

Application

(Check the following programs you are applying to receive)

Ramps & Rails

A Brush With Kindness



Please return to:

Habitat for Humanity of Northwest Alabama

P.O. Box 160

Guin, Alabama 35563

Office: 205-412-0501

Email: contactus@nwalhabitat.org

For Office Use Only

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.

Name

Source

Annual Amount

Name

Source

Annual Amount

Name

Source

Annual Amount

Mortgage Information

Are you making loan payments on your home? YES or NO

If yes, what is your monthly payment? \$ _____ per month.

Are your loan payments current? YES or NO

Assets

Checking Account

Financial Institution	Location	Balance
-----------------------	----------	---------

Savings Account

Financial Institution	Location	Balance
-----------------------	----------	---------

Retirement Accounts

Financial Institutions	Location	Balance
------------------------	----------	---------

Investment Accounts

Financial Institutions	Location	Balance
------------------------	----------	---------

Other Real Estate Owned

Describe	Address	Market Value
----------	---------	--------------

Loans to Others

Name	Describe	Terms	Balance
------	----------	-------	---------

Name	Describe	Terms	Balance
------	----------	-------	---------

Vehicles Owned

Make	Model	Year	Make	Model	Year
Make	Model	Year	Make	Model	Year

Loans and Debts Owed

Creditor	Current Balance	Term	Monthly Payment	Purpose
----------	-----------------	------	-----------------	---------

Creditor	Current Balance	Term	Monthly Payment	Purpose
----------	-----------------	------	-----------------	---------

Creditor	Current Balance	Term	Monthly Payment	Purpose
----------	-----------------	------	-----------------	---------

Declarations

Do you have any debt because of a court decision against you?
 Have you declared bankruptcy within the last 7 years?
 Have you had property foreclosed on in the past 7 years?
 Are you currently involved in a lawsuit?
 Are you paying child support or alimony?
 Are you a U.S. citizen or legal resident?

Applicant				Co-applicant			
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

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 Repairs:

Please check (✓) the types of repairs or modifications you are requesting for your home:

- _____ Ramp access to primary entrance of home
- _____ Hand rail to primary entrance of home
- _____ Grab bars in bathroom
- _____ Exterior painting of home
- _____ Landscaping (mowing grass, trimming hedges, cleaning flower beds, etc.)
- _____ Other exterior repairs on home. Please list specific repairs needed below:

Signatures Required:

I understand that I am authorizing Habitat for Humanity to evaluate my need for assistance in repairing my home and my ability to repay a no-interest loan for the material costs incurred. 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.

I, the homeowner, hereby grant and convey in perpetuity to Habitat for Humanity all right, title, and interest in any and all photographic images, use of homeowner's name, printed interviews or statements, and video or audio recordings made by Habitat and/or its agents, contractors, directors, employees, officers, volunteers and other representatives in the course of performing the work, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs, printed materials or

Applicant Signature

Date

Co-applicant Signature

Date

Provide the following documents when you return your application:

- Copies of Driver's License and/or Alabama I.D. for all adult family members (18 years and older)
- Divorce Decree (if applicable)
- Proof of Income (as applicable)
 - Copies of current Award Letters or most recent stubs for:
 - ▶ Social Security
 - ▶ SSI
 - ▶ Pension or Retirement
 - ▶ Disability (SSDI)
 - ▶ Child Support
 - Copies of Pay Stubs for the most recent two months

****Please note that any incomplete application or missing requested documents will result in a denial of your application.****