



Homeowner Name: \_\_\_\_\_ Co-owner Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Number of residents in home: \_\_\_\_\_ Age(s) of residents (check all that apply): 0-17 yrs. \_\_\_\_\_ 18-64 yrs. \_\_\_\_\_ 65+ \_\_\_\_\_

Is applicant the owner and a primary resident at property? Yes \_\_\_ No \_\_\_ Is applicant a renter? Yes \_\_\_ No \_\_\_

If applicant does not reside at the property, what is your relationship to the resident?: \_\_\_\_\_

Is any household member a US Veteran? Yes \_\_\_ No \_\_\_ If Yes, please provide form DD214 with your application.

Does any household member have accessibility issues? Yes \_\_\_ No \_\_\_ If Yes, we will evaluate the home for ramp installation.

What year was your home built? \_\_\_\_\_ Do you have current homeowners insurance? Yes \_\_\_ No \_\_\_

Mobile Home? Yes \_\_\_ No \_\_\_ Duplex? Yes \_\_\_ No \_\_\_ HOA? Yes \_\_\_ No \_\_\_ Reverse Mortgage? Yes \_\_\_ No \_\_\_

Do you own any other property? Yes \_\_\_ No \_\_\_ Has Habitat previously worked on the property? Yes \_\_\_ No \_\_\_

**What type of repairs are you interested in?**

Landscaping/Yard Cleanup \_\_\_\_\_ Fencing \_\_\_\_\_ External Paint \_\_\_\_\_ Dry Rot \_\_\_\_\_ Gutter Cleaning \_\_\_\_\_

HVAC \_\_\_\_\_ Roof Replacement \_\_\_\_\_ Pest Abatement \_\_\_\_\_ Windows \_\_\_\_\_ Water Heater Replacement \_\_\_\_\_

Energy Efficiency Repairs \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Please tell us about the condition of your home and about the needed repairs: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Tell us about your family, and how these repairs would impact you and your family: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Please also submit the following documents with your application:**

- a. Proof of ownership of property (most recent mortgage statement).
- b. Proof of current homeowners insurance (current homeowners insurance policy declaration page).
- c. Most current tax year filing for anyone over 18 in the household; if you do not file taxes, please email [repair@habitatgreatersac.org](mailto:repair@habitatgreatersac.org) to discuss other options for confirming financial qualification for repairs.
- d. CA driver's license or other identification for anyone over 18 in the household.

**If my property is selected as a project site, I agree to the following (initial on each line):**

- I will participate in the work on my property with volunteers. Those who are not physically able to help with repairs or have conflicts can participate in other volunteer opportunities. \_\_\_\_\_
- I understand that I may need to provide additional financial information and a complete loan application depending on the scope of the repair project. Further, I grant permission to Habitat for Humanity of Greater Sacramento to take any actions reasonably necessary to substantiate the information I have provided or otherwise establish my suitability as an applicant, including but not limited to a complete consumer report and background check, and Habitat may reject this application based upon the results of these inquiries. \_\_\_\_\_
- I understand that a member of the Habitat for Humanity of Greater Sacramento team will schedule an appointment with me to review the work to be done on my home and to complete a formal Homeowner Partner Agreement prior to the project. \_\_\_\_\_



**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 will note it by visual observation or surname.

<input type="checkbox"/> I do not wish to furnish this information  <b>Race/National Origin</b> (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other: _____ <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Other: _____ <input type="checkbox"/> White <input type="checkbox"/> Other: _____	<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Cuban <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Other: _____ <input type="checkbox"/> Non-Hispanic or Latino  <b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender <input type="checkbox"/> Non-binary/Non-Conforming <input type="checkbox"/> Prefer not to Respond  <b>Birthdate:</b> _____ / _____ / _____  <b>Marital status:</b> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried  <b>Do any of the following apply to any household member?</b> <input type="checkbox"/> Disabled <input type="checkbox"/> Over 65 <input type="checkbox"/> Under 18 <input type="checkbox"/> Veteran
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**Habitat for Humanity of Greater Sacramento Experience and Feedback:**

<b>How long have you lived in your home?</b> <input type="checkbox"/> Less than 1 year <input type="checkbox"/> 1-5 years <input type="checkbox"/> 6-10 years <input type="checkbox"/> Over 10 years	<b>How would you describe the appearance of your neighborhood (e.g. roads, houses, yards)?</b> <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	<b>How would you describe your relationship with your neighbors?</b> <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor	<b>In general, my neighborhood is a good place to live.</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree
<b>What is your preferred language?</b> _____  <b>If English is not your primary language, is there an English speaker who can help with the application process?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Our organization uses a live translation service for phone calls. Would you like us to use that when we call you?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>How did you hear about our program?</b> <input type="checkbox"/> Habitat Website <input type="checkbox"/> Social Media <input type="checkbox"/> Postcard <input type="checkbox"/> Flyer <input type="checkbox"/> Other media (type): _____ <input type="checkbox"/> Organization (name): _____ <input type="checkbox"/> Word of Mouth (who): _____ <input type="checkbox"/> Other (please specify): _____		

Applicant Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

**Return completed application to Habitat for Humanity of Greater Sacramento via either:**

- Mail to 819 N. 10<sup>th</sup> Street, Sacramento, CA 95811
- OR
- Email to [Repair@habitatgreatersac.org](mailto:Repair@habitatgreatersac.org)

**For more information, email [Repair@habitatgreatersac.org](mailto:Repair@habitatgreatersac.org) or call (916) 440-1215 ext. 1123**

