

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 national origin.

Application

Home Repair Program

Dear Homeowner: Please complete this application to determine if you qualify for the Habitat for Humanity Home Repair program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act. For a complete overview of the ways Habitat for Humanity of Greater Sacramento shares information, see the Privacy Notice posted on our website at HabitatGreaterSac.org/Apply

1. HOUSEHOLD INFORMATION

Full Name of Homeowner:		Full Name of Co-Homeowner:	
Property Address:	City:	Zip Code:	Number of Years at this Property:
Home Phone #:	Cell Phone #:	Email Address:	

List the names, ages and relationships of all people living in the home. Please attach a separate page if more space is needed. Please indicate Military Status (Active/Veteran) and Date of Discharge (if applicable).

Full Name	Relationship	Age	Military Status and Date of Discharge
			<input type="checkbox"/> Veteran – Date of Discharge: <input type="checkbox"/> Active Military
			<input type="checkbox"/> Veteran – Date of Discharge: <input type="checkbox"/> Active Military
			<input type="checkbox"/> Veteran – Date of Discharge: <input type="checkbox"/> Active Military
			<input type="checkbox"/> Veteran – Date of Discharge: <input type="checkbox"/> Active Military

2. SPECIAL NEEDS

Does anyone in the household have any special housing needs? Yes No

If YES, please describe:

Do you or any of the applicants require translation? Yes No If YES, in what language:

3. HOUSEHOLD INCOME

Please indicate the gross monthly income figure	Homeowner	Co-Owner	Household Member	Household Member	Household Member
Wages/Salary	\$	\$	\$	\$	\$
Unemployment/Worker's Compensation	\$	\$	\$	\$	\$
Social Security Benefit	\$	\$	\$	\$	\$
Disability	\$	\$	\$	\$	\$
Retirement/Pension	\$	\$	\$	\$	\$
Alimony/Child Support	\$	\$	\$	\$	\$
Military Pay	\$	\$	\$	\$	\$
Veteran Benefits	\$	\$	\$	\$	\$
Rental Income	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$

4. MORTGAGE AND PROPERTY INFORMATION

Do you own this home? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO , please describe below:	Do you own any other real estate? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES , please list here:
Are you making mortgage loan payments on your home? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES , How much is your payment:	Are you current on your mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO , please explain:
Do you have Homeowner's insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO , please explain:	Are the property taxes current on your property? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any illegal and/or unpermitted additions / building activity on your home? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure If YES OR NOT SURE , please explain:	Have you applied for the Habitat for Humanity of Greater Sacramento Home Repair Program in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES , please indicate the year you applied:

Please indicate your utility service providers for each of the following services (e.g. PG&E, SMUD, etc.):

Electricity:	Water:	Gas:
Please indicate your average monthly expense for each of the following utility services:		
Electricity: \$	Water: \$	Gas: \$

5. REQUESTED REPAIRS

BRIEFLY DESCRIBE THE TYPE OF REPAIRS NEEDED ON YOUR HOME. ATTACH A SEPARATE SHEET OF PAPER IF YOU NEED ADDITIONAL SPACE. PLEASE UNDERSTAND THAT ITEMS LISTED BELOW WILL BE CONSIDERED BUT THE FINAL DECISION REGARDING REPAIRS PROVIDED IS AT THE SOLE DISCRETION OF HABITAT FOR HUMANITY OF GREATER SACRAMENTO.

NUMBER OF BEDROOMS:	SQUARE FEET:	LOT SIZE:
AREA OF NEED	DESCRIPTION OF REPAIR NEED	
Accessibility Modifications: Example: Wheelchair ramp, bathroom grab bars, accessible shower stall, etc.		
Carpentry repairs: Describe problems with doors, floors, porches, steps, walls, ceilings, etc. Indicate places where repairs are needed.		
Electrical repairs: List rooms where wall outlets, switches and light fixtures do not work.		
Plumbing repairs: Describe sink, tub or toilet leaks, etc.		
Roofing Repairs: Identify where roof leaks.		
Painting: List all exterior painting requirements.		

Doors and Windows: Describe repairs required, including locks, glass, and frames and weather-stripping.	
General Cleaning: Indicate if there is cleaning and/or trash removal required or if yard work is necessary.	
Other: Identify other repairs requested but not listed above.	

6. STATEMENT OF NEED

WHAT FACTORS ARE LIMITING YOUR HOUSEHOLD'S ABILITY TO MAKE THE NEEDED REPAIRS (CHECK ALL THAT APPLY):

<input type="checkbox"/> Income (low, limited or no income in home)	<input type="checkbox"/> Lack of savings/assets to finance home repairs
<input type="checkbox"/> Ineligible for a loan/consumer credit due to poor credit, lack of home equity or personal property.	<input type="checkbox"/> Unwillingness to take a loan or consumer debt
<input type="checkbox"/> Physical Limitation	<input type="checkbox"/> Lack of building/repair/home maintenance knowledge
<input type="checkbox"/> Unfamiliar with contractors and repair process	<input type="checkbox"/> Other (please explain):

PLEASE TELL US WHY YOU THINK YOU SHOULD BE SELECTED FOR THE HOME REPAIR PROGRAM AND HOW IT WILL HELP YOUR HOUSEHOLD. PLEASE FEEL FREE TO ATTACH AN ADDITIONAL SHEET IF NECESSARY.

7. PROGRAM REFERRAL

WHERE DID YOU HEAR ABOUT HABITAT FOR HUMANITY OF GREATER SACRAMENTO'S HOME REPAIR PROGRAM (CHECK ALL THAT APPLIES)?

<input type="checkbox"/> Television	<input type="checkbox"/> Habitat Homeowner	<input type="checkbox"/> Community/Civic Group:	<input type="checkbox"/> Neighbor
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Habitat ReStore	<input type="checkbox"/> Church	<input type="checkbox"/> Other Non-Profit
<input type="checkbox"/> Radio	<input type="checkbox"/> Internet Search	<input type="checkbox"/> Work/Job Fair	<input type="checkbox"/> Friend/Family Member
<input type="checkbox"/> Habitat Website	<input type="checkbox"/> Habitat Staff Member	<input type="checkbox"/> School	<input type="checkbox"/> Other

DO YOU KNOW A VETERAN HOMEOWNER IN NEED OF HOME REPAIR ASSISTANCE?

MAY WE SEND THEM HABITAT FOR HUMANITY OF GREATER SACRAMENTO HOME REPAIR PROGRAM INFORMATION ON YOUR BEHALF?

<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If Yes, please indicate their name and contact information below:

Name:	Phone Number:	Email:	Home Address:
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8. SWEAT EQUITY

Homeowner and any additional able bodied adults (18 year or older) residing at the property agree to contribute to the work at the property and or other Habitat houses also known as "Sweat Equity". Hours will be determined by Homeowner Services Manager and or Homeowner Selection Committee.

I acknowledge that Sweat Equity is a requirement of the Program and understand that no compensation will be paid to me and others for performance of Sweat Equity under any circumstances.

Signature of Homeowner

Date

9. EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices at [FTC Regional Office for the Western Region , Federal Trade Commission 901 Market Street, Suite 570 San Francisco, CA 94103 or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580. You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support and separate maintenance income; and the spouse's financial resources. Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete, and we will be unable to invite you to participate in the Habitat program.

Signature of Homeowner

Date

Signature of Homeowner

Date

10. HOMEOWNER AGREEMENT

- I/We certify that the information provided on this application is true and accurate and that I /we own the property at the address given.
- I/We grant permission to Habitat for Humanity of Greater Sacramento to check any and all references and to take any and all actions reasonably necessary to substantiate the information contained in this application or otherwise establish my/our suitability as an applicant(s) for the Habitat for Humanity of Greater Sacramento's Home Repair Program, including without limitation, contacting or otherwise attempting to confirm my/our (1) employment status and credit history (2) personal references, including all parties listed in this application and/or any other parties which Habitat for Humanity of Greater Sacramento desires to contact, (3) family composition and marital status and related issues, (4) credit worthiness, (5) immigration status, (6) police records and other information relative to criminal charges and/or convictions, (7) any additional information that Habitat for Humanity of Greater Sacramento deems necessary to evaluate this application. I/we understand that Habitat for Humanity of Greater Sacramento may reject this application based upon the results of these inquiries.
- I/We agree that if Habitat for Humanity of Greater Sacramento selects my/our home to be repaired, photos of me/us, my/our household members and my/our home may be taken and a biographical summary about me/us and my/our project may be written and shared with the general public or utilized for public relations, promotional or program development purposes.
- I/We understand and agree that if Habitat for Humanity of Greater Sacramento selects my/our home to be repaired, I/we must participate as partners with Habitat for Humanity of Greater Sacramento which includes completing Sweat Equity hours.
- I/We understand that there is no monetary or other form of compensation for Sweat Equity

CONTINUED ON FOLLOWING PAGE

- I/we understand that Habitat for Humanity of Greater Sacramento makes no guarantees as to the start or completion dates or length of repairs.
- I/We understand that Habitat for Humanity of Greater Sacramento is a nonprofit corporation with limited resources and cannot afford to provide or guarantee assistance for each applicant. Consequently, I/we agree that Habitat for Humanity of Greater Sacramento, its staff, whether voluntary or compensated, and its board of directors will not be liable in any way or otherwise be held responsible by me/us or anyone acting on my/our behalf in connection with my/our application for Habitat for Humanity of Greater Sacramento or any claims of any nature associated herewith.
- I/We understand that copies of any and all documentation provided to determine my/our program eligibility will not be distributed to a third-party without my/our authorization and may only be returned upon request.
- I/We understand that if I/we receive assistance from Habitat for Humanity of Greater Sacramento's Home Repair Program, I/we may not receive additional assistance for 5 years from Habitat for Humanity of Greater Sacramento after the completion of my/our repairs.
- I/We understand that submission of this Home Repair Program application and any supporting documentation **does not guarantee assistance from Habitat for Humanity of Greater Sacramento's Home Repair Program.** I/We understand that selection is based on submitting all required documentation, meeting the eligibility criteria and the availability of program funding and not all applicants may be serviced.
 I/We understand that selection and repairs provided are subject to the availability of funds and that program policies are subject to change at any time without prior notice.

Signature of Homeowner

Date

Signature of Homeowner

Date

FOR OFFICE USE ONLY- DO NOT WRITE BELOW

DATE RECEIVED

DATE OF HOMEOWNER SELECTION APPROVAL

DATE OF INCOMPLETE APPLICATION LETTER

DATE OF BOARD APPROVAL

DATE OF ADVERSE ACTION LETTER

DATE OF HOMEOWNER AGREEMENT SIGNED

11. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it to be visual observation or surname.

Homeowner	Co-Homeowner
<input type="checkbox"/> I do not wish to furnish this information Race (Homeowner may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: _____/_____/_____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, windowed)	<input type="checkbox"/> I do not wish to furnish this information Race (Homeowner may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: _____/_____/_____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, windowed)

To be completed only by the person conducting the interview							
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 30px;">Interviewer's Name (print or type)</td> </tr> <tr> <td style="width:70%; height: 30px;">Interviewer's signature</td> <td style="width:30%; height: 30px;">Date</td> </tr> <tr> <td colspan="2" style="height: 30px;">Interviewer's phone number</td> </tr> </table>	Interviewer's Name (print or type)		Interviewer's signature	Date	Interviewer's phone number	
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