



A Brush with Kindness

Hub Area Habitat for Humanity
 PO Box 406
 Aberdeen, SD 57402-0460
Hubhabitat@nvc.net
 (605) 226-5492

SECTION 1 - Homeowner Information

Name of Homeowner:		Age:
Address:		Zip:
Telephone w/ area code: Home: Work:	Number of Years at this address:	
Name of neighborhood:		
List the names, ages, and relationship to homeowner of all people living in the home (attach a list if more space is needed):		
Name/relationship: _____	Age: _____	
Name/relationship: _____	Age: _____	
Name/relationship: _____	Age: _____	
Name/relationship: _____	Age: _____	

SECTION 2 – Special Needs

Is the homeowner or anyone in the home disabled? Yes No

If yes, indicate the type of disability below (check all that apply, please describe if “other”):

Blind

Use of walker, cane, or crutches: Use of wheelchair: Hearing Impaired:

Loss of limb: Mentally disabled: Other: _____

SECTION 3 – Sharing Your Personal Information

If your application is a more appropriate fit with other, similar programs, may we share it with them? Yes No

Unless you give us permission to share information with other organizations, your application will be kept confidential and will be used solely for the purpose of evaluating the acceptability of your home for repairs or refurbishment by Hub Area Habitat for Humanity.

SECTION 4 – Household Income and Mortgage Information

The *total, combined* income *before taxes* for ALL persons living in the home is: \$ _____ per **year**

You must attach verification of all HOUSEHOLD income for each adult in the house, unless a full time student (provide proof of registration) and/or benefits for children.

(For instance, a copy of the previous year’s income tax return, monthly social security statement, other retirement income statements, employment check stub; please note on the attached

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SECTION 4 – Household Income and Mortgage Information continued

statements if it represents annual, monthly, twice-monthly, bi-weekly or weekly income). **Do not submit originals – copies only.**

Are you still making loan payments on your home? Yes No

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

After paying your monthly bills (gas, electric, insurance, food, phone, medical, etc.), approx.-imately how much money do you have left to spend on house repairs?
 \$_____ / month

SECTION 5 – Homeowner’s Agreement

I certify that the information on this application is accurate and that I own the property at the address given on this application. I have no present intention to move or offer my home for sale for at least three years. I confirm that any physically able persons residing in my home or visiting for the project day will work alongside the **ABWK (A Brush with Kindness)** volunteers. I confirm that, except for the conditions listed below, my home is a safe place for volunteers.

I understand that the people who may work on my house are unpaid volunteers; that few, if any of them, are skilled in the building trades; and that **A Brush with Kindness MAKES NO WARRANTIES, EXPRESS OR IMPLIED, REGARDING ANY MATERIALS USED OR WORK DONE BY ANYONE AT MY HOUSE.** I hereby release **ABWK, Hub Area Habitat for Humanity** and all associated with it from any and all liability whatsoever.

 SIGNATURE OF HOMEOWNER

 DATE

Complete the following if you are not the homeowner, but are assisting the homeowner in completing this application.

Your Name:

Daytime telephone number:

Is homeowner aware of this application? Yes No

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SECTION 6 – House Information/Exterior			
House Information	House Exterior	Garage Exterior	
Of the following, what description is most accurate for your house: 1 story: <input type="checkbox"/> 1-1/2 story: <input type="checkbox"/> 2 story: <input type="checkbox"/> 2-1/2 story: <input type="checkbox"/> Year purchased: _____ Year built: _____ Year last painted: _____ Square feet: _____	Siding Trim Wood: <input type="checkbox"/> Wood: <input type="checkbox"/> Brick: <input type="checkbox"/> Vinyl: <input type="checkbox"/> Shakes: <input type="checkbox"/> Metal: <input type="checkbox"/> Stucco: <input type="checkbox"/> Painted stucco: <input type="checkbox"/> Asbestos/slate: <input type="checkbox"/>	Siding Trim Wood: <input type="checkbox"/> Wood: <input type="checkbox"/> Brick: <input type="checkbox"/> Vinyl: <input type="checkbox"/> Shakes: <input type="checkbox"/> Metal: <input type="checkbox"/> Stucco: <input type="checkbox"/> Painted stucco: <input type="checkbox"/> Asbestos/slate: <input type="checkbox"/>	
	What needs painting: House siding: <input type="checkbox"/> House trim: <input type="checkbox"/> (around doors, windows, overhang, etc.) Garage siding: <input type="checkbox"/> Garage trim: <input type="checkbox"/> Other: _____ _____	Aluminum: <input type="checkbox"/> Vinyl: <input type="checkbox"/>	Aluminum: <input type="checkbox"/> Vinyl: <input type="checkbox"/>
	Repairs needed on exterior: _____ _____ _____ _____ _____		
	SECTION 7 – Media and Publicity		
	Where did you learn about A Brush with Kindness? (Circle one) TV / Radio / Newspaper / Flyer / Friend / Neighbor / Neighborhood Organization Other: _____ (please describe)		
	If ABWK selects your house to be repaired, would you be willing to have your picture taken or be interviewed by media reporters? May we bring elected officials to your home? (Check all that apply)		
	Interviews and photographs: YES <input type="checkbox"/> NO <input type="checkbox"/> Visits by elected officials: YES <input type="checkbox"/> NO <input type="checkbox"/>		

