

## Home Repair Program

Habitat for Humanity of the River Valley helps current homeowners who are struggling to maintain the integrity of their home, due to age, disability, or family circumstances. We offer affordable home repairs and energy efficient upgrades to homeowners in Madison, Limestone, and Jackson Counties. This program aims to bring community together as we restore owner-occupied homes to a state of safety and accessibility.

### **Home Repair Program Criteria**

1. **Need:** The home is in need of a minor to moderate repair that is within HFHRV's scope of work and the homeowner is unable to physically and/or financially complete the repair themselves.
2. **Ability to Pay:** The homeowner is required to pay a portion of the repair cost based on a sliding scale that considers the homeowner's income.
3. **Residency:** The home in need of repair must be the homeowner's primary residence and located within HFHRV's service area, which includes Madison, Limestone, or Jackson County. Additionally, the homeowner must be up to date on property taxes, mortgage payments (if applicable), and homeowner's insurance premiums.
4. **Willingness to Partner:** The homeowner must be present during the duration of the repair work.

We are only accepting applications at this time for 4 HVAC replacements due to funding restrictions. Incomplete applications will be denied. If you need assistance completing this application please give us a call at 256-533-2282 ext. 124.



## Documents Needed for Home Repair Application

If you need assistance in completing this application, please call the Habitat Office at 256-533-2282 ext. 124

Please provide the following documents with your completed application:  
*Habitat can make copies for you.*

- Photo ID
- Social Security Card
- Proof of Income
  - Paystubs
    - Four most recent pay stubs, if paid biweekly
    - Two most recent pay stubs, if paid monthly
  - Most Current Award Letter for Income received from:
    - Social Security
    - SSI
    - Pension/Retirement
    - Disability (SSDI)
    - Veteran Benefits
    - Food Stamps
  - If Self-Employed, please provide your last two years of federal tax returns (IRS Form 1040) including all schedules. Tax Returns must be signed.
  - Child Support
    - Court Order and proof of payment for last six months
  - Alimony
    - Court Order and proof of payment for last six months
- Last Two Month's Bank Statements for all accounts.
- Proof of Homeowner's Insurance
- Release of Information for all household members over 18 years of age
- Application fee - \$35 for each applicant
  - Money order or cashier's check

### How to Submit Your Application

Drop off application to the Habitat office or mail your completed application and supporting documentation to:

Habitat for Humanity of the River Valley  
Attn: Family Services Department  
400 Pratt Avenue NW  
Huntsville, AL 35801



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.

# Home Repair Application

*Note: The person whose name is on the application must be one of the people who legally owns and lives in the house to be repaired.*

## **SECTION 1 – Homeowner Information**

Applicant's Full Name: \_\_\_\_\_

Maiden or other name used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Marital Status: Unmarried (includes single, divorced, widowed)       Married       Separated

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Co-Applicant's Full Name: \_\_\_\_\_

Maiden or other name used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Marital Status: Unmarried (includes single, divorced, widowed)       Married       Separated

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

## **SECTION 2- Household Information**

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ How long

have you lived here? \_\_\_\_\_

Do you own the home in needed of repair? \_\_\_\_\_

Is the home in need of repairs a mobile or manufactured home?       Yes       No

*\*We are unable to complete repairs on mobile or manufactured homes at this time.*

Are you or someone in your household a veteran?       Yes       No

Additional Household Members:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

How did you hear about the Home Repair Program? \_\_\_\_\_

**SECTION 3 – Income and Mortgage Information**

Please list all monthly Income sources:	Applicant	Co-Applicant
Wages (List Employer):	\$	\$
Social Security	\$	\$
SSI	\$	\$
Disability	\$	\$
Other(Please Describe)	\$	\$
Other(Please Describe)	\$	\$

Please list all monthly expenses:		
Mortgage Payment	\$	\$
Car Payment	\$	\$
Utilities	\$	\$
Cable/Internet/Phone	\$	\$
Auto/Life Insurance	\$	\$
Personal Loans/Credit Cards	\$	\$
Furniture/Rent-to-own	\$	\$
Cash/Payday/Title Loan	\$	\$

Do you have any court ordered debt payments, judgements or liens? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently required to pay child support? \_\_\_\_\_

Have you declared bankruptcy in the last seven years? \_\_\_\_\_

Are you currently involved in a lawsuit? \_\_\_\_\_

Are you currently in default or delinquent with a federal loan/debt? \_\_\_\_\_

Have you had a foreclosure or defaulted on a mortgage in the past seven years? \_\_\_\_\_

Are you a co-signer on anyone else's note or loan? \_\_\_\_\_

Do you understand the repairs completed by Habitat are paid back through a loan (at no interest)? \_\_\_\_\_

**\*You must own your home and be current on your mortgage to be eligible.**

**SECTION 4 – Homeowner's Insurance/Property Tax**

Do you have homeowner's Insurance? \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Have you filed a claim with your insurance company regarding the needed repair? \_\_\_\_\_

Was the claim approved? \_\_\_\_\_

**\*You must own your home and have Homeowner's Insurance to be eligible.**

**Repair Needs:**

HVAC replacement

Please explain what is going on with your HVAC? \_\_\_\_\_

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Have you tried to address these repairs previously? If so, what challenges did you face?

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How will completing these repairs improve your living conditions or quality of life?

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Have you experienced any financial hardships that make it difficult to complete the repairs on your own? If comfortable, please share any details that may help us understand your situation better. \_\_\_\_\_

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Do you see these repairs as a way to help you stay in your home for the long term? If yes, how?

