

CRITICAL / VETERAN/ AGING IN PLACE HOME REPAIR PROGRAM INFORMATION

Thank you for your interest in the Fayetteville area Habitat for Humanity's Home Repair Program. Through this program, we seek to serve homeowners who are either unable to afford or unable to complete necessary home repairs. Please see relative information about the program below.

Program Information:

1. Your application is to determine if you qualify for any of the funding that is available for critical home repairs. Even though you qualify, you will be placed on a waiting list. Funding may not be available at the time you submit your application. FAHFH Construction Team will start on your critical home repair when we reach you on the waitlist and if funding is available. It may take a very long time.
2. The FAHFH Critical Home Repair program is for CRITICAL home repairs, not general home repairs, remodels, or upgrades to functional items in your home. The Critical Home Repair must be safety/health related, structural related (e.g. roof leak, plumbing repair, flooring issue, egress/safety related, electrical wiring malfunction, HVAC, broken windows). The FAHFH Construction Team and Program Manager will determine if your repair is critical.
3. The program is slow. You may be on a waitlist for 1-3 years. This is due to the current waitlist, administrative requirements for funding oversight and FAHFH Construction Team capacity to complete current repairs. You may call to check your status at any time. But understand that the process is SLOW!
4. The repair is usually at no cost to the homeowner.
5. The budget for each repair is between \$5,000 to \$25,000 for each project. This means we often are not able to complete all the repairs requested and is dependent upon the funding you qualify for. The work to be completed will be coordinated by the Construction Team, Program Manager, and the homeowner into a Scope of Work, which specifies exactly what FAHFH will complete. FAHFH will not deviate from this work.
6. The Critical Home Repair Program generally first comes, first served. FAHFH has the discretion to prioritize projects based on health and safety, or if the organization providing the funding directs FAHFH to prioritize a project. Priority health and safety critical repairs may be put before other applicants if the critical repair impacts someone's safety or basic necessities. FAHFH, at its, discretion may prioritize an application or project before your application if that applicant is displaced due to official Health and Human Services orders or does not have basic necessities. Example, a broken window or hole in the floor would be lower priority than an applicant who has no functioning water, electric, or heating, which could severely impact that applicant's health.
7. Dependent upon the amount of the repair costs, FAHFH may put a lien on your home. This is to ensure that if you sell the home before the three-year occupancy limit is reached, FAHFH will enforce the lien to ensure that the homeowner pays FAHFH a pro-rated amount of the repair from the sale of the home. Simply, the FAHFH Repair Program is not designed for us to repair a home for you to sell it. It does NOT mean we will take your home in any capacity.
8. Projects may not be completed all at one time, and may be completed in phases, at the discretion of FAHFH Construction Team. Example, once your project is started, FAHFH may coordinate completion of the HVAC repair first. Upon completion of the HVAC repair, phase 2 may be the roof repair. FAHFH will coordinate with the homeowner and ensure that you are aware of the process.
9. Applicant Project Assessment. Note, FAHFH may assess your project early in the application process to determine the Scope and criticality of the repair, or to determine if the repair can be completed or denied. The assessment could be completed, and you will remain on the waiting list until the Construction Team gets to your project. Again, this could be a very long time between the assessment and completion of the work.



Post Office Box 3166
733 Bargain St
Fayetteville, North Carolina 28303
Telephone: (910) 483-0952

CRITICAL / VETERAN/ AGING IN PLACE HOME REPAIR APPLICATION

Thank you for your interest in the Fayetteville area Habitat for Humanity's Home Repair Program. Through this program, we seek to serve homeowners who are either unable to afford, or unable to complete necessary home repairs.

Program Requirements:

1. You must have owned and occupied the home for at least 1 year and could benefit from critical home repairs.
2. You must live within FAHFH'S service area: Cumberland, Bladen, and Sampson counties.
3. You must meet the income guidelines of household income – **SEE PAGE 4 FOR INCOME LIMITS**

Critical and Aging in place applicants-no more than 80% of the Area Median Income for your household size.

Veteran applicants-no more than 100% of the Area Median Income for your household size. **Repair qualification is dependent upon available funding for this AMI.

4. You must be current on property taxes.
5. You must be willing to partner with FAHFH by providing volunteer hours to assist in completing the work.
6. You must be unable to afford necessary home repairs, unable to complete them otherwise due to age or disability, or income circumstance.

After your application is reviewed, you will receive a letter, email, or phone call to discuss the next steps. Please notify us of any changes to your application throughout the process.

How to submit a complete repairs packet?

