

SECTION 8 – Homeowner’s Agreement

I certify that the information on this application is accurate and I own the property at the address given on this application. I/we certify that verification may be obtained from any source named in this application. I/we understand that this application can be rejected at any time if information provided is incorrect or untrue. I/we authorize Twin Cities Habitat for Humanity (TCHFH) to examine my/our credit history, income, residency, and any other requirements throughout the application process. Additionally, I /we certify that no members of our household are currently or will be involved in the future in any type of illegal activity and I/we authorize TCHFH to investigate my/our criminal history. As an applicant I/we acknowledge TCHFH has obtained non-public and public information for the application to be processed. I/we understand that TCHFH will keep this information in a secure place and it will not be shared with any unauthorized parties. To the extent permitted by law and without affecting the coverage provided by the required homeowners insurance, I agree to sign the release and waiver of liability.

SIGNATURE OF HOMEOWNER

DATE

SOCIAL SECURITY NUMBER*

SIGNATURE OF HOMEOWNER

DATE

SOCIAL SECURITY NUMBER*

SIGNATURE OF ADULT RESIDENT

DATE

SOCIAL SECURITY NUMBER*

SIGNATURE OF ADULT RESIDENT

DATE

SOCIAL SECURITY NUMBER*

***Social Security Numbers are not required, but must be obtained to determine eligibility for financially partnering through a repayment plan. If you would prefer to submit this information in person or by phone, please call ahead 612-788-8169 to make an appointment.**

*Complete the following if you are not the homeowner, but are assisting the homeowner to complete this application.

Your Name:

Relationship to Homeowner:

Your Title & Organization:

Your email:

Your daytime phone number:

Is the homeowner aware of this application?

Yes No

Applications without supporting documentation will not be accepted.