

Habitat for Humanity Greater Newark, Inc. 58 Park Place, 4<sup>th</sup> Floor Newark, NJ 07102

# Application

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.



**Dear Applicant:** We need you to complete this application to determine if you qualify for a Habitat for Humanity Newark's Critical Repairs Program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

| confidential.   |  |  |  |  |
|---|--|--|--|--|
|   | INFORMATION  |  |  |  |
| Applicant   | Co-Applicant Co-Applicant  |  |  |  |
| FIRST name:   | FIRST name:  |  |  |  |
| LAST name:  | LAST name:   |  |  |  |
| Email   | Email  |  |  |  |
| Social Security Number Home Phone Date of Birth   | Social Security Number Home Phone Date of Birth  |  |  |  |
| ☐ Married ☐ Separated ☐ Unmarried (Incl. Single, divorced, widowed)  Dependents (people who live with you not listed by co-applicant) | □ Married □ Separated □ Unmarried (Incl. Single, divorced, widowed)  Dependents (people who live with you not listed by applicant) |  |  |  |
| Name Age Male Female  | Name Age Male Female   |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Present Address (street, city, state, zip code) ☐ Own ☐ Rent  | Present Address (street, city, state, zip code) ☐ Own ☐ Rent   |  |  |  |
| Number of years   | Number of years  |  |  |  |
|   | Than Two Years Complete the Following  |  |  |  |
| Last Address (street, city, state, zip code) ☐ Own ☐ Rent   | Last Address (street, city, state, zip code) ☐ Own ☐ Rent  |  |  |  |
| Number of years   | Number of years  |  |  |  |
|   | DO NOT WRITE IN THIS SPACE   |  |  |  |
| Date received:  | Date Letter Sent:  |  |  |  |
| More information requested? ☐ Yes ☐ No  | Date of Home Visit:  |  |  |  |
| Date Application Completed:   | Date Letter Sent:  |  |  |  |

#### 2. WILLINGNESS TO PARTNER

To be considered for the Critical Home Repairs Program, you and your family must be willing to help Habitat for Humanity of Greater Newark with occasionally promoting the program for other potential clients and their families through being featured in our newsletters, articles, e-blasts, etc. with potential photos of yourself, household members and your home.

| I AM WILLING TO PA   | ARTNER WITH HABITAT FOR HUMA  | APPLICANT:<br>CO-APPLICANT:  |  |   |
|--|---|--|--|---|
|  |   | 3. VETERAN INFORMATION   |  |   |
|  | er also a veteran?<br>surviving spouse of a vetera                              | Yes □ No □<br>n? Yes □ No □  |  |   |
| Veteran Name _   |   | Gender   | Race   |   |
| Can the veteran pro  | vide proof of general or honor  | able discharge? Yes □ No □   | 1  |   |
| How long have the  | sult of action while in service?<br>repairs been needed on the hor              | Yes□ No<br>ne?epairs?  |  |   |
| DE COSTINUES.  | 4.  | PROPERTY INFORMATION   |  |   |
|  | mortgage payment? \$ No □ Yes (If yes, pl                                       | /month Unpaid balance \$<br>ease describe, including location  |  |   |
| Is there a mortgage  | e on the land?   No  Yes  | If Yes: Monthly Payment \$   | Unpaid t   | palance \$                                    |
|  |   |  |  |   |
|  |   | MPLOYMENT INFORMATION  | THE RESIDENCE OF THE PARTY OF T | N. BARANE                                     |
|  | Applicant   |  | Co-Applicant   |   |
| Name and Address of<br>Current Employer  | Applicant Years On This Job   | The state of the s |  | Years On This<br>Job                          |
|  | Applicant   |  |  |   |
|  | Years On This Job  Monthly (Gross) Wages  |  |  | Job<br>Monthly (Gross)                        |
| Current Employer   | Applicant Years On This Job  Monthly (Gross) Wages \$                           | Name and Address of Current Employ   |  | Job  Monthly (Gross) Wages                    |
| Type of Business  Gross Monthly Income   | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business   | yer  | Job  Monthly (Gross) Wages                    |
| Current Employer  Type of Business  Gross Monthly  | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone            | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  | yer  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Type of Business  Gross Monthly Income  Base Employment  | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Type of Business  Gross Monthly Income  Base Employment Income   | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Type of Business  Gross Monthly Income  Base Employment Income  AFDC/TANF  | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Type of Business  Gross Monthly Income Base Employment Income AFDC/TANF Food Stamps  | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Current Employer  Type of Business  Gross Monthly Income  Base Employment Income  AFDC/TANF  Food Stamps  Social Security                        | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Type of Business  Gross Monthly Income  Base Employment Income  AFDC/TANF Food Stamps Social Security  SSI                                       | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Current Employer  Type of Business  Gross Monthly Income  Base Employment Income  AFDC/TANF  Food Stamps  Social Security  SSI  Disability       | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |
| Current Employer  Type of Business  Gross Monthly Income  Base Employment Income  AFDC/TANF Food Stamps Social Security  SSI Disability  Alimony | Applicant Years On This Job  Monthly (Gross) Wages \$ Business Phone  Applicant | Name and Address of Current Employ  Type of Business  6. MONTHLY INCOME  Co-Applicant  | yer<br>Other:  | Job  Monthly (Gross) Wages  \$ Business Phone |

