



"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 nation origin."

51 Austin Street, Danbury, CT 06810 (203) 744-1340

New Milford

## APPLICATION FOR HOME OWNERSHIP

Please answer every question as completely as possible. If the correct answer to a question requesting a number is "zero", please enter "0" rather than leaving it blank. If you feel that a question does not pertain to you, please indicate "N/A" (not-applicable) instead of leaving the question blank.

APPLICANT INFORMATION	
Applicant	Co-Applicant
Name: <u>Jamie Cass Obijiski</u>	Name: <u>Joshua Obijiski</u>
Present Address: <u>91 Laurel Hill RD</u> Street	Present Address: <u>91 Laurel Hill RD</u> Street
<u>Brookfield</u> <u>CT</u> <u>06804</u> City State Zip	<u>Brookfield</u> <u>CT</u> <u>06804</u> City State Zip
Own <input type="checkbox"/> Rent <input checked="" type="checkbox"/> Number of years <u>3.5</u>	Own <input type="checkbox"/> Rent <input checked="" type="checkbox"/> Number of years <u>3.5</u>
Social Security # <u>082-62-4005</u>	Social Security # <u>071-62-8087</u>
Date of Birth: <u>02/09/1976</u>	Date of Birth: <u>02/06/1976</u>
Home Phone:	Home Phone:
Cell Phone: <u>203-942-5898</u>	Cell Phone: <u>203-942-0233</u>
Work Phone: <u>860-354-4806</u>	Work Phone: <u>845-877-1460</u>
Email address: <u>jamie.cass@gmail.com</u>	Email address: <u>jobjiski@gmail.com</u>
<input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)	<input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)

If living at present address for less than two years, complete the following:

Previous Address (street, city, state, zip code)	Previous Address (street, city, state, zip code)
Own <input type="checkbox"/> Rent <input type="checkbox"/> Number of years _____	Own <input type="checkbox"/> Rent <input type="checkbox"/> Number of years _____

Others who will live with you in the Habitat home if you are selected:

Name	Date of Birth	Sex (m/f)	Relationship
1. <u>Julian Obijiski</u>	<u>11/7/13</u>	<u>male</u>	<u>Son</u>
2.			
3.			
4.			
5.			
6.			

### FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

Date Application Received: <u>11/25/14</u>	
More Information Requested? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date letter sent: _____ Date Application Completed: <u>11/30/14</u>
Date of Home Visit: _____	Committee Decision: <input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Denied Date letter sent: <u>12/20/14</u>

### WILLINGNESS TO PARTNER

To be considered for a Habitat home, 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, or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT EQUITY HOURS

Applicant: Yes No Co-Applicant: Yes No

### PRESENT HOUSING CONDITIONS

Do you currently: Own Rent Other (explain) \_\_\_\_\_

Number of Bedrooms (please check) 1 2 3 4

Other rooms where you are living: Kitchen Bathroom Living room Dining room Other (please describe) \_\_\_\_\_

Monthly Rent \$ 1475 Does your rent include utilities? YES ☒

If yes, which utilities are included? Water Gas Heat Oil Electricity Garbage Other \_\_\_\_\_

Name of Landlord Ryan Blessey Phone 203-948-0403

Landlord's Address 27 STATION RD / BROOKFIELD, CT 06804

Describe the condition of the apartment or house where you live. Why do you need a Habitat for Humanity house?

we are unable to save money towards a down payment to own a house due to the monthly expenses we have.

### APPLICANTS LEGAL NAME(S)

If you are approved for a Habitat for Humanity home, how should your name appear on the legal documents?

Applicant	Co-Applicant
<u>Jamie C. Obijiski</u> <small>(Please Print)</small>	 <small>(Please Print)</small>

### EMPLOYMENT INFORMATION

Applicant		Co-Applicant	
Name and address of <b>current</b> employer	Years at this job	Name and address of <b>current</b> employer	Years at this job
<u>Joe's Hair Salon</u>	<u>12</u>	<u>Structure works</u>	<u>6</u>
<u>25 Bank St</u>	Gross pay per month	<u>43 Mill St</u>	Gross pay per month
<u>New Milford, CT</u>		<u>Dover Plains, NY 12522</u>	
Type of business	Business contact phone	Type of business	Business contact phone
<u>Hair Salon</u>	<u>860-354-4800</u>	<u>Construction</u>	<u>845-377-1400</u>

**If working at current job less than one year, complete the following information**

Applicant		Co-Applicant	
Name and address of <b>previous</b> employer	Years at this job	Name and address of <b>previous</b> employer	Years at this job
	Gross pay per month		Gross pay per month
Type of business	Business contact phone	Type of business	Business contact phone

	Applicant	Co-Applicant
Average # of hours worked each week	20	40
My normal work hours are	Sunday 10-6, Tues 12-3 TH 3-7 M-F	7:00 - 3:30
Average # of overtime hours worked each week	0	0
After taxes/deductions my net income is	\$ 1500	<del>\$ 1500</del> \$ 589/week
Amount each month put in savings or retirement account	\$ 400.00	0

