

## Critical Repair Application

Applicant Information			
Name:			
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Email:		How Many Years Have You Lived There?:	
Marital Status (Circle One): Married   Divorced   Separated   Never Married   Widowed			
1 <sup>st</sup> Mortgage Company:		Monthly Payments \$:	
2 <sup>nd</sup> Mortgage Company:		Monthly Payments \$:	
Employment Information			
Current employer:			
Employer address:			How long?
Phone:		E-mail:	
City:	State:	ZIP Code:	
Position:		Monthly (Gross) Wages:	
Co-applicant Information, if Applicable			
Name:			
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Marital Status (Circle One): Married   Divorced   Separated   Never Married   Widowed			
Other Household Members			
Name:		Date of Birth:	SSN:
Name:		Date of Birth:	SSN:
Name:		Date of Birth:	SSN:
Name:		Date of Birth:	SSN:
Name:		Date of Birth:	SSN:
Name:		Date of Birth:	SSN:
Other Income Information: (Please list ALL – Child Support, Social Security, SSI, etc.)			
Source of Income:		Monthly Income \$:	
Source of Income:		Monthly Income \$:	
Source of Income:		Monthly Income \$:	
Source of Income:		Monthly Income \$:	

### What Types of Repairs Are You In Need Of?

- |  |  |
|--|--|
| <input type="checkbox"/> Porch Repair<br><input type="checkbox"/> Exterior Door Repair and Replacement<br><input type="checkbox"/> Roof, Gutter, & Chimney Repair<br><input type="checkbox"/> Broken Window Repair<br><input type="checkbox"/> Code Violations<br><input type="checkbox"/> Plumbing Hazards<br><input type="checkbox"/> Electrical Hazards | <input type="checkbox"/> HVAC Repair<br><input type="checkbox"/> Foundation Repair<br><input type="checkbox"/> Structural Repair<br><input type="checkbox"/> Tree Hazards<br><input type="checkbox"/> Smoke Alarms<br><input type="checkbox"/> Carbon Monoxide Detectors |
|--|--|

### Check All That Apply:

- |   |   |
|---|---|
| <input type="checkbox"/> I am a veteran of the U.S. Military.<br><input type="checkbox"/> My property is owner occupied.<br><input type="checkbox"/> I am current on my property taxes. | <input type="checkbox"/> I am current on my water bill.<br><input type="checkbox"/> I, or someone in my house, is on the sexual offenders list. |
|---|---|

### Willingness to Partner

To be considered for a Habitat critical repair project, you and your family must be willing to complete a certain number of "sweat-equity" hours. Duties may include helping with construction, working in the Habitat office, working at the ReStore or other approved activities.

**Yes, I (and co-applicant, if applicable) will complete the required sweat equity hours.**

## AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Milwaukee Habitat for Humanity to evaluate my actual need for a Habitat home repair project, my ability to repay the no-interest loan and other expenses for homeownership and my willingness to be a partner family. I certify that all information provided is true and complete to the best of my knowledge and understand that MHFH will use this information to evaluate my eligibility based on credit checks, income and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that in the event if I have already been selected to receive a Habitat home repair project, I may be disqualified from the program. The original or a copy of this application will be retained by Milwaukee Habitat for Humanity even if the application is not approved. I also understand that Milwaukee Habitat for Humanity screens all potential staff (whether paid or unpaid), board members and applicant families on the sex offender registry, and that by completing this application, I am submitting myself and all persons listed on the first page of the application to such an inquiry. I further understand that by completing this application, I am submitting myself and all persons listed on the first page of this application to a criminal background check.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Date



We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin.

### Plases return this application with copies of the following documents:

- **Last 3 consecutive paycheck stubs or Form 1099 if you are self-employed**
  - Provide the last 5 paycheck stubs if paid weekly
- **12 month child support history** (payers and payees if applicable)
- **Recent Social Security Award Letter** (if applicable)
- **3 months of most recent Bank Statements**
- **Copy of most recent WE Energies Bill**
- **Copy of most recent Mortgage Statements**
- **Copy of most recent Home Equity or Home Equity Line of Credit Statements** (if applicable)
- **Copy of most recent property tax bill and water bill**
- **Copy of current homeowner's insurance declaration page**
- **Photocopy of your social security card** (for all persons in the household)
- **Photocopy of your Driver's License or State ID**
- **Military Discharge status certification DD214** (if applicable)
- **\$25 Check or Money Order payable to Milwaukee Habitat for Humanity** (non-refundable)

If you are self-employed, please submit the following:

- **2016 W-2s and Federal & State tax returns along w/Schedule C**
- **2015 W-2s and Federal & State tax returns along w/Schedule C**
- **Last 3 Month's Profit & Loss Statements**

### Return Completed Application To:

Natasha Gray, Family Services Director

Milwaukee Habitat for Humanity

3726 N Booth St, Milwaukee, WI 53212

[ngray@milwaukeehabitat.org](mailto:ngray@milwaukeehabitat.org)

414-316-5606