



CRITICAL HOME REPAIR

Application for Assistance
704.786.4001



CRITICAL HOME REPAIR is a program of Habitat for Humanity Cabarrus County, Inc. that addresses life, health, and safety concerns for homeowners. Repairs include unsafe roofing, heat and air issues, wheelchair ramps, etc. at an affordable rate. The final decision on what work can be done with our time and financial resources will be made at the discretion of Habitat for Humanity Cabarrus County.

SECTION 1 - Homeowner Information		
Name of Homeowner(s)		
Street Address		
City	Zip	Cabarrus County
Home/Cell Phone:	Work Phone:	

Members of Household <i>(Attach a list if more space is needed)</i>					
	Name (First, MI, Last)	Relationship	Age	Veteran Provide DD-214	Ethnicity (Race)
a		Homeowner			
b					
c					
d					
e					
f					
g					

SECTION 2 - Special Needs			
Is the homeowner or anyone within the home disabled?		Yes	No
If yes, check the type of disability below (check all that apply, please describe if "other")			
Uses a walker, cane or crutches		Blind	Other
Wheelchair bound		Mentally disabled	
Hearing impaired		Loss of limb	
Is translation needed?		If yes, what language?	

SECTION 3 – Proof of Income

******* REQUIRED INFORMATION *******

The total, combined income before taxes for ALL persons living in the home is \$ _____ per year.
Please use the worksheet below to help calculate the total.

Attach documentation of all household income.

(Example: Monthly social security statement, other retirement income statements, or employment check stubs. Please note on attached statements if it represents annual, monthly, twice monthly, bi-weekly or weekly income. Depending on our funding source, you may be asked to provide bank statements for the last 3 – 6 months.)

Gross Income Work Table *(Attach a list if more space is needed)*

Dollars / Household Member / MONTH

Same order as Members of Household on page 1

Source of Income		a	b	c	d	e	f	g
1	Wages							
2	Retirement/Pension							
3	Social Security							
4	Supplemental Security Income							
5	Public Assistance							
6	Child Support							
7	Interest							
8								
9								
10								
MONTHLY TOTAL <i>Add lines 1 - 10, for each column</i>								
ANNUAL TOTAL <i>12 x the line above, for each column</i>								
ANNUAL HOUSEHOLD GROSS INCOME <i>Add above ANNUAL TOTALS together</i>								

Are you making loan payments on your home? ___ Yes ___ No If yes, \$ _____ / month

After paying your monthly bills (gas, electric, insurance, food, phone, medical, etc.), are you capable of paying a minimum \$100 deposit for your repair to Habitat for Humanity Cabarrus County? ___ Yes ___ No

SECTION 4 – Application History

Have you applied for our Critical Home Repair in the past? ___ Yes ___ No What year(s)? _____

Has Critical Home Repair done work at your home in the past? ___ Yes ___ No What year(s)? _____

SECTION 5 – Media and Publicity

Where did you learn about our home repair program? _____

Would you be willing to have your picture taken or be interviewed by media reporters? May we bring elected officials to your home?

_____ Yes, interviews and photographs are OK

_____ Yes, visits by elected officials

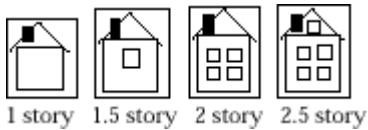
_____ No, I do not want interviews or photographs

_____ No, I do not want visits by elected officials

SECTION 6 – Exterior House Information

HOUSE INFORMATION

Place a large "X" over the house (below), which most resembles the size of your house.



Year Purchased: _____ Year Built: _____

Last Painted: _____ Square Feet: _____

House Exterior

(check all that apply)

Siding

- _____ wood
- _____ brick
- _____ shakes
- _____ stucco
- _____ painted stucco
- _____ asbestos/slate
- _____ aluminum
- _____ vinyl

Trim

- _____ wood
- _____ vinyl
- _____ metal

SECTION 7 – Requested Repairs

Briefly describe the type of work you would like done on your home. Attach a separate piece of paper if there is not enough space to list all repairs. Remember the items listed below will be considered for repair, but **the final decision on what work can be done with our time and financial resources will be made at the discretion of Habitat for Humanity Cabarrus County.**

Please Print

Area of Repairs	Description
Accessibility Modifications: Examples - wheelchair ramp, bathroom grab bars, accessible shower stall, etc.	
Carpentry Repairs: Describe problems with doors, floors, porches, steps, walls, ceilings, etc. Indicate places in house needing repair.	
Roofing Repairs: Identify where roof leaks.	
HVAC: Identify heating and air conditioning issues.	
Other:	

SECTION 8 – Homeowner’s Agreement

I hereby certify that:

1. I own and occupy the home described above as my primary residence.
2. The household and income information listed above is complete and true to the best of my knowledge.
3. This information is provided to qualify me for the Critical Repair Program. The program is intended to assist low- and very low- income homeowners in correcting substandard housing conditions which pose an imminent threat to their life or safety or in performing accessibility modifications or other repairs necessary to prevent imminent displacement.
4. I give permission for Habitat for Humanity Cabarrus County to access information to verify the contents of this application and to facilitate the repair of my home.
5. I understand that the program may not rectify all deficiencies in my home nor make the home conform to any local, state, or federal housing quality standards.
6. I understand, depending on funding options available to Habitat for Humanity Cabarrus County at the time of my repair, I may be responsible for 10% of the actual cost incurred for my repairs.

Homeowner _____ Date _____

Homeowner _____ Date _____

Check the following if you agree:

- _____ We intend to live in this house for at least the next two years.
- _____ We will keep all pets contained away from the work area.
- _____ We will move any valuables away from the work area.
- _____ No drugs, alcohol or firearms will be present or be in anyone’s personal possession while staff, volunteers or contractors are on the home site.
- _____ The HOME REPAIR program assumes all homes contain some lead from lead base paint. It is, therefore, the responsibility of the homeowner to appropriately dispose of all lead base waste from their home.



As the homeowner (s) of this house I/we agree to the above statements and will work to the best of my/our ability to follow through with these commitments.

Homeowner _____ Date _____

Homeowner _____ Date _____