MONTHLY INCOME (Include income for all members of your household)					
	Applicant	Co-Applicant	Others in household		
Gross pay per month	\$ 1800	\$ 3600.00			
Alimony	\$ 0	\$ 0			
Child support per week	\$ 0	\$ 0			
AFDC/TANF	\$ 0	\$ 0			
Food Stamps	\$ 0	\$ 0			
Social Security / Disability	\$ 0	\$ 0			
Unemployment	\$ 0	\$ 0			
Disability	\$ 0	\$ 0			
Other	\$ -	\$ -			
<b>TOTAL MONTHLY INCOME</b>	<b>\$ 1800</b>	<b>\$ 3600</b>			

COMBINED HOUSEHOLD MONTHLY BILLS					
Rent	\$ 1475.00	Child care	\$ 400.00		
Alimony	\$ 0	School lunch	\$ 0		
Child support	\$ 0	Student loans	\$ 0		
Gas / Oil (monthly avg.)	\$ 0	Cable / Internet	\$ 80.00		
Electric (monthly avg.)	\$ 75.00	Car payments	\$ 360.00		
Garbage	\$ 0	Renter's insurance	\$ 250 per year		
Water / Sewer	\$ 80.00 / every 3 months	Health insurance	\$ 600.00		
Phone / cell (monthly avg.)	\$ 150.00	Car insurance	\$ 150.00		
Credit card(s)	\$ 4300	Other (explain)	\$		
<b>TOTAL MONTHLY EXPENSES:</b>	<b>\$</b>				

ASSETS			
List Checkings, Savings, Brokerage, 401k Accounts (etc) for all members of your home (use separate sheet if necessary)			
Name(s) on account	Financial Institution	Account Number	Amount
Jamie & Joshua Obijiski	Mutual Security Credit Union	08771090	\$ CH: \$1450. / SAV: \$1874.
			\$
			\$
			\$

DEBTS			
To whom do you and the Co-applicant owe money?			
Include stores, credit cards, finance companies, child support, tuition and any unpaid debts that may be reported on a credit report.			
Name(s) on account	Company/person you owe	Monthly payment	Unpaid balance
Jamie C. Obijiski	Chase	\$ 100 -	\$ 422.00
Jamie & Joshua Obijiski	Citi	\$ 150 - 200	\$ 5100 -
JOSHUA D OBISKI	PAYPAL	\$ 40. (AVG)	\$ 305 -
		\$	\$
Do you own a car(s)?	Yes No	Make(s)	Model(s) Year(s)
Total amount of monthly car payment(s)	\$ 393.00	Unpaid balance:	JETTA / Honda \$4288
What is your yearly car insurance cost?	\$ 1800 -		\$10,592.

# DECLARATIONS

Please check the box that best answers the following questions for you and the Co-Applicant

	Applicant		Co-Applicant	
a. Are you a U.S. citizen or permanent resident alien?	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input checked="" type="radio"/> Yes	<input type="radio"/> No
b. Have you been declared bankrupt within the past 7 years?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
c. Have you had property foreclosed on in the last 7 years?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
d. Are you currently involved in a lawsuit?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
e. Are you paying alimony or child support?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
f. Do you have any debt because of a court decision against you?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No
g. Do you own a home or property in the United States or outside the United States?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Yes	<input checked="" type="radio"/> No

Answering "yes" to questions b through g above does not automatically disqualify you. If you answered "yes" to any question b through g, however, please explain on a separate sheet of paper.

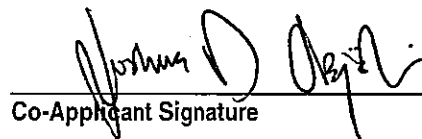
## AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Housatonic Habitat for Humanity to evaluate my actual need for a Habitat home, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to be a partner family. 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 copy of this application will be retained by Housatonic Habitat for Humanity even if the application is not approved.

I understand that Housatonic Habitat for Humanity requires that sex offender and criminal background checks be conducted for all potential partner families, board members, employees and key volunteers.

  
Applicant Signature

11/8/14  
Date

  
Co-Applicant Signature

11/8/14  
Date

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.

Housatonic Habitat for Humanity does not discriminate on the basis of race, sex, sexual orientation, color, age, handicap, religion, national origin, marital status, familial status or because all or part of the income is derived from any public assistance program that will produce income for the long term.

## Voluntary Information

The following information is requested by the Federal government for certain types of loans related to a dwelling 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 not discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish the information, under Federal regulations the lender is required to note race or national origin on the basis of visual observation or surname. If you do not wish to furnish this information, please "X" below.

Applicant	Co-Applicant
I do not wish to furnish this information	I do not wish to furnish this information
<b>Race/National Origin:</b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black/African American <input checked="" type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native AND Caucasian <input type="checkbox"/> Asian AND Caucasian <input type="checkbox"/> Black/African American AND Caucasian <input type="checkbox"/> American Indian or Alaskan Native AND Black/African American <input type="checkbox"/> Other (specify)	<b>Race/National Origin:</b> <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black/African American <input checked="" type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native AND Caucasian <input type="checkbox"/> Asian AND Caucasian <input type="checkbox"/> Black/African American AND Caucasian <input type="checkbox"/> American Indian or Alaskan Native AND Black/African American <input type="checkbox"/> Other (specify)
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic
<b>Gender:</b> <input checked="" type="checkbox"/> Female <input type="checkbox"/> Male	<b>Gender:</b> <input type="checkbox"/> Female <input checked="" type="checkbox"/> Male
<b>Birth date:</b> 2 / 9 / 76	<b>Birth date:</b> 2 / 6 / 76
<b>Marital Status:</b> <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)	<b>Marital Status:</b> <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)

