdate: _____/_____/_____	**Birthdate:** _____/_____/_____
Marital status: ☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed)	**Marital status:** ☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed)

PRIVACY STATEMENT AND NOTICE

To review our complete Privacy Statement and Notice, please visit www.habitatgreatersac.org/apply and click Privacy Notice.