



Helping Hands Application

Please return to:
Siskiyou Habitat for Humanity
P.O. Box 1482
Yreka CA. 96097

Office: 530-938-2612
Email: info@habitatsiskiyou.org

Applicant Name: _____

Address: _____

Address where work will be performed: _____

Phone: Cell _____ Home: _____

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.

Source Annual Amount

Source Annual Amount

Source Annual Amount

Source Annual Amount

Source Annual Amount

Source Annual Amount

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 _____

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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 Exterior Repairs

Briefly describe the type of work you would like done on the exterior of your house. The repairs listed below will be considered, but the final decision on what work can be done with available time and financial resources will be made at the discretion of **Habitat for Humanity**. The work done will focus on efficiency, safety, appearance and maintaining homeowner independence.

Area of Repair	Description
Exterior Painting/Siding List all exterior painting/siding needs.	
Exterior Carpentry Repairs Describe problems with floors, porches, steps, trim and exterior walls.	
Yard Work/Landscaping Identify the scope of work desired, such as removal or trimming of trees, bushes.	
General Cleaning Identify external house and yard cleaning and/or trash removal needs.	
Roof Repairs Identify if sections or the entire roof needs to be replaced. Is there currently leaking through the roof?	
Accessibility Modifications Do you need a wheelchair ramp, handrails, grab bars, etc.?	
Doors/Windows Describe repairs required, including locks, glass, frames, weather-stripping, etc.	
Electrical Repairs List non-working external wall outlets, power switches, and light fixtures.	
Other Identify necessary repairs not listed above.	

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.

 Applicant Signature Date

 Co-applicant Signature Date