

COVER LETTER

for the

REPAIRS CORPS PROGRAM

Dear Repairs Corps Applicant:

Habitat for Humanity of Greater Cincinnati is accepting applications from interested and qualified families for our **Repairs Corps program**. If you are interested, please continue reading about what is required. **The enclosed application must be filled out completely and should also include all information requested on the checklist included on the last page of this application.**

Habitat for Humanity of Greater Cincinnati is a local affiliate of a national and international organization which builds and rehabilitates homes and then sells those homes to those who lack decent and affordable housing. Because labor is sometimes donated, the cost of constructing and rehabilitating homes is kept low. **However, as part of the Repairs Corps, we will be completing home repairs that range from minor outside repairs to critical home repairs. Each of our repair programs offer a variety of repayment options. Please fill out the application completely so that we can best determine which of our repair programs would best meet your needs.** In order to keep the cost of repairs affordable to those most in need, no interest will be charged on any home repair loan. Loan repayment plans will be structured on a case by case basis taking into consideration the entire household income and current debt obligations. The applicants selected for the Repairs Corps Program are required to invest 16 hours of labor as sweat equity preferably engaging in the repairs for their homes, assisting volunteers with the repair on their home or even working at Habitat build sites or ReStores.

Applicant (s) must be willing to provide a photograph and brief description of family and the details of needed repairs for their home and be willing to this information possibly being shared as promotion for this program.

There are three primary criteria for selection of Habitat Repair Corp Partner Families:

- 1) A qualifying critical repair which threatens the health, safety, access (in the case of disability), or ownership (i.e. code violations) of the home OR minor exterior repairs that are needed such as painting, gutter repairs, etc.
- 2) Ability to make regular monthly payments to repay any 0%, interest free loan. For Veterans that are honorably discharged, there is no charge for repairs
- 3) Partnering with Habitat by agreeing to provide family photograph and personal biography and earning the required sweat equity.

Since Habitat receives far more applications than the number of homes it will be able to repair, this process is competitive. Only the applicant(s) who best meet the above criteria will be chosen.

Applicant's total household income must qualify them as "low income" by having a total household income that is at or below 80% of the median income as stated by HUD income guidelines for Cincinnati area residents. For Habitat, ability to keep up payments means that the family will not require more than 40% of its monthly income to pay all debts (including the estimated repair payment). In addition, you are not eligible to be considered for a Habitat home if you have filed bankruptcy **until** three years have lapsed from the date of discharge.

The applicant may have to accept a lien for the amount of the cost of repairs being placed on their property until the amount of their repair loan has been paid in full. At that time, Habitat for Humanity will release the lien.

Habitat's Family Selection Committee reviews applications and eliminates any applicants clearly not eligible under the criteria. **Applicants with excessive uncollected debt, bankruptcy within the last 3 years and/or a felony in the last 5 years may be automatically denied.**

If you're interested in applying, please fill out the enclosed application and "Applicant Agreement," and attach the requested information.

MAIL APPLICATION TO:
HABITAT FOR HUMANITY OF GREATER CINCINNATI
4910 Para Drive
CINCINNATI, OHIO 45237

Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580.

Notice: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law

Habitat for Humanity of Greater Cincinnati Repairs Corps APPLICATION

FAMILY COMPOSITION

NAME OF APPLICANT: _____
Last First Middle

NAME OF CO-APPLICANT (IF APPLICABLE) _____
Last First

ADDRESS: _____
Street City Zip

HOME TELEPHONE #: _____ WORK TELEPHONE #: _____

MARITAL STATUS: Married Widowed Divorced Separated Single

IS ANYONE IN HOUSEHOLD A VETERAN OF U.S. ARMED FORCES? Yes or No (please circle)

IF YES TO THE ABOVE QUESTION, PLEASE COMPLETE THE FOLLOWING:

WAS VETERAN HONORABLY DISCHARGED? Yes No

BRANCH OF SERVICE _____ HIGHEST RANK _____

PLEASE PROVIDE COPY OF FORM: DD214 TO VERIFY DISCHARGE STATUS

List all persons including applicant, who reside at the above address.

NAME (Head of Household) _____ SOCIAL SECURITY # _____

RELATIONSHIP TO HOH _____ BIRTHDATE _____ SEX _____

NAME _____ SOCIAL SECURITY # _____

RELATIONSHIP TO HOH _____ BIRTHDATE _____ SEX _____

NAME _____ SOCIAL SECURITY # _____

RELATIONSHIP TO HOH _____ BIRTHDATE _____ SEX _____

NAME _____ SOCIAL SECURITY # _____

RELATIONSHIP TO HOH _____ BIRTHDATE _____ SEX _____

NAME _____ SOCIAL SECURITY # _____

RELATIONSHIP TO HOH _____ BIRTHDATE _____ SEX _____

(Add an extra sheet if needed)

EMPLOYMENT INCOME

List all current employment for all household members, over the age of 18, (excluding minor dependent children and dependents that are full-time students.) Include self-employment earnings.