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How do you think having a safe and well-maintained home will positively impact your family or the community around you?

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### **Privacy Act Notice**

- 1) We collect nonpublic personal information about you from the following sources:
  - Information we receive from you on applications or other forms;
  - Information about your transactions with us, or others, and;
  - Information we receive from a consumer-reporting agency.
- 2) We may disclose the following kinds of nonpublic personal information about you:
  - Information we receive from you on applications and other forms, such as name, address, social security number, income, or number in household.
  - Information about your transactions with us, such as your loan balance, and payment history.
- 3) We DO NOT disclose any nonpublic personal information about our customers to anyone, except as permitted by law.
- 4) We may disclose nonpublic personal information about you to the following types of third parties:
  - Financial service providers, such as mortgage servicing agents, and;
  - Non-profit organizations of government agencies.
  - Nonaffiliated third parties as permitted by law.
- 5) We restrict access to nonpublic personal information about you to:
  - Habitat for Humanity's agents and employees that need to know that information to provide Habitat for Humanity services to you;
  - Disclosures to other non-affiliated third parties as permitted by law.
- 6) We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

NOTE: If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures that is you may direct us not to make those disclosures. If you wish to opt out of disclosures to nonaffiliated third parties, you must call Habitat for Humanity of the River Valley at 533-2282 ext.

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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.

### **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, 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 Southeast region, Federal Trade Commission, Suite 1500 225 Peachtree Street NE, Atlanta, GA, 30303 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.

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Applicant's Signature

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Applicant's Name

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Date

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Co-Applicant's Signature

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Co-Applicant's Name

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Date

### **Application Declaration**

I declare that all information on this application is true, accurate, and complete, and is given with no intention of misrepresentation. I understand that if any of the information is false, this application will be rejected. I understand that the completion of this application in no way guarantees that I will receive assistance through Habitat for Humanity of the River Valley. I understand that the omission of any information will slow down the selection process. I hereby agree to immediately notify Habitat for Humanity of the River Valley in writing of any changes in the information provided in this application, or of any changes in my circumstances. This includes but is not limited to changes in address, phone number, income, place of employment, marital status, number of household members, or the possibility of inheritance of real and/or personal property having a value of \$7500.00 or more. I understand that if I have any such changes in circumstances and fail to promptly notify Habitat for Humanity of the River Valley of such change, such failure may disqualify me/us from this or any other program through Habitat for Humanity of the River Valley.

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Applicant's Signature

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Date

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Co-Applicant's Signature

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Date



*Building lives...  
One home at a time*

**Release of information**

To whom it may concern:

I respectfully request and authorize you to furnish to Habitat for Humanity of the River Valley any and all information, including that of a confidential or privileged nature you may have concerning me. This information includes, but **NOT** limited to:

Receiving/Reporting Credit Reports

Employment Income Verification

Social Services Income/Assistance Verification

Child Support (receiving or paying) Verification

Financial Records (Banking, Retirement, Loans, Account, Collection, etc.)

Landlord References

Criminal Background Check

Public Inquiry Records (Judgements, Liens, Court records, etc)

And other information requested

This information will assist in determining my qualifications for being chosen as a recipient for a Habitat home repair.

Intending to be legally bound, I release you, your organization and others contacted from any liability or damage which may result from furnishing the information requested.

**Copies of this authorization carry the same authority as the original.**

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Applicant signature

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Date

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Print Name

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Social Security

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Date of Birth

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Co-applicant signature

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Date

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Print Name

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Social Security

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Date of Birth

## INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling, in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this Lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the Lender is subject under applicable state law for the particular type of loan applied for.)

### THIS SECTION TO BE COMPLETED BY APPLICANT(S)

#### APPLICANT

I do not wish to provide this information

#### CO-APPLICANT

I do not wish to provide this information

#### RACE/NATIONAL ORIGIN

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Hispanic
- Black, not of Hispanic origin
- White, not of Hispanic origin
- Other (specify) \_\_\_\_\_

#### RACE/NATIONAL ORIGIN

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Hispanic
- Black, not of Hispanic origin
- White, not of Hispanic origin
- Other (specify) \_\_\_\_\_

#### SEX

Female       Male

#### SEX

Female       Male

#### MARITAL STATUS

- Married
- Unmarried (inc. single, divorced, widowed)
- Separated

#### MARITAL STATUS

- Married
- Unmarried (inc. single, divorced, widowed)
- Separated

#### AGE

Date of birth \_\_\_\_\_  
month      day      year

#### AGE

Date of birth \_\_\_\_\_  
month      day      year

#### THIS APPLICATION WAS TAKEN BY:

- FACE-TO-FACE INTERVIEW
- MAIL
- TELEPHONE
- OTHER (SPECIFY) RETURNED W/ APPLICATION  
INTERVIEWER'S NAME (PRINT OR TYPE): \_\_\_\_\_

INTERVIEWER'S PHONE NUMBER: (256) 533-2282

Date: \_\_\_\_\_

**PLEASE REMOVE FORM AND RETURN TO FAMILY  
SERVICES COORDINATOR**

**APPLICATION CODE: \_\_\_\_\_**

**AMI: \_\_\_\_\_**

**Results of Application: \_\_\_\_\_**

**THIS SECTION TO BE COMPLETED  
BY HABITAT OFFICE ONLY!!!!**