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SECTION 8 – Personal Statement

Please write a *brief* explanation of why you feel you should be selected, and how it will help you.

SECTION 9 – Partner Family

The Partner Family agrees to assist with Welcoming and Registration, providing on site bathroom facilities, and providing drinking water for volunteers.

CHECKLIST

Did you complete all 8 sections of this application?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Did you sign the application? (SECTION 5)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Did you read/sign the Homeowner’s Statement of Eligibility on page 5?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Did you enclose a <u>copy</u> of the deed on your home or other proof of ownership, such as a property tax receipt? <i>All documents submitted must show name and address of applicant</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you currently have homeowner’s insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Did you include a statement verifying income? This statement can be a copy of one or of the following: tax return, social security receipts, retirement pay receipts, or other documentation of household income.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<i>All adults, over the age of 18, must have submitted an income document (or proof of current student status) showing name and address.</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

NOTE: Incomplete applications or applications submitted without the required documents will not be processed.

A Brush with Kindness is a Hub Area Habitat for Humanity program providing assistance to low-income, elderly, or disabled homeowners with outside painting, minor repairs and landscaping.

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Homeowner's Statement of Eligibility

I, _____ have asked Hub Area Habitat for Humanity - *A Brush with Kindness* to provide repairs to my home at _____ in _____, SD. I understand that Hub Area Habitat for Humanity - *A Brush with Kindness* is funded by charitable donations and grants to provide assistance to low-income homeowners who have no other means to afford home repairs. I also understand that Hub Area Habitat for Humanity - *A Brush with Kindness* is obligated to use its charitable donations only for assistance to eligible homeowners. In addition, I understand that to knowingly submit false information is considered fraud and punishable under law. By signing my name to this statement, I guarantee that I am eligible to receive this assistance as follows:

1. All the information submitted on my Homeowner Application is complete and correct. _____ *Initial*
2. I am the owner of the home at the above address. _____ *Initial*
3. This same house is my full-time residence. _____ *Initial*
4. If I sell the home before the term of the financial agreement expires, I will pay back the remaining amount owed. _____ *Initial*
5. I, my spouse, partner and/or any other owners of my home have no other financial resources to afford the services that I have requested. _____ *Initial*
6. I authorize Hub Area *Habitat for Humanity* and its representatives to complete paperwork required to obtain building permits necessary to repair my home. _____ *Initial*
7. I understand that *Hub Area Habitat for Humanity* is a neighbor-helping-neighbor organization. I will do everything possible to get my friends and family to help on the workday. _____ *Initial*
8. I am aware Hub Area *Habitat for Humanity - A Brush With Kindness* is a volunteer program. Promises cannot be made as to the specific work outside our scope will be done. I understand it may not be possible for the same volunteers to return after the initial work day. _____ *Initial*
9. I authorize Hub Area *Habitat for Humanity* to verify any information I have provided on this application, and I understand that the Aberdeen Police Department may screen my address for history of illegal activity. _____ *Initial*
10. I will take full responsibility for securing valuables located in my house when volunteers are working in my home. I understand Hub Area *Habitat for Humanity* cannot be held responsible for misplaced or broken items. _____ *Initial*

Homeowner signature:

Date:

Homeowner signature:

Date:

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FOR INTERNAL USE ONLY	
Date Received:	Date Acknowledged:
Recommendation/Action:	

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