## Critical Repairs - Read repair

- Roof repair
- Ramps or porch construction
- Drywall repair or replacement
- Plumbing repairs

### Weatherization

- Air sealing
- Duct sealing
- Insulating attics
- Replacing, and servicing, or HVAC units with Energy Star certified units

### Home Preservation □

- Painting
- Patching
- Minor repair
- Landscaping / gardening
- · Replacement of exterior building
- Fence installation or replacement

| all i               | efly describe all the work you would leepairs. Remember that the items you de by Habitat for Humanity Newark. The pe of work.   | ike done on your home<br>list will be considered  | for repair, but the final decision   | on what wor  | k can be dor  | ne will be                                  |                    |  |
|---------------------|---|---|--|--|---|---|--------------------|--|
| Are                 | ea that needs repair  | Work you wish to  | have completed   |  |   |   |                    |  |
|                     |   |   |  |  |   |   |                    |  |
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|                     |   |   |  |  |   |   |                    |  |
|                     |   | 8 D   | ECLARATIONS  |  | A 100 May 100 | CINCIPAL PROPERTY.                          |                    |  |
|                     | Please Check the I  | The second telephone  | he Following Questions For You   | and the Co-A   | pplicant.   |   |                    |  |
|                     |   |   | -  | Applicant Co-Applicant                               |   |   |                    |  |
| a.                  | Do you have any debt because of a cou   | rt decision against you?  |  | ☐ Yes  | □ No  | ☐ Yes                                       | □No                |  |
| b.                  | b. Have you been declared bankrupt within the past 7 years?   |   |  | ☐ Yes  | □ No  | ☐ Yes                                       | □ No               |  |
| C.                  | c. Have you had property foreclosed on in the last 7 years?   |   |  | ☐ Yes  | □ No  | ☐ Yes                                       | □No                |  |
| d.                  | d. Are you currently involved in a lawsuit?   |   |  | ☐ Yes  | □ No  | ☐ Yes                                       | □ No               |  |
| e.                  | e. Are you paying alimony or child support?   |   |  | ☐ Yes  | □ No  | ☐ Yes                                       | □ No               |  |
| f.                  | f. Are you a U.S. citizen or permanent resident?  |   |  | ☐ Yes  | □ No  | ☐ Yes                                       | □ No               |  |
|                     | vering "yes" to these questions does not automa   |   |  |  |   |   |                    |  |
| ır yot              | answered "yes" to any question a through e, h   |   |  |  | To the second   |   |                    |  |
| Luc                 | developed that he files this application I a  |   | ZATION AND RELEASE   |  |   |   |                    |  |
| abil<br>and<br>trut | nderstand that by filing this application, I a<br>lity to demonstrate responsible homeowned<br>a property title search. I have answered<br>hfully, my application may be denied, and<br>gram. The original or a copy of this applic | ership, and my willingnes:<br>all the questions on this<br>I that even if I have alread | s to be a partner family. I understa<br>application truthfully. I understand<br>ly been selected to receive Critical | and that the eva<br>that if I have n<br>Home Repairs | lluation will ind<br>ot answered t<br>. I may be dis  | clude perso<br>he question<br>qualified fro | onal visits,<br>ns |  |
| Арр<br><u>Х</u>     | olicant Signature   | Date  | Co-Applicant Signatur  |  |   | Date  |                    |  |
|                     | ASE NOTE: If more space is needed to ose mark your additional comments with "A  |   |  | sheet of paper                                       | attached to the   | nis applicat                                | ion.               |  |

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