

## Home Journey Counseling Program Application Checklist

- Fill out this Counseling Intake Form completely. Sign and date all authorizations and disclosures. Provide this form with all required application materials listed below.  
*Note: If we do not have all required documents in a reasonable and timely fashion (which we consider 10 days), we will be unable to continue with the review, and you may be asked to begin the process again at a later date.*

### Identification:

- State-issued photo identification card for all household members 18 years of age and older
- Social Security card for all household members, regardless of age
- Permanent Resident card, if applicable. *If you have an ITIN and have applied for Permanent Residency, please provide a copy of this application (I-485)*

### Income:

- Proof of employment income for all applicants and household members 18 years of age and older
  - 30 days most recent, consecutive paystubs
- Proof of additional income, if applicable. This may include Social Security, Child Support, alimony, survivor's benefits, disability, Section 8, pension received, Foster income, adoption subsidy, etc.  
*This documentation must be in the form of official government or agency-issued verification.*  
To obtain proof of income for Social Security benefits: [socialsecurity.gov](http://socialsecurity.gov) or 1 800 772 1213  
To obtain proof of income from Child Support in Nebraska, contact DHHS at 1 877 631 9973 to request a payment history

### Bank Statements:

- Two most recent (two months) bank statements issued by your bank for both Checking and/or Savings account(s)  
*Complete bank-issued statement(s) with bank name and information, account holder name and information, account number, transactions and balance*

### Tax Documents:

- Two most recent years of Wage and Income Transcripts  
*This transcript combines all your W2s and 1099s into one document. Note: We can no longer accept W2 forms. Please retrieve your **Wage and Income Transcripts** at [irs.gov/individuals/get-transcript](http://irs.gov/individuals/get-transcript)*
- Two most recent years of Tax Return Transcripts  
*This transcript combines the forms you have filled out and filed annually by April 15<sup>th</sup> to show the government how much money you have earned and how much tax you paid for the previous year.*  
*Note: We can no longer accept 1040 tax forms. Please retrieve your **Tax Return Transcripts** at [irs.gov/individuals/get-transcript](http://irs.gov/individuals/get-transcript) or request via mail by calling 800 908 9946*

## Habitat for Humanity of Omaha Privacy Statement and Notice

At Habitat for Humanity of Omaha, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data – such as tax returns, pay stubs, credit reports, employment verifications and payment history – internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us or others; and
- Information we receive from a consumer reporting agency.

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on applications or other forms, such as name, address, social security number, income, etc.
- Information about your transactions with us or others such as your loan balance and payment history
- Information we receive from a consumer reporting agency such as your credit history

Habitat for Humanity of Omaha employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents.
- Nonprofit organizations, government entities, or other subsidy providers.

If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). If you wish to opt out of disclosures to nonaffiliated third parties, you may call Habitat for Humanity Omaha Inc. at (402) 457-5757. (HFHI)

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**Applicant Signature**

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**Co-Applicant Signature**



## Document Submission and Communication

At this time, our Intake Specialist will collect all required documents, including this completed Counseling Intake Form, to review and assign you to a Counselor. *If we do not receive all the required documents in a timely fashion (10 days), we will not be able to continue with the review, and you may be asked to begin the process again at a later date.* **Please provide documentation in one of the following ways:**

1. Complete the Counseling Intake Form and upload documents via the online portal at <https://habitatomaha.org/home-journey-intake-application/>.
2. Email documents directly to the Intake Specialist at [intake@habitatomaha.org](mailto:intake@habitatomaha.org).
3. Bring documents to our office to be scanned. (address below) If you would like to schedule an appointment with the Intake Specialist, please reach out to do so. Appointments are not required.

Important Note: Documents must be in an original PDF format or scanned in color. We cannot accept photos of documents, screenshots, or documents that require a password. **If you are deemed eligible to continue in the Home Journey Program, our team will regularly request updated documentation as needed. Our team will communicate with you primarily by email.** Please provide an email address below that you check *regularly*.

