

USDA-RD MUTUAL SELF-HELP HOUSING



The Self-Help Housing Program

Save by building a home of your own! You can do it! The Mutual Self-Help Housing Program provides new home ownership opportunities for those who qualify. No experience required.

Participants work in a group setting with other households under the guidance of a qualified construction supervisor who will educate each participant through the building of their home. Thirty hours of labor are required each week on all the homes in the group. No

one moves in until they are all complete. Very low mortgage rates (as low as 1%).

The United States Department of Agriculture (USDA) founded the Mutual Self-Help Housing Program in 1971 with the intention of providing rural low-income people the opportunity to build their own homes. As a result of this program and the hard work of the families involved, over 50,000 have moved into self-help built homes nationwide!

Who is Eligible to Participate?

To be eligible for the program, a household's gross annual income must not exceed 80% of the county median income. A prospective household must be qualified by the City of Coffeyville Housing Department for the Rural Development financing. Items that will be reviewed will include such things as employment, personal debt, credit information and the ability to pay the monthly home mortgage payment. The applicant must also be willing to contribute the required construction labor.

How Much Work is Required?

The participants will be expected to complete at least 65% of the new home construction tasks. Families will be required to work at least 30 hours per week through the course of construction. Certain jobs, such as electrical and plumbing work will be subcontracted to licensed contractors.

The staff of the City of Coffeyville Housing Department will educate and guide participants through all phases of construction, such as framing, hanging drywall, painting and landscaping. We will also teach other basic skills such as budgeting, money management, and the home buying process.

Interested?

The City of Coffeyville Housing Department is currently looking for families that would like to build their own new homes. Call Amber at 620-252-6129 or email adean@coffeyville.com for more information on the Self-Help Housing Program.



**CITY OF COFFEYVILLE
HOUSING DEPARTMENT**

**102 W. 7TH STREET
COFFEYVILLE, KS 67337**

**PHONE: 620-252-6129
FAX: 620-252-6175**



Prequalification Worksheet

Primary Applicant Personal Information

Applicant name: _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Cell: _____ Home: _____ Work: _____

Mailing Address: _____ Physical Address: _____

County Where you are applying: _____ How long have you lived in indicated county: _____

Primary Applicant Employment Information

Employer 1

Employer: _____ Applicant Position _____

Annual Gross income _____ Term of Employment: _____ Yrs _____ Mos. _____

Is this a seasonal position? If so, what dates are you employed? _____

Employer 2

Employer: _____ Applicant Position _____

Annual Gross income _____ Term of Employment: _____ Yrs _____ Mos. _____

Is this a seasonal position? If so, what dates are you employed? _____

Employer 3

Employer: _____ Applicant Position _____

Annual Gross income _____ Term of Employment: _____ Yrs _____ Mos. _____

Is this a seasonal position? If so, what dates are you employed? _____

Self-Employed

Name of Business: _____ How Long has this business been in operation: _____

Annual Adjusted Gross Income for the past 2 Years: _____



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Coffeyville, KS 67337
620-252-6129





Prequalification Worksheet

Co-Applicant Personal Information

Applicant name: _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Cell: _____

Home: _____

Work: _____

Mailing Address: _____

Physical Address: _____

County Where you are applying: _____

How long have you lived in indicated county: _____

Co-Applicant Employment Information

Employer 1

Employer: _____

Applicant Position _____

Annual Gross income _____

Term of Employment: _____

Yrs _____

Mos. _____

Is this a seasonal position? If so, what dates are you employed? _____

Employer 2

Employer: _____

Applicant Position _____

Annual Gross income _____

Term of Employment: _____

Yrs _____

Mos. _____

Is this a seasonal position? If so, what dates are you employed? _____

Employer 3

Employer: _____

Applicant Position _____

Annual Gross income _____

Term of Employment: _____

Yrs _____

Mos. _____

Is this a seasonal position? If so, what dates are you employed? _____

Self-Employed

Name of Business: _____

How Long has this business been in operation: _____

Annual Adjusted Gross Income for the past 2 Years: _____



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Prequalification Worksheet

Other Income

	Amount Per Year	Primary or Co App		Amount Per Year	Primary or Co App
Child Support/Alimony			AFDC/TANF		
Social Security, SSDI			Retirement/Pension		
Child Care Assistance			Food Stamps		
Unemployment			Other		

Additional Household Members

List other adults living in household and their annual income:

List any children in household and their respective ages:

Expenses

Monthly Rent: _____ Monthly Child Care: _____ Other: _____

Monthly Debts

Debt Owed	Minimum Monthly Payment	Balance



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Prequalification Worksheet

Assets

Type	Value
Savings Account	
Checking Account	
Retirement	
IRAs	

Do you own land? If yes is it located in the county where you are applying, what is the acreage and is it buildable?

Have you ever been a homeowner previously?

If yes, when did you own your home?

Are you currently applying for any other home loans or programs? If so, which ones?

By Signing Below, I verify that all information provided in this form is accurate to my knowledge.

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____



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Important Items to Bring to the Appointment

- Paystubs for the past month (4 weeks) for all working applicants
- Provide Credit Card account numbers, current balances, monthly payments and address
- Provide personal loans, credit union loans or any other monthly installment accounts: account numbers, balances, monthly payment and addresses
- For hospital bills, doctor bills and any other medical bills, bring account numbers, balances monthly payment and addresses (if over 62 years of age)
- If you receive child support and support is ordered through the courts, bring a copy of the actual court document. If the support is received and paid voluntarily, bring a statement from the person who pays you.
- If anyone in your household receives social security, bring a copy of the most current award letter
- Name and address of current and previous landlords to cover the past 2 years
- Copy of the last 2 years' complete tax returns with all attachments and W2's
- If self-employed, copy of the last 2 tax return schedules (C, K, E etc.) include YTD Business Expenses for the current year
- Copy of Applicants Driver's License and Social Security Card (If not a US Citizen, a Permanent Resident Alien Card Front and Back)
- 2 Most recent monthly bank statements of all accounts: Checking, Savings, IRA, 401K, ETC.
- Documentation of Student Loan(s): Monthly payment statement and any grant documentation
- If you are divorced or separated, you will need to bring a copy of the legal documents
- Provide an employment history for the past 2 years of all household members (included names and addresses that can verify employment)
- Bring a statement from your childcare provider stating what they charge you for service.
- Copy of your credit report (you can obtain a free copy at www.annualcreditreport.com)