Pikes Peak Habitat for Humanity®

September 2017

Dear Applicant,

Thank you for your interest in applying to Pikes Peak Habitat for Humanity!

Enclosed you will find the Habitat for Humanity application. Please fill out the application, attached forms and provide all supporting documentation listed below. **Applications will only be accepted from September 18th through September 22nd, 2017 by 4:30 p.m.** Completed applications will be processed in the order that they are received.

Applications will not be processed until they are complete and include COPIES (habitat cannot make copies) of all of the following documentation:

- ✓ Verification of your income
- ✓ Tax returns and W-2s
- ✓ Two months of Bank Statements for all applicants
- ✓ Household bills
- ✓ Current lease agreement
- ✓ Government issued Photo ID for all applicants
- ✓ Social Security cards for all members of the household
- ✓ Copy of all minor children's birth certificates (if applicable)
- ✓ Divorce decree and custody statement (if divorced)
- ✓ Copy of bankruptcy documents (if applicable)
- ✓ **$25 Application Fee (check or money order made out to PPHFH).** This fee is non-refundable and covers the cost of pulling your credit report as well as other costs associated with processing your application.

Please return your completed application packet to our office located at:

PPHFH
2802 N. Prospect St.
Colorado Springs, CO 80907

Feel free to contact me at **475-7800 extension 103** with any questions regarding the application. If you need assistance in completing your application, you must make an appointment.

Sincerely,

Janet Risley
Director of Homeowner Services

2802 N. Prospect St. Colorado Springs, CO 80907
Tel: 719-475-7800 Fax: 719-473-3891 E-mail: office@pikespeakhabitat.org

2017 Application Cover Page

Applicant Name(s): ____

Current Mailing Address: ____

____

Best Contact Phone #: ____

Best Time of day to call: ____

Email: ____

How did you hear about this program?: ____

Did you attend an information session with Pikes Peak Habitat?

- ☐ Yes **Date:** ______________________
- ☐ No

How many people are in your household?

_________ Adults _________ Children

Are any of the household members active duty veteran military? Y/N

Have you ever applied with Pikes Peak Habitat in the past? Y/N

*if yes, what year?*_________

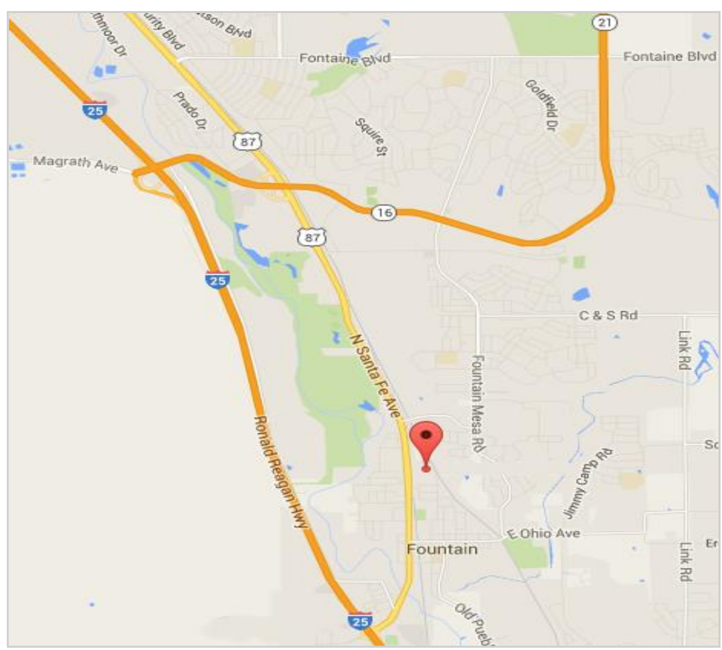
We are only selecting homeowners for a 3 bedroom home. Please make sure your family meets the Bedroom Policy.

Pikes Peak Habitat Bedroom Policy:

Families will be selected for Habitat homes based on household size and composition:

- Every household member must have a bedroom
- No more than 2 people can occupy a bedroom
- Children of opposite gender shall not share a bedroom
- Children more than 5 years apart in age shall not share a bedroom

Available homes are located at County Living in Fountain,



PLEASE COMPLETE THE APPLICATION CHECKLIST ON REVERSE!

Application Checklist:

Provide COPIES only, Habitat will NOT make copies

☐ Have you completed **all sections** of the application cover page?

☐ Have you completed **all sections** of the application form?

☐ Have ALL applicants signed the application?

☐ Have ALL applicants signed the Equal Credit Opportunity Act Disclosure?

☐ Have ALL applicants completed and signed the 4506-T Request for Transcript of Tax Return?

☐ Have ALL applicants signed the Criminal Background Check Authorization?

☐ Have you attached **COPIES** of all supporting documentation:

☐ Verification of all household income sources

- 3 months paystubs for the past 90-days at time of application
- 2017 SSI/SSDI determination letters
- alimony or child support registry,

☐ Tax returns and W-2s

- 2016
- 2015
- 2014

☐ Household bills

- utilities
- cell phone
- auto loan
- student loans
- credit cards

☐ Two months of Bank Statements for all applicants for the past 60-days at time of application.

☐ Current lease agreement

☐ Government issued **Photo ID** for **all applicants**

☐ **Social Security cards** for **all members** of the household

☐ Copy of **all minor children's birth certificates** (if applicable)

☐ Divorce decree and custody statement (if divorced)

☐ Copy of bankruptcy documents (if applicable) Have you included your $25 application fee? (Please make your check or money order out to ***PPHFH.*** No cash will be accepted.)

Pikes Peak Habitat for Humanity

Pikes Peak Habitat for Humanity
2802 N. Prospect Street
Colorado Springs, CO 80907

Application
Habitat Homeownership Program

EQUAL HOUSING OPPORTUNITY

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.

1. APPLICANT INFORMATION

Applicant	Co-applicant
Applicant's name	**Co-applicant's name**
Social Security number Home phone DOB ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed)	Social Security number Home phone DOB ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed)
Dependents and others who will live with you (not listed by co-applicant) Name | Age | Male | Female ________ ___ ☐ ☐ ________ ___ ☐ ☐ ________ ___ ☐ ☐ ________ ___ ☐ ☐ ________ ___ ☐ ☐	**Dependents** and others who will live with you (not listed by co-applicant) Name | Age | Male | Female ________ ___ ☐ ☐ ________ ___ ☐ ☐ ________ ___ ☐ ☐ ________ ___ ☐ ☐ ________ ___ ☐ ☐
Present address (street, city, state, ZIP code) ☐ Own ☐ Rent Number of years ________	Present address (street, city, state, ZIP code) ☐ Own ☐ Rent Number of years ________
If living at 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. FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date received: ________________

Date of notice of incomplete application letter: ________________

Date of adverse action letter: ________________

Date of selection committee approval: ________________

Date of board approval: ________________

Date of partnership agreement: ________________

3. 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	☐	☐
Co-applicant	☐	☐

4. PRESENT HOUSING CONDITIONS

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

☐ Kitchen ☐ Bathroom ☐ Living room ☐ Dining room ☐ Other (please describe) ____________________

____

If you rent your residence, what is your monthly rent payment? $__________________/ month
(Please supply a copy of your lease or a copy of a money order receipt or canceled rent check.)

Name, address and phone number 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. EMPLOYMENT INFORMATION

Applicant		**Co-applicant**	
Name and address of **CURRENT** employer	Start date	Name and address of **CURRENT** employer	Start date
	Monthly (gross) wages $		Monthly (gross) wages $
Type of business	Business phone	Type of business	Business phone
If working at current job less than one year, complete the following information			
Name and address of **LAST** employer	Dates (from – to)	Name and address of **LAST** employer	Dates (from – to)
	Monthly (gross) wages $		Monthly (gross) wages $
Type of business	Business phone	Type of business	Business phone

6. MONTHLY INCOME

Alimony, child support or separate maintenance income need not be revealed if the applicant or co-applicant does not chose to have it considered for repaying this loan.