To qualify for the Home Repair Program, please complete the application and return it with all required documents to: **Fayetteville Area Habitat for Humanity, 733 Bargain Street, Fayetteville, NC 28303.**

1. If a question does not apply to you, mark N/A. Incomplete applications may cause a delay with processing your application.
2. Sign and date the Authorization and Release forms (***section 4 on the application***). If there are co-applicants, both must sign.
3. Submit the following documents:
 - **Government Issued/State ID Card/State Driver's License**
 - **Copy of current mortgage statement and Deed**
 - **Homeowner Insurance declaration page**
 - **Proof of Income for Entire Household** (income includes child support, rental income, SSI, Disability, retirement pension, Social Security, etc.)





Post Office Box 3166
733 Bargain St
Fayetteville, North Carolina 28303
Telephone: (910) 483-0952

- Last year's W2 and Tax Return
 - Paystubs (**8-Weekly, 4-biweekly/ twice a month, 2 monthly**)
 - Social security awards letter, Disability awards statements, Retirement statements
 - 2 consecutive months of bank statements within 1 year/12 months for all inhabitants of the home over 18 years old
- **Copy of DD214 (if applicable)**
 - VA Disability Statement if receiving benefits
 - **Insurance claim or FEMA letter (proof of hurricane damage required for disaster recovery program)**

Have you applied for other Repair Programs, or had work completed by other non-profit or North Carolina Housing Finance agencies in the past? Specifically, Fayetteville Urban Ministries Nehemiah Project, NCHFA Urgent Repair Program, programs through the City of Fayetteville, NC or the Cumberland County Repair Program

No: _____

Yes, applied (but no repair completed): _____

Yes, Repair Completed: _____





Post Office Box 3166
733 Bargain St
Fayetteville, North Carolina 28303
Telephone: (910) 483-0952

SECTION 1 – HOUSEHOLD INFORMATION

Legal Name of Homeowner(s): _____ Date of Birth: _____

Home Address: _____ City: _____ Zip: _____

Email: _____ County: _____

Telephone Numbers (please include area code):

Home: _____ Cell: _____ Work: _____

Number of Years at Address: _____ Name of Neighborhood: _____

Are you or any member of your household a Military Veteran? _____

Are you disabled? _____ (Provide documentation: VA Disability Statement, SSI Disability Statement, Doctor’s Notification)

Does anyone in the household utilize a wheelchair? _____

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: _____

Name/Relationship/Age: _____

Name/Relationship/Age: _____

SECTION 2- HOUSEHOLD INCOME AND MORTGAGE

Total **YEARLY**, Gross Household Income (before taxes) for ALL persons living in the home is: \$ _____
(Must complete for application to be accepted.)

Do you currently have a mortgage or loan on your home? **YES** **NO**

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

Do you currently have homeowner’s insurance? **YES** **NO**

Are you current on your property taxes? **YES** **NO**



| HUD FY 2024 INCOME LIMIT (CANNOT EXCEED ANNUAL AMOUNT PER HOUSEHOLD SIZE) | | | | | | | | | |
|---|----------|----------|----------|----------|----------|----------|----------|----------|------------|
| Critical Repairs and Aging in Place Applicants- Max 80% | | | | | | | | | |
| Household Size | <u>1</u> | <u>2</u> | <u>3</u> | <u>4</u> | <u>5</u> | <u>6</u> | <u>7</u> | <u>8</u> | County |
| | \$42,200 | \$48,200 | \$54,250 | \$60,250 | \$65,100 | \$69,900 | \$74,750 | \$79,550 | Cumberland |
| | \$41,100 | \$46,950 | \$52,800 | \$58,650 | \$63,350 | \$68,050 | \$72,750 | \$77,450 | Sampson |
| Veteran Applicants- Max 100% | | | | | | | | | |
| Household Size | <u>1</u> | <u>2</u> | <u>3</u> | <u>4</u> | <u>5</u> | <u>6</u> | <u>7</u> | <u>8</u> | County |
| | \$52,800 | \$60,300 | \$67,800 | \$75,300 | \$81,400 | \$87,400 | \$93,400 | \$99,400 | Cumberland |
| | \$51,400 | \$58,700 | \$66,000 | \$73,300 | \$79,200 | \$85,100 | \$90,900 | \$96,800 | Sampson |

SECTION 3- SERVICES REQUESTED

Level of assistance is grouped into three different Tiers. FAHFH construction team will assist with determining the level of assistance.

