

Date received: _____

All supporting docs received: Y N

Initials: _____

Home Repair Program Application

Applicant/Co-Applicant Information

Applicant Name _____

Co-Applicant's Name _____

Street Address _____

City, State, Zip _____

Home Phone Number _____

Mobile Phone Number _____

Email Address _____

Applicant Marital Status: Married Unmarried Separated

Do you speak and read English? Yes No Some

If No/Some, what is the primary language spoken at home?

Emergency Contact: _____

Phone: _____

Relationship _____

Other Household Members

Name	Relationship	Employed	Student	Age	Date of Birth	Male	Female
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Employment and Income Information

Applicant: Current Employer #1

Name Of Employer _____

Job Title _____

Date Of Hire (MM/DD/YYYY) _____

\$

Monthly Gross Income _____

Supervisor's Name _____

Supervisor's Phone Number _____

Applicant: Current Employer #2 (if applicable)

Name Of Employer _____

Job Title _____

Date Of Hire (MM/DD/YYYY) _____

\$

Monthly Gross Income _____

Supervisor's Name _____

Supervisor's Phone Number _____

Co-Applicant Income (if applicable)

Co-Applicant: Current Employer #1

Name Of Employer

Job Title

Date Of Hire (MM/DD/YYYY) \$ Monthly Gross Income

Supervisor's Name

Supervisor's Phone Number

Co-Applicant: Current Employer #2 (if applicable)

Name Of Employer

Job Title

Date Of Hire (MM/DD/YYYY) \$ Monthly Gross Income

Supervisor's Name

Supervisor's Phone Number

Other Working Adults in Household (if applicable)

Name of Household Member

Job Title

Date of Hire (MM/DD/YYYY) \$ Monthly Gross Income

Supervisor's Name

Supervisor's Phone Number

Name of Household Member

Job Title

Date of Hire (MM/DD/YYYY) \$ Monthly Gross Income

Supervisor's Name

Supervisor's Phone Number

Other Sources of Income (if applicable)

Name Of Household Member \$ Monthly Gross Income

- Employment Alimony Disability
 Child Support SSI Social Security
 Other (explain): _____

Name Of Household Member \$ Monthly Gross Income

- Employment Alimony Disability
 Child Support SSI Social Security
 Other (explain): _____

Name Of Household Member \$ Monthly Gross Income

- Employment Alimony Disability
 Child Support SSI Social Security
 Other (explain): _____

Housing Information

Do you own or rent your home?: Own Rent

What year did you purchase your home? _____

Is this home your primary residence? Yes No

Is there a mortgage on the property? Yes No

Monthly mortgage payment: \$ _____

Are you current on payments? Yes No

Does the mortgage payment include your property taxes? Yes No

If no, how much is your monthly property tax payment? \$ _____

Are you current on your property taxes? Yes No

Home Type: Single Family House Townhouse
 Duplex Apartment Mobile Home Condominium

Do you have homeowners insurance? Yes No

Does the mortgage payment include your monthly insurance payment? Yes No

If no, monthly homeowners insurance premium: \$ _____

Do you pay homeowner association dues? Yes No

If yes, how much do you pay per month? \$ _____

Do you own any other land or property? Yes No

Type of Property: _____

Do you intend to sell or vacate your home in the foreseeable future? Yes No

Repair Needs

Please describe your home repair needs (for example, painting, siding, roof, doors/windows, foundation, porch/deck/stairs, accessibility modifications, yard cleanup, landscaping, etc.). You may attach an additional page if you need more space.

Willingness to Partner

Selected homeowners and their families must be willing to complete "sweat equity" hours (the required amount depends on the size of the project, with a maximum of 20 hours) to be approved for the program. Sweat equity is volunteer work for Habitat for Humanity Portland Region and may include: work on your own home/yard, work on others' homes, participation in homeownership classes, working in the Habitat office or ReStore, or other approved activities. Accommodations will be made for work schedules and the abilities of the homeowner.