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**Applicant Email**

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**Applicant Signature**

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**Date**

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**Co-Applicant Email**

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**Co-Applicant Signature**

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**Date**

**Habitat for Humanity of Omaha  
1229 Millwork Ave., Suite 301  
Omaha, NE 68102**

Office Hours: Monday-Friday 8:00am-5:00pm



<b>APPLICANT</b>	Please use the spaces below:	<b>CO-APPLICANT</b>	Please use the spaces below:
Legal First Name		Legal First Name	
Middle Name		Middle Name	
Legal Last Name		Legal Last Name	
Preferred Name		Preferred Name	
Social Security Number		Social Security Number	
Date of Birth		Date of Birth	
Phone Number #1		Phone Number #1	
Phone Number #2		Phone Number #2	
Marital Status: Single, Married, Separated, Divorced		Marital Status: Single, Married, Separated, Divorced	
Email Address: (REQUIRED)		Email Address: (REQUIRED)	
U.S. Citizen? <b>Yes or No</b>		U.S. Citizen? <b>Yes or No</b>	
Legal Permanent Resident? <b>Yes or No</b>		Legal Permanent Resident? <b>Yes or No</b>	
Country of Origin (if not the U.S.)		Country of Origin (if not the U.S.)	
Current Mailing Address		Current Mailing Address	
City		City	
State		State	
Zip Code		Zip Code	
How long have you lived at this address? <i>If less than two (2) years, list previous address</i>		How long have you lived at this address? <i>If less than two (2) years, list previous address</i>	
Previous Mailing Address		Previous Mailing Address	
City		City	
State		State	
Zip Code		Zip Code	
How long at previous address?		How long at previous address?	

## LANGUAGE AND INTERPRETER INFORMATION

Do you prefer or need an interpreter? <b>Yes or No</b>	
What is your primary or preferred language?	
Do you have a current interpreter? (If so, provide their name, phone number & email address)	

## HOUSEHOLD MEMBER INFORMATION (Including Applicant/Co-Applicant)

First & Last Name of Household Member	Date of Birth	Occupation	Relationship to Applicant
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

## ADDITIONAL HOUSEHOLD DETAILS

How many people total will be in the household?	
Are you or anyone in the household disabled? <b>Yes or No</b>	
Do you need to buy a home that can accommodate a wheelchair or other mobility devices? (Please note: this question will not impact approval or denial)	

## CURRENT HOUSING INFORMATION

Current Monthly Rent	
Landlord Name	
Landlord Phont Number	
Do you receive a housing or rental subsidy?	
If YES, how much do you receive per month?	
Check which source you receive the subsidy through:	<input type="checkbox"/> OHA <input type="checkbox"/> Section 8 <input type="checkbox"/> Douglas Co. <input type="checkbox"/> Other: _____

## EMPLOYMENT INFORMATION

APPLICANT:

CO-APPLICANT:

<b>Applicant/Co-Applicant Name</b>		
Current Employer		
Job Title		
Hire Date		
Monthly Salary (gross)	\$	\$
Are you self-employed? <b>Yes or No</b>		
Previous Employer		
Previous Job Title		
Previous Hire Date <b>AND</b> Employment End Date		

### CURRENT SECOND EMPLOYMENT (if applicable)

<b>Applicant/Co-Applicant Name</b>		
Current Employer		
Job Title		
Hire Date		
Monthly Salary (gross)	\$	\$

### HOUSEHOLD MEMBER EMPLOYMENT (if applicable)

HOUSEHOLD MEMBER 1:

HOUSEHOLD MEMBER 2:

<b>Household Member(s) Name</b>		
Current Employer		
Job Title		
Hire Date		
Monthly Salary (gross)	\$	\$

### CURRENT SECOND EMPLOYMENT (if applicable)

<b>Household Member(s) Name</b>		
Current Employer		
Job Title		

Hire Date		
Monthly Salary (gross)	\$	\$
OTHER INCOME RECEIVED (Social Security, Child Support, Foster Care, Pension, etc.)		
NAME OF RECIPIENT:	TYPE:	MONTHLY INCOME AMOUNT:
		\$
		\$
		\$
		\$

## LOCATION PREFERENCE

While you may select a preferred area, homes are ultimately sold based on qualifications and availability.