Income Source	Applicant	Co-applicant	Others in household	Total
Wages	$	$	$	$
Alimony	$	$	$	$
Child support	$	$	$	$
Social Security	$	$	$	$
SSI	$	$	$	$
Disability	$	$	$	$
Other _______________	$	$	$	$
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

7. SOURCE OF DOWNPAYMENT AND CLOSING COSTS

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

8. ASSETS

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

9. DEBT

Account	To whom do you and the co-applicant(s) owe money?					
	Applicant			Co-applicant		
	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay
Vehicle: Make ______________ Year_______________	$	$		$	$	
Vehicle: Make____________ Year_______________	$	$		$	$	
Furniture, appliance, televisions (includes rent-to-own)	$	$		$	$	
Alimony	$	$		$	$	
Child support	$	$		$	$	
Credit card	$	$		$	$	
Credit card	$	$		$	$	
Credit card	$	$		$	$	
Total medical	$	$		$	$	
Other	$	$		$	$	
Other	$	$		$	$	
Total	$	$		$	$	

Monthly expenses			
Account	**Applicant**	**Co-applicant**	**Total**
Rent	$	$	$
Utilities	$	$	$
Insurance	$	$	$
Child care	$	$	$
Internet service	$	$	$
Cell phone	$	$	$
Landline	$	$	$
Business expenses	$	$	$
Union dues	$	$	$
Other	$	$	$
Other	$	$	$
Other	$	$	$
Total	$	$	$

10. DECLARATIONS

Please circle the word that best answers the following questions for you and the co-applicant

	Applicant		Co-applicant	
a. Do you have any outstanding judgments against you?	☐ Yes	☐ No	☐ Yes	☐ No
b. Have you been declared bankrupt within the past two years?	☐ Yes	☐ No	☐ Yes	☐ No
c. Have you owned property in the last three years?	☐ Yes	☐ No	☐ Yes	☐ No
d. Are you currently involved in a lawsuit?	☐ Yes	☐ No	☐ Yes	☐ No
e. Are you paying alimony or child support?	☐ Yes	☐ No	☐ Yes	☐ No
f. Do you intend to occupy the property as your primary residence?	☐ Yes	☐ No	☐ Yes	☐ No
g. Are you a U.S. citizen or permanent resident?	☐ Yes	☐ No	☐ Yes	☐ No

If you answered "**yes**" to any question **a** through **e**, or "**no**" to question **f**, please explain on a separate piece of paper.

11. 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 the no-interest loan and other expenses of homeownership, and my willingness to be a partner through sweat equity. 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. 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. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

I also understand that Habitat for Humanity screens all applicant families 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.

Applicant's name ______________________________ Co-applicant's name ______________________________

12. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: The following information is requested by the federal government for loans related to the purchase of homes, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below.

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):	**Race** (applicant may select more than one racial designation):
☐ American Indian or Alaska Native	☐ American Indian or Alaska Native
☐ Native Hawaiian or other Pacific Islander	☐ Native Hawaiian or other Pacific Islander
☐ Black/African-American	☐ Black/African-American
☐ White	☐ White
☐ Asian	☐ Asian
Ethnicity:	**Ethnicity:**
☐ Hispanic or Latino ☐ Non-Hispanic or Latino	☐ Hispanic or Latino ☐ Non-Hispanic or Latino
Sex:	**Sex:**
☐ Female ☐ Male	☐ Female ☐ Male
Birthdate:______/________/ _______	**Birthdate:**______/________/ _______
Marital status:	**Marital status:**
☐ Married	☐ Married
☐ Separated	☐ Separated
☐ Unmarried (Incl. single, divorced, widowed)	☐ Unmarried (Incl. single, divorced, widowed)

To be completed only by the person conducting the interview	
This application was taken by:	Interviewer's name (print or type)
☐ Face-to-face interview	Interviewer's signature Date
☐ By mail	
☐ By telephone	Interviewer's phone number

Form **4506-T**
(Rev. January 2012)
Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

▶ **Request may be rejected if the form is incomplete or illegible.**

OMB No. 1545-1872

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return.** There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	**1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)**
2a If a joint return, enter spouse's name shown on tax return.	**2b Second social security number or individual taxpayer identification number if joint tax return**

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)

4 Previous address shown on the last return filed if different from line 3 (see instructions)

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.