I am willing to complete the required sweat equity hours: **Applicant:** Yes No • **Co-Applicant:** Yes No

Additional Information

Is the homeowner or anyone in the home disabled? Yes No

If yes, indicate the type of disability (check all that apply):

Uses a walker, cane or crutches Wheelchair bound
 Blind Hearing impaired Loss of limb Mentally disabled

Other: _____

Are you a Veteran or currently serving in the U.S. Armed Forces?

Applicant: Yes No

Co-Applicant: Yes No

Other? _____

Documents

Please attach the following documentation:

- Copy of most recent real property tax statement
- Copy of homeowners insurance policy declaration page
- Copy of most recent mortgage statement (if applicable)
- Copy of driver's license or government issued photo ID for applicant and co-applicant
- Copies of 2 most recent federal tax returns
- Additional proof of income (see below supporting documentation checklist)

Income documentation for all working household members over the age of 18

If you have consistent employment:

- Copies of 2 months of most recent pay stubs.
 - Note: We need 2 months of paystubs regardless of how often you are paid.

If you have inconsistent or seasonal employment:

- Copies of 2 months of most recent pay stubs.
 - Note: We need 2 months of paystubs regardless of how often you are paid.
- Completed employment verification form confirming your seasonal, on-call, or other employment status.
- Copies of most recent W2s and/or 1099s.

If you are self-employed:

- Current profit and loss statement reflecting income and expenses through at least the end of the most recent quarter.
- Copies of Schedule C tax forms from 2 most recent federal tax returns.

If you have other sources of income or assets:

- Documentation of other income (examples: SSI or Social Security award letter, retirement benefits statement, veterans' benefits statement, etc.).
- Documentation of assets (example: proof of ownership of a second property).

Signature

I understand that by filing this application, I am authorizing Habitat for Humanity Portland Region to evaluate my eligibility and need for the Home Repair Program. I understand that the evaluation may include home visits, a credit check and employment verification. I have answered all of the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to receive Habitat services, I may be disqualified from the program. I acknowledge that the original or a copy of this application will be retained by Habitat for Humanity Portland Region even if the application is not approved.

Applicant's Signature

Date

Co-Applicant's Signature

Date

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, sexual orientation, age, gender identity or national origin.



Demographic Information of Applicant and Co-Applicant

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, race, and sex) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race."

The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it.

However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, race, and sex on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

Applicant Name	Co-Applicant Name
Ethnicity (Check one or more)	Ethnicity (Check one or more)
<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino. (Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on): _____	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino. (Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on): _____
<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> I do not wish to provide this information
Race (Check one or more)	Race (Check one or more)
<input type="checkbox"/> American Indian or Alaska Native – Print name of enrolled or principal tribe: _____	<input type="checkbox"/> American Indian or Alaska Native – Print name of enrolled or principal tribe: _____
<input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Japanese <input type="checkbox"/> Chinese <input type="checkbox"/> Korean <input type="checkbox"/> Filipino <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian (Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on): _____	<input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Japanese <input type="checkbox"/> Chinese <input type="checkbox"/> Korean <input type="checkbox"/> Filipino <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian (Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on): _____
<input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander (Print race, for example, Fijian, Tongan, and so on): _____	<input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander (Print race, for example, Fijian, Tongan, and so on): _____
<input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> White <input type="checkbox"/> I do not wish to provide this information
Sex	Sex
<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information

To be completed by Financial Institution (for an application taken in person):

Was the ethnicity of the applicant collected on the basis of visual observation or surname? Yes No

Was the race of the applicant collected on the basis of visual observation or surname? Yes No

Was the sex of the applicant collected on the basis of visual observation or surname? Yes No

Was the ethnicity of the applicant collected on the basis of visual observation or surname? Yes No

Was the race of the applicant collected on the basis of visual observation or surname? ~~Yes~~ No

Was the sex of the applicant collected on the basis of visual observation or surname? Yes No