



## HOME REPAIR APPLICATION

Thank you for your interest in 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 own and occupy a home that is at least 10 years old and could benefit from exterior improvements.
2. You must live within a designated service area: Cumberland, Bladen, and Sampson counties.
3. You must meet the income guidelines of household income -- no more than 80% of the Area Median Income for your household size. Disabled and Veteran applicants Area Median Income for household size is authorized up to 100%.
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 and unable to complete them otherwise due to age, disability, or circumstance.
7. You must pay the applicable tier fee Fayetteville area Habitat for Humanity, in accordance with your requested repairs.

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.

All information that you provide will be held in strictest confidence. After your application is reviewed, you will receive a letter, email, or phone call to discuss the next steps and important information. Please notify us of any changes to your application throughout the process.

### Instructions:

1. Complete the application. If a question does not apply to you, mark N/A. Incomplete applications cause delays. Attach additional sheets as needed.
2. Sign and date the Authorization and Release forms (section 4 on the application). If there are co-applicants, both must sign.
3. Enclose copies of the following documents (Do not send originals!):
  - Government Issued/State ID Card/State Driver's License
  - Copy of current mortgage statement or Deed
  - Homeowner insurance declaration page
  - Proof of Income for Entire Household (e.g. W2, paystub, social security awards letter, disability awards statements, retirement statements, or bank deposit statement showing deposit)
  - Copy of DD214 (Veterans only) (VA Disability Statement if receiving benefits)
  - Insurance claim or FEMA letter (proof of hurricane damage required for disaster recovery program)

*\* Some information may not be applicable depending on funding source\**





**SECTION 1 - HOMEOWNER 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 a family member) a Military Veteran? \_\_\_\_\_ Are you disabled? \_\_\_\_\_

Documentation Required: VA Disability Statement, SSI Disability Statement, Doctor’s Notification

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 INFORMATION**

The total, combined income before taxes for ALL persons living in the home is: \$ \_\_\_\_\_ per year. (Must be filled in for application to be accepted.)

You must attach a copy of your most recent Federal Income Tax forms (i.e. IRS form 1040) for verification of HOUSEHOLD income, if taxes are filed.

Are you still making loan payments 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



**ABILITY TO PAY - INCOME GUIDELINES:**

**HUD FY 2023 INCOME LIMIT GUIDELINES (updated June, 2023)**

MEDIAN FAMILY INCOME									COUNTY
Persons in Family:	FY 2022 INCOME LIMIT CATEGORY								
	1	2	3	4	5	6	7	8	
<b>Very Low (30.1-50%) Income Limits (\$)</b>	24,700 24,250	28,200 27,700	31,750 31,150	<b>35,250</b> <b>34,600</b>	38,100 37,400	40,900 40,150	43,750 42,950	46,550 45,700	<b>Cumberland Bladen &amp; Sampson</b>
<b>Extremely Low (0-30%) Income Limits (\$)</b>	14,850 14,580	19,720 19,720	24,860 24,860	<b>30,000</b> <b>30,000</b>	35,140 35,140	40,280 40,150	43,750 42,950	46,550 45,700	<b>Cumberland Bladen &amp; Sampson</b>
<b>Low-Moderate (50.1-80%) Income Limits (\$)</b>	39,500 38,750	45,150 44,300	50,800 49,850	<b>56,400</b> <b>55,350</b>	60,950 59,800	65,450 64,250	69,950 68,650	74,450 73,100	<b>Cumberland Bladen &amp; Sampson</b>

**SECTION 3- SERVICES REQUESTED**

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

<p align="center"><input type="checkbox"/> <b>TIER 1</b></p> <p>Minor exterior repairs painting, caulking</p> <p>Minor carpentry repairs deck/stair/ramp repairs</p> <p>Exterior weatherization only- siding repairs, minor roof and fascia repairs</p> <p align="center"><b>\$100 FEE</b></p>	<p align="center"><input type="checkbox"/> <b>TIER 2</b></p> <p>Major exterior repairs</p> <p>Major carpentry repairs, deck/stair/ramp replacement</p> <p>Door replacement Window replacement</p> <p>Major landscaping repairs</p> <p align="center"><b>\$200 FEE</b></p>	<p align="center"><input type="checkbox"/> <b>TIER 3</b></p> <p>Major roof repairs including plywood sheathing, flashing, tar paper, shingles and drip edges, full tar paper/shingle removal and replacement.</p> <p>HVAC Replacement</p> <p>Interior Repairs- to include sheetrock, plumbing, electric, flooring, cabinets</p> <p align="center"><b>\$250 FEE</b></p>
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**NOTE:** Fee may not be applicable dependent upon funding utilized. 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:

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**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 (if stipulated by the funding source).

**I shall remain the owner and this address shall remain my primary residence for a period of no less than three (3) years (36 months)  and up to five (5) years (60 months)  from the date of completion of the home repairs, dependent upon funding sources for my home repair.**

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.

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**

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 media?    YES    NO

May we bring elected officials to your home?    YES    NO

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

Name: \_\_\_\_\_ Daytime phone number: \_\_\_\_\_

Is the homeowner aware of this application?    YES    NO

**Questions? Call (910) 483-0952 or Email [office@fayettevillenchabitat.org](mailto:office@fayettevillenchabitat.org).**





**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: \_\_\_\_\_





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: \_\_\_\_\_

