

DECLARATION

Are you a U.S. Citizen or a legal resident?:

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

CERTIFICATION AND AGREEMENT BY APPLICANT(S)

I/We, the undersigned, specifically acknowledge and agree that:

- All forms and copies of documents obtained to complete this application for assistance are the property of Morris Habitat for Humanity (MHfH);
- Verification and re-verification of any information contained in the application may be made at any time by the MHfH, either directly or through a credit reporting agency, from any source named in this application in any of the material facts which I/we have represented herein should it change prior to signing contracts.

Certification: I/We certify that the information provided in this application and all information furnished in support of this application are given for the purpose of obtaining financial assistance under the Morris Habitat for Humanity Home Repair Program and are true and correct as the date set forth opposite my/our signature(s) on this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties including, but not limited to, fine or imprisonment or both under the provision of Title 18, United States Code, Section 1001, et seq. and liability for monetary damages to Morris Habitat for Humanity (MHfH), its agents, successors, and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I/we have made on this application. I/We understand that any willful misstatement of material facts will be grounds for disqualification for assistance. I/We further certify that I am/we are the owner(s) and occupant(s) of the property to be repaired, and upon completion of all repairs, I/we will occupy/re-occupy this property.

Signature of applicant: _____ Date: _____

Signature of co-applicant: _____ Date: _____

OPTIONAL – RACE AND ETHNICITY

The following information concerning race and ethnicity is requested for statistical and reporting purposes only and has no bearing on the approval of this application. If you choose not to complete this section, please be advised that Morris Habitat for Humanity staff is required to note race and ethnicity on the basis of sight and/or surname.

Please check the appropriate box for your Ethnicity and Race:

Ethnicity

- Hispanic
 Non-Hispanic

Race (same race)

- White
 Black/African-American
 Asian
 American Indian/Alaskan Native
 Native Hawaiian/Other Pacific Islander

Multi-Racial

- Black/African-American and White
 Asian and White
 American Indian/Alaskan Native and White
 Native Hawaiian/Other
 Pacific Islander and Black/African American
 Other Multi-Racial _____

INTERNAL USE ONLY

Date received _____

Initial _____

APPLICATION INSTRUCTIONS

The home must be a single-family dwelling and owner-occupied low income household that demonstrates they are unable to afford the repair(s) needed. Eligible homes must pass a feasibility inspection to determine that the property is feasible for the repair project.

To apply for assistance in this program, please complete the attached Application including attachments listed below, and submit it to: **Morris Habitat for Humanity, Attention: Rich Cooke, Aging in Place Coordinator, 274 South Salem Street, Suite 100, Randolph NJ 07869 or email to rich.cooke@morrishabitat.org**

All of the following documents must be submitted before your application for assistance can be processed:

- Signed and Completed Application with your \$20 check for the application fee.
- Property insurance declarations page

Qualification Overview

- Property must be owner-occupied. The resident must be the legal owner of the property and intend to remain in the home.
- Homeowners are required to have homeowners insurance.
- The condition of the home will be reviewed and evaluated by a MHfH representative.
- The family plans to stay in the home for at least 2 years.
- As part of the sweat equity requirement, the homeowner or authorized family member must agree to be at the worksite during the entire repair project to provide mutually agreed upon assistance to MHfH.

Application Process:

- The homeowner application will be reviewed for project approval.
- If approved, property will be inspected to identify repairs and determine if the overall condition of the home is sound and a Project Supervisor assigned.
- The Project Supervisor will prepare a list of repairs with material costs, labor content, and timetable and review with homeowner for acceptance. Homeowner is responsible for cost of materials, permitting and any outside contractor costs.
- Sweat equity requirement is established and accepted prior to work commencing. The sweat equity for the family will be planned with consideration to age and physical ability of the family to help to the best of their ability. The participation of the homeowner or their representative in the project may include the following activities: painting, construction, and landscaping or meal/snack preparation.

Agreement:

Upon approval, a signed Project Agreement and Waiver between the homeowner and Morris Habitat must be in place before any work is started.

Project Planning/Execution/Considerations:

- Projects will be chosen that match our available volunteer skill base and resources.
- Project limitation: the maximum amount of repair cost is \$1,000. A homeowner could have multiple repairs, but each project is limited to \$1,000.
- Project pricing: Homeowner will be responsible for material costs, permitting fees and outside contractor costs.
- Each project will be supervised by a Project Supervisor from our staff or a trained volunteer.
- Projects will be planned in terms of getting materials, tools and volunteers for quick turn-around.
- As part of sweat equity, the homeowner or authorized family member must agree to be at the worksite during the entire repair project to provide mutually agreed upon assistance to MHfH.
- The homeowner is required to make the work area and the property safe for the workers prior to the start of work. The Home Repair Program recognizes some homeowners may be limited in assisting with property safety. The Project Supervisor, in consultation with the Director of Construction, will work with the homeowner to ensure safe work conditions.
- Each workday will be viewed as a regular Habitat workday: and may include devotions, introductions, description of project goals, and safety instructions.



Home Repair Program

APPLICATION

Date: _____

GENERAL INFORMATION

Applicant Name _____
 Address _____
 City/State/Zip _____
 Telephone (Primary) _____
 Telephone (Alternate) _____
 Email _____
 Marital Status _____
 Social Security No. _____
 Date of Birth ____/____/____
 Disability Status Yes No

Household Size

Adults _____ Children Under 18 _____

Spouse/Co-Applicant

Name _____
 Telephone (Primary) _____
 Telephone (Alternate) _____
 Social Security No. _____
 Date of Birth ____/____/____
 Disability Status Yes No
 Relationship to Applicant _____

Contact Person Not Residing with You

Name _____
 Address _____
 City/State/Zip _____
 Telephone (Primary) _____
 Email _____
 Relationship to You:
 Relative Friend Neighbor
 Other (Describe) _____

Habitat Service Being Requested

Check One:
 Aging in Place
 A Brush With Kindness (ABWK)
 Home Repair (HR)
 Weatherization
 Quick Response (QR) Please complete Sections:
 Property Information III, X and XI.

PROPERTY INFORMATION

Year your home was built: _____
 Own Your Home: Yes No
 How many years have you owned your home: _____
 Number of Bedrooms: _____
 Number of Bathrooms: _____
 Utilities: Gas Electric
 Water: Public Water Well Water Public Sewer
 Septic Tank Other _____
 Type of heating system? _____

Please describe the repairs needed

Accessibility Modifications Painting
 Carpentry Repairs Heating/Mechanical
 Electrical Repairs Doors and Windows
 Plumbing Repairs General Cleaning/
 Landscaping
 Roofing Repairs
 Other: _____

Please describe how the need for these repairs affects your health and/or safety: _____



Home Repair Program

HOUSEHOLD COMPOSITION

Name	Date of Birth	Relationship	Sex

INSURANCE INFORMATION

Do you have property insurance?: Yes No
 Insurance Company Name: _____
 Address: _____
 City/State/Zip: _____
 * Please attach proof of insurance— Declarations Page

ACKNOWLEDGEMENT OF NOTICES

Initial Below

_____ **House Access:** I/we acknowledge and agree that if approved for assistance, MHfH and/or contractors shall have access to my/our home and property for preparation of bids so that they may obtain necessary information about my/our home and the needed repairs.

_____ **Credit Check and Verifications:** I/we understand and agree that Morris Habitat for Humanity will verify all information contained in this application and check my/our credit through a national credit bureau.

_____ **Federal Equal Credit Opportunity Act:** The Federal Equal Credit Opportunity Act prohibits creditors from discriminating on the basis of race, color, religion, national origin, age, sex, marital status, whether all or part of the applicant's income is derived from any public assistance program, or if the applicant has in good faith exercised any right under the Consumer Credit Protection Act title VIII of the Civil Rights Act of 1968. Fair housing, likewise, prohibits discrimination on the basis of race, color, religion or national origin. The Federal Agency which administers compliance with this law is the Comptroller of the Currency, Consumer Affairs Division, Washington, DC 20219,

_____ **House Evaluation:** I/we understand that Morris Habitat for Humanity will conduct a feasibility assessment of my/our property for the purpose of determining whether my/our home is eligible to receive assistance. I/we understand that Morris Habitat for Humanity has maximum limits that can be spent to repair my/our home. If my/our home cannot be repaired within the maximum dollar limit allowance, I/we understand that I/we will not be eligible for the Home Repair Program.

_____ **Lead Paint Poisoning:** The pamphlet entitled "Protect Your Family From Lead in Your Home" was provided to me/us with this application and I/we hereby confirm receipt of this notice.

_____ **Photo Release:** As owner(s) of the property listed in this application, I/we understand and agree that if approved for assistance, photographs will be taken of my/our home before, during and after repair assistance is provided, and that such photos are the property and copyright ©Morris Habitat for Humanity and may be used in all media, including Morris Habitat websites, presentations, annual appeal materials, promotions and marketing materials, and Reports published by Morris Habitat for Humanity, and cannot be used for other purposes without the expressed consent of Morris Habitat for Humanity.

_____ **Right to Financial Privacy Act:** This is to notify applicant, as required by the Right to Financial Privacy of 1978 that the Department of Housing and Urban Development has a right of access to financial records held by any financial institution in connection with the consideration or administration of the rehabilitation loan or grant for which you have applied. Financial records involving your transactions will be available to the Department of Housing and Urban Development without further notice or authorization but will not be disclosed or released to another Governmental Agency or Department without your consent except as required or permitted by law.