CoreLogic Credco, 10277 Scripps Ranch Blvd., San Diego, CA 92131, 877.877.6188 Participant # 302617 Mailbox ID: CoreLogic

Caution. *If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your IRS transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.*

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ 1040

a **Return Transcript,** which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . ☐

b **Account Transcript,** which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days . ☐

c **Record of Account,** which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . ☐

7 **Verification of Nonfiling,** which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . ☐

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2010, filed in 2011, will not be available from the IRS until 2012. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . ☐

Caution. *If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.*

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately. 2014 2015 2016

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return . . . . ☐

Caution. Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** *For transcripts being sent to a third party, this form must be received within 120 days of the signature date.*

Phone number of taxpayer on line 1a or 2a

Sign Here

Signature (see instructions) Date

Title (if line 1a above is a corporation, partnership, estate, or trust)

Spouse's signature Date

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at *www.irs.gov/form4506*. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

CAUTION. *Do not sign this form unless all applicable lines have been completed.*

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note. If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888 559-456-5876
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250 859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P. O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form,** 10 min.; **Preparing the form,** 12 min.; and **Copying, assembling, and sending the form to the IRS,** 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Products Coordinating Committee
SE:W:CAR:MP:T:M:S
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.

EQUAL CREDIT OPPORTUNITY ACT

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, 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 administers compliance with this law concerning this company is the Federal Trade Commission, Pennsylvania and 6th Street N.W., Washington, DC 20580

We are required to disclose to you that you need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so.

Having made this disclosure to you, we are permitted to inquire if any of the income shown on your application is derived from such a source and to consider the likelihood of consistent payment as we do with any income on which you are relying to qualify for the loan for which you are applying.

Applicant **Date**

Applicant **Date**

Applicant **Date**

Pikes Peak
Habitat for Humanity, Inc.

CUSTOMER NOTICE

Important Information For Applicants About Customer Identification Procedures For Becoming a Partner Family

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask you for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

APPRAISAL DISCLOSURE NOTICE

September, 2107

Dear Applicant,

This letter is to notify you that we may order an appraisal or other property valuation in connection with your loan. Upon completion of the appraisal or property valuation, we will promptly provide a copy to you, even if the loan does not close.

Thank you for your interest in Pikes Peak Habitat for Humanity. Please do not hesitate to contact us with additional questions.

Sincerely,

Janet Risley

Director of Homeowner Services
(719) 475-7800 x103

Authorization and Release

Criminal Background Check

If the Board approves a family, there will be a Colorado Bureau of Investigation (CBI) background check done after the approval. Background checks for drug sales and sexual offense or pedophilia could lead to a possible disqualification on approved families.

________________________________ ____________________

Applicant Signature Date

________________________________ ____________________

Co-Applicant Signature Date

Pikes Peak Habitat for Humanity

FACTS:	What does Pikes Peak Habitat for Humanity DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies, including Pikes Peak Habitat for Humanity as a mortgage lender, choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand our procedures.
What?	The types of personal information we collect and share depend on the consumer having a mortgage loan with Pikes Peak Habitat for Humanity This information can include: ➢ Social Security number and account balances ➢ Payment history and transaction history ➢ Credit history and credit score
How?	All financial companies need to share **consumers'** personal information to run their everyday business. In the section below, we list the reasons financial companies can share their **consumers'** personal information; the reasons Pikes Peak Habitat for Humanity chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Pikes Peak Habitat for Humanity share?	Can you limit this sharing?
For our everyday business purposes - such as to process your transactions, maintain your accounts(s), respond to court orders and legal investigations, or to report to credit bureaus	Yes	No
For our marketing purposes – to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes – information about your transactions and experiences	No	We don't share
For non-affiliates to market to you	No	We don't share
Questions:	Call 719-475-7800	

Who we are	
Who is providing this notice?	Pikes Peak Habitat for Humanity
What we do	
How does Pikes Peak Habitat for Humanity protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Pikes Peak Habitat for Humanity collect my personal information?	We collect your personal information, for example, when you ➢ Show your driver's license ➢ Apply for a residential mortgage loan or provide your employment history ➢ Make payments to your mortgage We also collect your personal information from others, such as credit bureaus, affiliates, and other companies.
Why can't I limit all sharing?	Federal law gives you, the consumer, the right to limit only ➢ Sharing for affiliates' everyday business purposes – information about your creditworthiness ➢ Affiliates from using your information to market to you ➢ Sharing for non-affiliates to market to you State laws and individual companies may give you additional rights to limit sharing.
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account.
Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies.
Non-affiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. **Pikes Peak Habitat for Humanity does not share with non-affiliates.*
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

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