The Self Help Housing Program is funded through the United States Department of Agriculture, Rural Development branch.

Our program was established in 1988 and has assisted over 700 families.

This is an unique housing program. There is no requirement of up front down payments or out of pocket closing cost.

In lieu of down payment and closing cost the participating families must agree to perform a significant portion of the construction, under the supervision of our professional construction supervisors.

Applicant eligibility and loan terms are not determined by Deep Fork Community
Action but by the lender (USDA).
This institution is an equal opportunity provider, and employer.

For Information Call:

888-641-2444 Toll Free 918-756-2444 Office 918-756-2441 Fax Relay 1-800-722-0353 (TTY)

Email Applications To: shhoutreach@dfcaf.org



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"This institution is an equal opportunity provider and employer"



No down payment House payments adjusted to income Property may be purchased w/ Loan Funds

- · Energy efficient construction
- · 3 or 4 bedroom floor plans
- · Central heat & air
- · Brick veneer
- · Carpet & Tile
- · 1 or 2 Car Garage
- · Concrete Driveway
- Appliances

Qualifications

To qualify for this program you must meet the following qualifications:

- Steady Income
- · Good Credit History
- · Meet Income Guidelines
- · Low Monthly Debts
- · Work on the house

Income Guidelines

Number in Household	Okmulgee, Haskell, McIntosh, Muskogee, Seminole, Hughes, Okfuskee, Counties	Pottawatomie County	Creek Wagoner Counties
1 Person	\$51,750	\$55,050	\$55,750
2 Person	\$51,750	\$55,050	\$55,750
3 Person	\$51,750	\$55,050	\$55,750
4 Person	\$51,750	\$55,050	\$55,750
5 Person	\$68,300	\$72,650	\$73,600
6 Person	\$68,300	\$72,650	\$73,600
7 Person	\$68,300	\$72,650	\$73,600
8 Person+	\$68,300	\$72,650	\$73,600





Helping Families. Building Futures.





DEEP FORK COMMUNITY ACTION FOUNDATION, INC.

Okmulgee · Creek · Okfuskee · Hughes · McIntosh · Muskogee · Pottawatomie · Seminole · Wagoner · LeFlore · Haskell · Latimer · Pittsburg Counties Self Help Housing Program

Preliminary Application:	***	1 0		1 11 11 11 10	
			Are you or anyone in your household disabled?		
Applicant:	Social Security#	Co-Applicant:	Social Security#		
Mailing Address:		City & Zip:	Are you a U.S. Citizen?:	# of Dependents:	
Child Care Expenses:	Current l	Living Situation: Rent:\$	Own: Other:		
HOUSEHOLD AND INCOME INF	ORMATION (Please inclu	ide information on everyone	in household)		
Name:	Age-Date of Birth:	Gross Annual In	ncome: Length of	Employment:	
Name:	Age-Date of Birth:	Gross Annual In	ome: Length of Employment:		
Name:	Age-Date of Birth:	Gross Annual In	ome: Length of Employment:		
Name:	Age-Date of Birth:	Gross Annual In	ome: Length of Employment:		
Name:	Age-Date of Birth:	Gross Annual In	ncome: Length of	Employment:	
List any additional income: DEBT INFORMATION: List all debts ((Include Food Stamp An car payments, furniture, credi	nount or Child Support Amount if a t cards, student loans, bank note	applicable) es, etc.) Do not include living expens	ses, such as rent and utilities.	
Creditor:	Mo	onthly Payments	Balance Remaining		
Creditor:	Monthly Payments		Balance Remaining	Balance Remaining	
The Following information is requested by the this information, but are encouraged to do so. However, if you choose not to furnish it, unde	The law requires that a program rederal regulations, this program	recipient may neither discriminate in representative is required to note	on the basis of this information nor on verace/ethnicity on the basis of visual obs	whether you choose to furnish it. ervation or surname.	
I do not wish to furnish this information	n. <u>Ethnicity</u> : Hispanic Not Hisp	or Latino Race: (Mark or anic or Latino	Race: (Mark one or more): American Indian/Alaska Native Asian Black or African American		
	Gender: Male Female		Native Hawaiian or other Pacific Islander White		
I affirm that all the answers given in this pre-a ration you may need, including Rural Develop application shall remain your property whethe Applicant	ment, to obtain such information	as you may require concerning the			
Signature	Soc. Sec#	Signature	Soc	Sec#	