I am most interested in the following area/development: (Select only one)

<input type="checkbox"/> West Valley (Blair)	<input type="checkbox"/> Bluestem Prairie (Omaha)	<input type="checkbox"/> Capriana (Elkhorn)
<input type="checkbox"/> Tallgrass Neighborhood (Papillion)	<input type="checkbox"/> Plattsmouth, NE	<input type="checkbox"/> No preference
<input type="checkbox"/> Other (please describe):		

My second preference is: (Select only one)

<input type="checkbox"/> West Valley (Blair)	<input type="checkbox"/> Bluestem Prairie (Omaha)	<input type="checkbox"/> Capriana (Elkhorn)
<input type="checkbox"/> Tallgrass Neighborhood (Papillion)	<input type="checkbox"/> Plattsmouth, NE	<input type="checkbox"/> No preference
<input type="checkbox"/> Other (please describe):		

## REFERRAL INFORMATION

Have any applicants applied for the Home Journey Counseling Program in the past? If yes, when?		
How did applicants hear about Habitat Omaha's Home Journey Counseling Program? (Check all that apply)		
<input type="checkbox"/> Friends or Family	<input type="checkbox"/> Habitat Website	<input type="checkbox"/> Habitat Newsletter/Email
<input type="checkbox"/> Other Non-Profit	<input type="checkbox"/> Place of Worship	<input type="checkbox"/> School
<input type="checkbox"/> Zillow	<input type="checkbox"/> Radio	<input type="checkbox"/> TV/News
<input type="checkbox"/> Workforce Housing Partner. If so, which employer:		
<input type="checkbox"/> Other (please describe):		

## WILLINGNESS TO PARTNER & COUNSELING AGREEMENT

**PLEASE READ THE BELOW STATEMENTS CAREFULLY & INITIAL TO ACKNOWLEDGE**

Applicant    Co-Applicant

<p>All applicants understand that Habitat for Humanity of Omaha communicates about intake and program status by email whenever possible, and all applicants agree to check their email regularly.</p>		
<p>Applicant(s) agrees that all individuals listed in the household on this Counseling Intake Form will be the only occupants at the residence. Applicant(s) agrees to notify Habitat for Humanity of Omaha of any occupants in the household that are on the National Sex Offender Registry.</p>		
<p>If determined eligible for the Home Journey Counseling Program, all applicants agree to complete partnership requirements that include attending homebuyer education classes, one on one meetings with a Counselor, and completing sweat equity by volunteering with Habitat for Humanity of Omaha.</p>		
<p>All applicants understand that by submitting this Counseling Intake Form, they are authorizing Habitat for Humanity of Omaha to evaluate their need for the Home Journey Counseling Program, their ability to repay the affordable loan and other expenses of homeowners and their willingness to be a partner through sweat equity. This determination will include a credit check, examination of income and tax records, a background check and potential verification by applicant's landlord and/or employer.</p>		
<p>All applicants agree to notify Habitat for Humanity of Omaha of any change in their financial circumstances, living situation, contact information, income, debt and/or household size. Failure to notify of such changes may result in withdrawal from the Home Journey Counseling Program.</p>		
<p>If applicant or co-applicant credit is frozen with any of the three (3) credit bureaus, applicant(s) agrees to temporarily unfreeze credit to ensure screenings can be processed for the Home Journey Counseling Program. Failure to unfreeze credit when requested may result in ineligibility or withdrawal from the Home Journey Counseling Program.</p>		
<p>All applicants understand that they are applying for the Home Journey Counseling Program. All applicants understand that the Home Journey Counseling Program structure may differ from traditional housing lenders.</p>		
<p>If determined eligible for the Home Journey Counseling Program, all applicants agree that the Habitat home they potentially purchase will be their only residence. Should applicant(s) not occupy the home as agreed upon, this may result in foreclosure.</p>		
<p>All applicants acknowledge they have received and reviewed the Applicant Privacy Statement (page 2).</p>		
<p>Applicant(s) attest that all information provided in this Counseling Intake Form is true and accurate to the best of their knowledge. If information is found to be fraudulent, applicant(s) may be determined ineligible and/or withdrawn from the Home Journey Counseling Program; and may be prohibited from reapplying at Habitat for Humanity of Omaha again in the future</p>		
<p>Either party within this partnership, which includes Habitat for Humanity of Omaha and all applicants, may withdraw from the Home Journey Counseling Program at any time.</p>		
<p>All applicants agree to partner with and treat Habitat for Humanity of Omaha's staff in a professional and respectful manner. Failure to conduct interactions in a respectful fashion may result in ineligibility or withdrawal from the Home Journey Counseling Program.</p>		
<p>The original copy of this Counseling Intake Form will be retained by Habitat for Humanity of Omaha even if determined ineligible for the Home Journey Counseling Program.</p>		
<p>Habitat for Humanity of Omaha cannot guarantee a loan even if determined mortgage ready while in the Home Journey Counseling Program. This is not a pre-approval for a loan, a sales contract, or a loan application.</p>		
<p>Habitat for Humanity of Omaha does not guarantee a home. Habitat for Humanity of Omaha does not provide rental housing or rapid rehousing.</p>		
<p>Habitat for Humanity of Omaha updates the eligibility requirements for the Home Journey Counseling Program based on current housing market conditions. Habitat for Humanity of Omaha reserves the right to revise these eligibility requirements at any time.</p>		



## DEMOGRAPHIC DISCLOSURE

**Please read this statement before completing the page 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 however, your responses to these questions help Habitat for Humanity of Omaha advance its mission. We will not take this information (or your decision to not 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 to not provide the information, we may note it by visual observation or surname.

APPLICANT	CO-APPLICANT
<input type="checkbox"/> I do not wish to provide this information.	<input type="checkbox"/> I do not wish to provide this information.
<b>Race</b> <input type="checkbox"/> American Indigenous or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	<b>Race</b> <input type="checkbox"/> American Indigenous or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
<b>Ethnicity</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<b>Ethnicity</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>Currently Serving in United States Armed Services</b> (check one) Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Currently Serving in United States Armed Services</b> (check one) Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>United States Armed Services Veteran</b> (check one) Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>United States Armed Services Veteran</b> (check one) Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Have you owned a home in the last 3 years?</b> (check one) Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Have you owned a home in the last 3 years?</b> (check one) Yes <input type="checkbox"/> No <input type="checkbox"/>



## MARRIAGE STATUS & HOW IT AFFECTS THE PURCHASE OF A HOUSE

### **Married**

If you are married, each spouse has an interest (ownership) in the property and is required to sign mortgage documents. If you decide to sell the home, both spouses will need to sign sale documents.

If you are married and plan on purchasing a house without your spouse, the above is still true (even if the spouse does not plan on living in the home or paying any portion of the mortgage).

If you are married and your spouse is not a co-applicant, they would still need to sign certain documents.

### **Separated**

If you are separated—including legal separation—you are still considered married as it relates to property law. This means that your spouse will have an interest (ownership) in any property you purchase and will be required to sign mortgage and sale documents.

If you are separated and plan on getting a divorce - Habitat Omaha strongly recommends you move through these proceedings before applying to our program.

### **Divorced**

If you are legally divorced, you must wait 30 days after the decree before signing any mortgage documents. After the 30-day period, you are seen as single in the eyes of the law and may purchase a home on your own.

If you are in the process of divorce, but it has not been finalized, any closing documents will also require your spouse's signature.

If you are planning on getting a divorce, Habitat Omaha strongly recommends you move through these proceedings before applying to our program.

### **Purchasing a home with your adult child**

If you are considering purchasing a home with one of your adult children as a co-applicant, please remember this is a 30-year loan. If this child decides to leave the house you purchased together before the loan is paid in full, they will remain on the loan. If they attempt to purchase a home of their own, they may not be able to get additional financing to do so.