

Today's Date: \_\_\_\_\_



All applicants **MUST** attend a Homeowner Orientation Meeting. Please complete and submit the Orientation Registration Form to:

FAHFH · P.O. Box 3166 · Fayetteville, NC 28302 or faxed to (910) 486-5472 or emailed to [grace@fayettevillenchabitat.org](mailto:grace@fayettevillenchabitat.org)

Which County are you applying for? Please circle one: Cumberland Sampson Bladen

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work \_\_\_\_\_ Phone: \_\_\_\_\_

Home \_\_\_\_\_ Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work \_\_\_\_\_ Phone: \_\_\_\_\_

Home \_\_\_\_\_ Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Is applicant a US citizen or  
legal permanent resident?      YES      NO

Is applicant a US citizen or  
legal permanent resident?      YES      NO

Did you or anyone in your household serve or is currently serving in the military?      YES      NO

Relationship of Applicant and Co-Applicant: \_\_\_\_\_

**ALL** Household Gross Monthly Income \$ \_\_\_\_\_

(Household gross monthly income includes employment/unemployment, child support, social security, disability, etc.)

Please list all those who will be living in this home:

	Name	Gender	Year of Birth
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Please describe your current living conditions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Release: By my signature I affirm that the above information is true and correct. I understand that providing false information could cause me not to qualify to purchase a home from Fayetteville Area Habitat for Humanity.**

Applicant Sign Here: \_\_\_\_\_ Co-Applicant Sign Here: \_\_\_\_\_

*Fayetteville Area Habitat for Humanity puts God's love into action by bringing people together to build homes, community, and hope.*

**OFFICE USE ONLY:**

Return date: \_\_\_\_\_ Staff initials: \_\_\_\_\_ Orientation Date: \_\_\_\_\_