| | | |
|---|---|---|
| <input type="checkbox"/> TIER 1 Minor exterior repairs painting, caulking Minor carpentry repairs deck/stair/ramp repairs Exterior weatherization only- siding repairs, minor roof and fascia repairs | <input type="checkbox"/> TIER 2 Major exterior repairs Major carpentry repairs, deck/stair/ramp replacement Door replacement Window replacement Major landscaping repairs | <input type="checkbox"/> TIER 3 Major roof repairs including plywood sheathing, flashing, tar paper, shingles and drip edges, full tar paper/shingle removal and replacement. HVAC Replacement Interior Repairs- to include sheetrock, plumbing, electric, flooring, cabinets |
|---|---|---|

NOTE: Fayetteville Area Habitat for Humanity (to include sub-contractors) will **NOT** perform any work that is considered a change to the layout or remodeling of the home. _____ (Initial for Homeowner Acknowledgement)

Briefly describe the damage to your home and the repair assistance requested:



Post Office Box 3166
733 Bargain St
Fayetteville, North Carolina 28303
Telephone: (910) 483-0952

SECTION 4- 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 shall remain the owner and occupier of this address which shall remain my primary residence for a period of no less than three (3) years (36 months) or up to five (5) years (60 months) as a Veteran from the date of completion of the home repairs, dependent upon funding sources for my home repair. This may be specifically identified by the funding used and can change. _____ (Initial for Homeowner Acknowledgement)

I confirm that any physically able persons residing in my home or visiting for the project day(s) will work alongside FAHFH employees and volunteers, if requested.

I confirm that, except for the conditions listed above, my home is a safe place for volunteers.

I understand that if my home is selected to be repaired, photos of me, my family members and my home may be taken and used publicly.

To the extent permitted by law and without affecting the coverage provided by the required homeowner's insurance, I agree to sign the release and waiver of liability.

Signature of Homeowner

Date

Questions? Call (910) 483-0952 or Email grace@fayettevillenchabitat.org or deja@fayettevillenchabitat.org

Where did you learn about the Fayetteville Area Habitat for Humanity Home Repair program? (circle all that apply)

TV Radio Newspaper Flyer Postcard Friend Neighbor Neighborhood Organization
Other (Please describe): _____

Are you willing to be interviewed by the media? YES NO

May we bring elected officials to your home? YES NO

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

Name: _____ Daytime phone number: _____





Post Office Box 3166
733 Bargain St
Fayetteville, North Carolina 28303
Telephone: (910) 483-0952

Relationship: _____ Email Address: _____

Is the homeowner aware of this application? **YES** **NO**

SECTION 5- PHOTO/ VIDEO- MEDIA RELEASE FORM

I, (please print), _____ grant permission to Fayetteville Area Habitat for Humanity and its agents and employees the irrevocable and unrestricted right to reproduce the photographs and/or video images taken of me, or members of my family, for the purpose of publication, promotion, illustration, advertising, or trade, in any manner or in any medium.

I hereby release Fayetteville Area Habitat for Humanity and its legal representatives for all claims and liability relating to said images or video.

Furthermore, I grant permission to use my statements that were given during an interview, with or without my name, for the purpose of advertising and publicity without restriction.

I waive my right to any compensation.

I acknowledge that I am:

- Over the age of 18
- The legal guardian of the following:

Full Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Names and Ages of Minor Children:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Signature: _____ Date: _____





Post Office Box 3166
733 Bargain St
Fayetteville, North Carolina 28303
Telephone: (910) 483-0952

**Applicant Screening Demographics
(For Reporting Purposes Only)**

Effects of Nondisclosure:

Providing the below information is voluntary and has no bearing on approval or denial

Please check all boxes that apply to you below:

Gender: Male Female Other

Race/Ethnicity: White Black or African American Native American/Alaskan Native
 Asian Native Hawaiian/ Other Pacific Islander Hispanic or Latino
 Not Hispanic or Latino

Disability: Yes, I have a disability No, I do not have a disability

Age: Under 18 18-29 30-49 50-64 65+

Veteran: Yes No Retired Veteran

Education:

High School/GED College (attending) College Degree: 2 YR and/or 4 YR (circle)

****By my signature I/we affirm that the above information is true and correct. I understand that providing false information could cause me not to qualify for home repair assistance from Fayetteville Area Habitat for Humanity.**

Applicant Sign Here: _____

Co-Applicant Sign Here: _____

**** By signing below, I/We acknowledge that completion of this application does not guarantee acceptance into the Fayetteville Area Habitat for Humanity Repair program.**

Applicant Sign Here: _____

Co-Applicant Sign Here: _____

*****OFFICE USE ONLY:**

Return date: _____ Staff initials: _____

