

Habitat Helps (Repairs) | Application

building strength, stability,
self-reliance *and* shelter



hfhfanningilmer.org

Please mail your complete application to Habitat's office.
Habitat for Humanity of Fannin & Gilmer Co., Inc.
PO Box 1306
Blue Ridge, Ga 30513

Alternatively, you may scan & send your application packet to Anita Hardy:

director@hfhfanningilmer.org

Only complete applications are accepted. Please submit all required documentation in a timely manner. We will make every effort to help you along the way. We must be able to verify all of your information, including, but not limited to, who you are, home-ownership status, household income and expenses.

Details are listed on the attached "Checklist".

Questions? We're happy to schedule a call. Call/text Anita at 706-887-0922
(Please remember to leave a voicemail with detailed information if no one answers).

Date application received: _____

Received by: _____

Date of home visit: _____

Date denied/accepted: _____

Applicant Information

Name: _____ SSN: _____

Marital Status: Married Separated Single Divorced Widow Age: _____
DOB: _____

Home Phone: () _____ Cell Phone: () _____ Email: _____

Co-applicant Information

Name: _____ SSN: _____

Marital Status: Married Separated Single Divorced Widow Age: _____
DOB: _____

Home Phone: () _____ Cell Phone: () _____ Email: _____

Others Living in Applicant's Home

(1) Name: _____ Age: _____ Male Female

(2) Name: _____ Age: _____ Male Female

(3) Name: _____ Age: _____ Male Female

(4) Name: _____ Age: _____ Male Female

(5) Name: _____ Age: _____ Male Female

Employment

Applicant

Employer Name: _____

Employer Address: _____
Street Address

City State Zip

Position: _____

Number of Years Employed: _____

Co-applicant

Employer Name: _____

Employer Address: _____
Street Address

City State Zip

Position: _____

Number of Years Employed: _____

Income

List all sources of income for all adults living in the home.

Source	Annual Amount
Source	Annual Amount
Source	Annual Amount

Source	Annual Amount
Source	Annual Amount

Home to Be Repaired

Legal Owner(s) _____

Street _____ City _____

of years owned: _____ Mortgage? No Yes:

Lender Name _____ Monthly Payment _____ Balance _____

Homeowner's Insurance Provider: _____

Is the insurance paid up to date? Yes No Are property taxes paid up to date? Yes No

Requested Exterior Repairs Briefly describe the type of work you would like done on the exterior of your house. The repairs listed below will be considered, but the final decision on what work can be done with available time and financial resources will be made at the discretion of **Habitat for Humanity**. The work done will focus on safety, efficiency, and appearance and maintaining homeowner independence.

Area of Repair	Description
Exterior Painting/Siding List all exterior painting/siding needs.	
Exterior Carpentry Repairs Describe problems with floors, porches, steps, trim and exterior walls.	
Yard Work/Landscaping Identify the scope of work desired, such as removal or trimming of trees, bushes.	
General Cleaning Identify external house and yard cleaning and/or trash removal needs.	
Roof Repairs Identify if sections or the entire roof needs to be replaced. Is there currently leaking through the roof?	
Accessibility Modifications Do you need a wheelchair ramp, handrails, grab bars, etc.?	
Doors/Windows Describe repairs required, including locks, glass, frames, weather-stripping, etc.	
Electrical Repairs List non-working external wall outlets, power switches, and light fixtures.	
Other Identify necessary repairs not listed above.	

I understand that I am authorizing Habitat for Humanity to evaluate my need for assistance in repairing my home. I understand I am responsible for providing sweat equity in performing the repairs and, if I am physically unable, family and friends will complete the sweat equity requirement on my behalf. I understand that the evaluation process will include personal visits, a credit check, employment verification and sex offender registry check. I am declaring that I/we are the sole owner(s) of the property listed at the address given.

I have answered all the questions on this application truthfully and understand that if it's determined any information provided is not true, my application may be denied and I may be disqualified from the program even if I have already been selected to receive assistance. I understand the original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

Applicant Signature _____ Date _____

Co-applicant Signature _____ Date _____