



PO Box 333
Delta OH 43515
419-335-7000
director@habitatfco.org

Repair Application

Habitat for Humanity Mission Statement:
Seeking to put God's love into action, Habitat for Humanity brings people together to build and repair homes, communities and hope.

Dear Applicant:

Thank you for your interest in participating in Habitat's Repair Program. If you previously submitted a Quick-Apply Form, this is the next step in the application process. This means Family Selection would like to see documentation and gather detailed information to further evaluate your application.

There are 3 requirements that need to be met for you to submit your project to our Repair Program:

#1. Your current housing situation must be **substandard**.

#2. Your family's **gross income** (before taxes) must be between 30% and 65% of area medium income based on household size: ****please submit for our personnel to figure (don't assume based on scale).**

# IN HOUSEHOLD	1	2	3	4	5	6	7	8
MAX INCOME ANNUALLY	\$30,576	\$34,944	\$39,312	\$43,680	\$47,174	\$50,669	\$54,163	\$57,658
MIN. INCOME ANNUALLY	\$14,112	\$16,128	\$18,144	\$20,160	\$21,773	\$23,386	\$24,998	\$26,611

#3. You must be willing to **partner** with Habitat and provide "sweat equity" (volunteer) hours to the organization. You will be required to take a financial budgeting course.

Please answer the questions on this form and **POSTAL MAIL** to the Habitat Office no later than:

Habitat for Humanity of Fulton County, Ohio

PO Box 333

Delta OH 43515

Phone: 419-335-7000

Email: director@habitatfco.org

Website: www.habitatfco.org

30 days after download.

Applications are accepted and reviewed regularly. Please call the office to make sure we are in an Open Round at the time you submit your application.

Review includes required background, sexual offender, criminal and credit checks of which you must give consent in order to apply. If you meet Habitat requirements, you will be contacted about the next steps in the application process. If you DO NOT meet Habitat requirements, you will be notified via postal mail within 30 days of receiving your COMPLETED APPLICATION.

NOTE: Providing false information will immediately disqualify you.





Habitat for Humanity of Fulton County, OH

MAILING ADDRESS: PO Box 333, Delta OH 43515

PHONE: 419-335-7000

Required Application Materials

Your postal mailed New Construction or Home Repair application must include:

- Filled out and Signed Application
- Copies of last tax return (1040, 1040A, etc.)
- Copies of the last three months pay stubs for ALL family members aged 18 and over
- Copies of the last three months credit card statements
- Copies of alimony (if you choose to use this in your income to pay for your home)
- Copy of Social Security or disability benefits (if received)
- Copy of child support, on all children (if you choose to use this in your income to pay for your home)
- Copy of Food Stamp/Cash Assistance (if received)
- Copies of last three months utility bills (all)
- Copies of last three months bank statements (checking, savings, etc.)
- Copies of most recent retirement account statements (if held)
- Copies of other income and expense information not specified above (including but not limited to: phone/internet/cable, insurance, lot rent, garbage removal, etc.)
- Copies of the last three months loan statements (on any loans held, including but not limited to car loans, lines of credit, payday loans)
- Collection Debt – statements or letters stating debtors and amounts.
- Cover Letter detailing why you want to partner with Habitat, including why you need a home or home repair and how you plan to show willingness to partner with Habitat.

- REPAIR Applications must also include:
 - Proof of homeownership (Copy of deed or mortgage)
 - Description of ALL Repairs requested. *Habitat reserves the right to evaluate need, extent of damages and priority of any repair requested. Acceptance into the Habitat partnership does not guarantee all repairs requested will be completed. Additional repairs cannot be requested after acceptance or added to existing project without review and consent from Director and Selection Committee.*

Thank you for your interest in the Habitat partnership. Please call or email if you have any questions.

Heidi J. Kern

Heidi J. Kern, Executive Director

Habitat for Humanity of Fulton County, Ohio

director@habitatfco.org

419-335-7000

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 public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Washington, DC 20580.

DEADLINE GIVEN FOR POSTMARK ON APPLICATION:

30 days from
download

SECTION 1: APPLICANT INFORMATION		
Name:		
Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Do you own your home? YES NO	Monthly payment:	Year purchased?
Previous address:		
City:	State:	ZIP Code:
Are you a U.S. citizen or permanent resident? YES NO		
Are you a veteran or active member of the US military? YES NO		Military Branch:
Are you affiliated with an organization/faith-based group(s) who would be willing to volunteer on this project? YES NO If YES, what group(s)?		
Email Address:		
Name of a relative not residing with you:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
SECTION 2: CO-APPLICANT INFORMATION		
Name:		
Relationship to Applicant:		
Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Are you a U.S. citizen or permanent resident? YES NO		
Are you a veteran or active member of the US military? YES NO		
SECTION 3: APPLICANT EMPLOYMENT INFORMATION		
Current employer:		
Employer address:		
City:	State:	ZIP Code:
Position:	How long?	Phone:
Previous employer:		
Employer address:		
City:	State:	ZIP Code:
Position:	How long?	Phone:
SECTION 4: CO-APPLICANT EMPLOYMENT INFORMATION		
Current employer:		
Employer address:		
City:	State:	ZIP Code:
Position:	How long?	Phone:
Previous employer:		
Employer address:		
City:	State:	ZIP Code:
Position:	How long?	Phone: