



2023-2024 Home Repair Application

1. APPLICANT INFORMATION

Name (please print) _____

Address _____ City _____ Zip _____

Home Phone _____ Alt. Phone _____ Email _____

List all people, including yourself, for whom the above address is their permanent residence:

Name	Social Security #	Relationship	Age	Employed? (Y/N)
	- -	(self)		<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

Has anyone listed above served in the military? yes no name(s) _____

Is anyone listed above disabled? yes no name(s) _____

2. HOME OWNERSHIP INFORMATION

Number of years at your current address: _____

Do you own and occupy this residence? yes no

Are you making mortgage payments? yes no

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

Do you possess a valid homeowner's insurance policy on the property? yes no

Are you current on your property taxes and utilities? yes no

if you answered "no" to the above, please explain:

Are you in danger of losing your home? yes no

if you answered "yes" to the above, please explain:

3. WILLINGNESS TO PARTNER

To be considered for Habitat for Humanity programs you and your household may be asked to work a certain number of hours. Your help in working on your home and the homes of others is called "sweat equity" and may include cleaning, maintenance, painting, helping with repairs working in the Habitat office, budgeting and training classes and other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT EQUITY HOURS _____
 Applicant's Signature

4. REQUESTED REPAIRS

Briefly describe all of the work that you would like to have done to your home. Attach a separate piece of paper if necessary. Remember that the items that you list will be considered for repair, but the final decision on what work can be done will be made by the staff of HFHHC. Our volunteers are not professionals and may not be able to make all repairs.

5. NEED FOR REPAIRS

IMPORTANT - Why have you decided to reach out to Habitat for Humanity to have these repairs completed? Attach a separate sheet of paper if necessary.

6. CURRENT INCOME

Please list all jobs currently held by members of your household

Name	Employer	Start Date	Pre-Tax Pay	per (circle one)			
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly
				week	biweekly	twice a month	monthly

Income other than employment

Type of Income	Amount received per month
AFDC/TANF	\$ <i>per month</i>
Food Stamps	\$ <i>per month</i>
Child Support (optional to disclose)	\$ <i>per month</i>
Disability (SSDI)	\$ <i>per month</i>
SSI	\$ <i>per month</i>
Social Security/Retirement/Pension	\$ <i>per month</i>
Other(specify)	\$ <i>per month</i>
Other(specify)	\$ <i>per month</i>
Other(specify)	\$ <i>per month</i>

7. DEBT

Please list ALL your debt, including your mortgage, loans, car payments, hospital/medical bills, credit cards, student loans and any business or store accounts (Macy's, JC Penny, Best Buy). List any existing debt, regardless of whether you are currently making payments.

Company Name	Type of Debt	Minimum Monthly Pymt.	Balance Remaining
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

8. CHECKLIST

The following is a list of information which must be received to complete your application with Habitat for Humanity of Horry County. **We can not process an application unless we receive ALL of the information listed below. Incomplete applications will be rejected.** If you need assistance in completing your application, please contact our office and we'll be happy to answer any questions. Please do not give us originals of your personal documents, as we may not be able to return them to you.

Application Attachments: <input checked="" type="checkbox"/> Check box when attached

- copy of your current mortgage statement (if applicable)
- three current, consecutive pay stubs, for each job listed in Section 6
- proof of any additional income (AFDC/TANF, Food Stamps, Social Security, SSI, Disability, Alimony, Child Support or any other income.)
- copies of previous two years tax returns. (W2s are NOT acceptable)
- proof of homeowner's insurance and recent copies of utility bills (gas/electric)
- last two months of bank statements for each account open in your name
- VETERANS ONLY:** Proof of military service (DD214 or copy of VA Card)

AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for home repairs, my ability to repay my share of the cost of repairs and my willingness to be a partner family. I understand that the evaluation will include personal visits and a credit check. I have answered all the questions on this application truthfully. I understand that if I have not answered all the questions truthfully, my application may be denied and that even if I have already been selected as a partner family, I may be disqualified from the program. The original copy of this application will be retained by Habitat for Humanity, even if the application is not approved.

Applicant Signature _____ Date _____

HOW DO I TURN IN MY APPLICATION?

1. Make sure that you have all the required documents. WE CANNOT PROCESS INCOMPLETE APPLICATIONS. Call Habitat if you have any questions.
- 2. Call Habitat at 843-650-8815, ext. 8003 to turn in your documents and complete your application**
3. Applications for Habitat programs are reviewed by a committee of volunteers to determine eligibility for services. If your application appears to fall within our guidelines, a home visit will be conducted to assess what work needs to be done.
4. If your application is approved, you will meet with Habitat to finalize the work to be done, the cost of repairs, and select a repayment plan, if needed.

FOR OFFICE USE ONLY: DO NOT WRITE IN THIS SPACE

Date Received: _____

Applicable Program(s) ABWK Weatherization Veteran's Build NR/QLP Other: