

Preliminary Partner Family Application



Contact Information ****Please PRINT Clearly and fill in ALL INFO front & back****

Name	
Street Address	
City	
State	
ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

General Information

_____ Number of people in your family including yourself (number of people who will be living in the home)

Please check off the range of your annual gross household income:

\$19,280 - \$36,050
 \$36,051 - \$41,200
 \$41,201 - \$46,350
 \$46,351 - \$51,500
 \$51,501 - \$55,620
 \$55,621 - \$59,740
 \$59,741 - \$63,860
 \$63,861 - \$68,000

Have you been living for at least one year between the Martin County line south to Hypoluxo Rd.?
 . (Please circle one) YES NO

Are you currently enlisted in the Military; or are a Veteran; or is a surviving family of a deceased Veteran? (Please circle one) YES NO

Please explain:

Why do you want to become a Habitat for Humanity Homeowner?

Please write a short paragraph explaining why you would like to become a Habitat Homeowner.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that this is NOT a Habitat for Humanity Homeowner Application. This is only an informational contact sheet. Habitat for Humanity of Palm Beach County, Inc. will use this sheet only to advise me of the next Applicant Session. I am responsible for contacting Habitat for Humanity Palm Beach County, Inc. of any changes which may occur regarding my contact info. Habitat for Humanity will keep this on file until August 30, 2008.

Name (printed)	
Signature	
Date	

Please mail/fax this sheet to: Habitat for Humanity Palm Beach County,
1225A South Military Trail
West Palm Beach, FL 33415 FAX: 561-304-0223