



FORT BEND HABITAT FOR HUMANITY

Critical Home Repair

Fort Bend Habitat's work through the Critical Home Repair Program will include handicap accessibility modifications (wheelchair ramps, grab bars, and handrails), roof repair, floor repair, siding repair, painting, and other health and safety home repairs. Critical Home Repair is **NOT** an emergency repair program; repair work is performed as resources are available. Fort Bend Habitat will seek to utilize volunteer resources to the greatest extent possible

A. Eligibility Criteria

1. You must own the home where the repairs are to be made.
2. You must occupy the home as your primary residence.
3. You (or a member of your household) must have a need that makes the requested repairs necessary.
4. Your household income must fall between 30%-60% of A.M.F.I. (Area Median Family Income as defined by HUD Income Limits Documentation)
5. If your household income falls below 30% of A.M.F.I., Fort Bend Habitat will attempt to seek special funding for repairs.
6. Those receiving Critical Home Repair services must be present during the duration of the repair work. Any able-bodied household members must help during the project (where applicable). Other friends and family (not in the household) are also encouraged to participate.
7. If applicable, applicant must demonstrate willingness and ability to pay for project cost based on a sliding scale. *(These criteria are subject to change.)*

B. Other Information

1. We may only be able to commit to part of the repairs needed.
2. No promises of acceptance into the program are made, until a binding agreement is fully executed
3. Cost for project will include materials, contracted labor, and a processing fee
4. Upon acceptance into the program, participants must agree to a payment plan, which will begin immediately. Applicant must be current with plan to remain eligible. All pre-payments will be held in escrow until project is begun. If applicant withdraws from the program or is disqualified for any reason prior to beginning the project, 100% of escrowed funds will be returned to the applicant.
5. Applicant will receive a 25% discount on the payment amount required if full payment is received before project begins.
6. No interest will be charged
7. A Deed Restriction will be required for projects over \$1,000. The Deed Restriction will have a retention period of 5 years forgiven on a pro rata basis.
8. Participants will be required to sign a promissory note for balance of payment not paid before project completion

Paperwork Needed for Critical Home Repair Application

You will need to provide proof of total household income by providing copies of the supporting documentation listed below. Your application will be considered incomplete if copies of supporting documentation are not provided with the application. You can bring supporting documentation to our office, located at 505 Julie Rivers #150, Sugar Land, TX 77478, and we will gladly make the copies for you.

If you need assistance in completing the application, call the Fort Bend Habitat Office at (281) 403-0708 to schedule an application appointment.

Provide the following documents when you return your application:

- **Copies of Driver's License and/or Texas I.D. for all adult family members (18 years and older)**
- **Divorce Decree (if applicable)**
- **Proof of Income (as applicable)**
 - **Copies of current Award Letters or most recent stubs for:**
 - **Social Security**
 - **SSI**
 - **Pension or Retirement**
 - **Disability (SSDI)**
 - **Child Support**
 - **Copies of Pay Stubs for the most recent two months**

To Order a Social Security Statement, please call 1-866-964-6304.

(30% - 60% of Area Median Family Income AMFI)

Annual Gross Household Income (before taxes):

Household Size	No less than:	No more than:
1	\$14,256	\$32,264
2	\$16,632	\$38,016
3	\$19,008	\$42,768
4	\$23,760	\$47,520
5	\$27,799	\$51,322
6	\$31,838	\$55,123
7	\$35,878	\$58,925
8	\$39,917	\$62,726



Strengthening communities by building homes, hope, and opportunities for families to help themselves

Critical Home Repair Application

Dear Applicant: We need you to complete this application to help determine if you qualify for Fort Bend Habitat for Humanity's Critical Home Repair program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

Applicant Information

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Years at Address: _____

Do you own the home where work is to be done? YES or NO

Home Phone: _____ Work Phone: _____ Cell: _____

Date of Birth: _____

Marital Status: Married Separated Unmarried (Single, Divorced, Widowed)

Is anyone in your household a veteran? Yes No Name: _____

Seniors (Y / N) How Many? _____ Race _____

Have you every applied to Fort Bend Habitat for Humanity? _____ If yes, when? _____

Do you have pets? _____ If yes, what kind and how many? _____

Number of persons living in your home (including applicant): _____ Number of Dependents _____

Mortgage Information

Are you making loan payments on your home? YES or NO

If yes, what is your monthly payment? \$ _____ per month. Are your loan payments current? YES or NO

Do you currently have homeowner's insurance? YES or NO

Requested Repairs:

Please note the types of repairs or modifications you are requesting for your home, noting the most important (1) to least (8).

_____ Ramp access to primary entrance

_____ Hand Rail to primary entrance

_____ Grab bars in bathroom

_____ Roof repair

_____ Floor repair

_____ Plumbing

_____ Electrical

_____ Other

Personal Statement

Please write a *brief* explanation of why you are in need of Critical Home Repair services.

Anticipated Gross Monthly Income

List the names, relationship to applicant, ages, and monthly gross income of all people living in the home.

You must provide proof of all household income.

Name	Relationship	Age	Gross Monthly Income (before taxes)	Income Source (Employment Income, Social Security, SSI, Child Support, Veteran's Benefits, ect...)
	Self			

I certify that the income reported above represents 100 percent of the total monthly income for my household:

 Applicant Signature

 Date

Applicant Agreement

I, the homeowner, hereby grant and convey in perpetuity to Habitat for Humanity all right, title, and interest in any and all photographic images, use of homeowner's name, printed interviews or statements, and video or audio recordings made by Habitat and/or its agents, contractors, directors, employees, officers, volunteers, and other representatives in the course of performing the Work (described in the pre-work agreement form, to be signed before beginning any work), including, but not limited to, any royalties, proceeds or other benefits derived from such photographs, printed materials or recordings.

I hereby authorize and instruct Fort Bend Habitat for Humanity, Inc. (hereafter Fort Bend Habitat) to obtain and review my credit report. My credit report will be obtained from a credit-reporting agency chosen by Fort Bend Habitat. I understand and agree that Fort Bend Habitat intends to use the credit report for the purpose of evaluating my financial readiness for Critical Home Repair services.

I understand that by filing this application, I am authorizing Fort Bend Habitat for Humanity to evaluate my need for critical home repairs, my ability to repay a no-interest loan, and my willingness to be a partner family. I understand that the evaluation will include a home assessment and income 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 even if I have already been selected to be eligible to receive Critical Home Repair services, I may be disqualified from the program. I further understand that Fort Bend Habitat for Humanity will notify me of repairs that Fort Bend Habitat for Humanity can complete, if any. The original or a copy of this application will be retained by Fort Bend Habitat for Humanity even if the application is not approved.

Applicant Name (Print)

Applicant Signature

Date: _____

Complete the following if you are not the Applicant but are assisting the Applicant in completing the

Name

Date

Contact

Organizatio

Send completed application along with supporting documentation to:

**Fort Bend Habitat for Humanity
Attention: Critical Home Repair
505 Julie Rivers #150, Sugar Land, TX 77478

(281) 403-0708 OFFICE**