HOUSEHOLD MEMBER	EMPLOYER'S NAME and ADDRESS	GROSS EARNINGS per MONTH (Before taxes or deductions)
		\$
		\$
		\$

OTHER INCOME

Examples: Retirement Income, VA Benefits, Social Security, SSI, pensions, disability, y, child support, annuities, dividends, income from real estate.

HOUSEHOLD MEMBER	SOURCE OF INCOME	GROSS EARNINGS per MONTH (Before taxes or deductions))
		\$ per
		\$ per
		\$ per

ASSETS

Please complete the following information below:

Checking Account Number:	Bank Name:	Current Balance: \$
Savings Account Number:	Bank Name:	Current Balance: \$

Do you own any stocks or bonds? YES NO If yes, what is the current market value? \$
 Do you have any retirement accounts? YES NO If yes, what is the current market value? \$
 Do you own other real estate other than your current home? YES NO

If yes, what is the current market value? \$ _____

HOUSING DATA

Is home owned by the Applicant/Co-Applicant YES NO

If the home the primary residence of the Applicant/Co-Applicant YES NO

Length of time in present home _____ years Age of present home _____

Number of Bedrooms in home _____ Number of Bathrooms _____

PLEASE LIST BELOW THE URGENT CRITICAL REPAIRS AND/OR MODIFICATIONS THAT YOU FEEL ARE NEEDED FOR YOU HOME.

Are there any code violations or citations against the property from your local community? YES NO

If yes, please provide brief description below for each citation and attach copies of these to the application.

Are there any mortgage(s) on this residence? YES NO

If yes, provide the lending institution, monthly payment and principal balance due for each mortgage?

LENDING INSTITUTION	MONTHLY PAYMENT	PRINCIPAL PAYMENT
_____	_____	_____
_____	_____	_____

Are there any other liens on the residence? If yes, please list the name of the lien holder and amount due?

HOLDER OF LIEN	AMOUNT DUE
_____	_____
_____	_____

Name and Address of Mortgage or Land Contract Holder: (NAME) _____

(ADDRESS) _____

Mortgage Account # _____

Mortgage or Land Contract Monthly Payment \$ _____

Are Property Taxes and Homeowners Insurance included in Monthly Payment? YES NO

If No, Property Taxes (Current Year) \$ _____

Is the Home Insured? YES NO

Homeowners Insurance Premium Amount (Current Year) \$ _____

Average Monthly Utility Costs: \$ _____

OTHER LIABILITIES

1. Have you been obligated or are you presently obligated on a home loan or a home improvement loan which resulted or is resulting in foreclosure, deed in lieu of foreclosure, or judgement?
YES NO If Yes, explain: _____

2. List the unpaid balances of any automobiles, home improvements, life insurance, personal and other installment loans. Also, list all unpaid balances of any credit card accounts.

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

3. Have you filed for bankruptcy within the past three years? YES NO (It must be 3 years from date of discharge for your application to be considered)

4. Have you, or anyone in your household over age 18, been convicted of a felony? YES NO
Please list date and conviction below.

(Must be five years from date of any felonies for application to be considered.)

5. Do you have any debt because of a court decision against you? YES NO
Are you currently involved in a lawsuit? YES NO
Are you paying alimony or child support? YES NO

If yes to any of the above, please send in documentation stating current amounts due and/or paid.

PARTNERSHIP

To be considered for the Repairs Corps program, you and your family must be willing to invest 16 hours of sweat equity assisting with the repair.

Are you, and your family, able and committed to investing 16 hours of sweat equity? YES NO

Are you willing to provide a family photograph and a brief 1/2 page biography that details brief description of family and an overview of the repairs required for your home? YES NO

CHECKLIST

The following documentation is attached to my application

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Copies of (2) of the following documents for the Applicant and Co-Applicant: Driver’s License, Permanent Resident Card (Green card), social security card, State phot I.D., Passport |
| <input type="checkbox"/> | <input type="checkbox"/> | Wage income records for the prior three months for every person in household over age 18. |
| <input type="checkbox"/> | <input type="checkbox"/> | Verification of “other” income such as Social Security, VA Benefits, pensions, SSI, retirement, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | Copy of current Federal Tax Return |
| <input type="checkbox"/> | <input type="checkbox"/> | Current checking account statement for each checking account. |
| <input type="checkbox"/> | <input type="checkbox"/> | Current statement for any savings accounts. |
| <input type="checkbox"/> | <input type="checkbox"/> | Current statement for all mortgages(s) on your home |
| <input type="checkbox"/> | <input type="checkbox"/> | Proof of Homeowner’s Insurance (or reason why insurance has lapsed) |
| <input type="checkbox"/> | <input type="checkbox"/> | Current statements for all monthly debts (auto, auto insurance, credit cards, loans, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Prior month’s utility bill |
| <input type="checkbox"/> | <input type="checkbox"/> | Current statement for any Whole Life Insurance policies. |
| <input type="checkbox"/> | <input type="checkbox"/> | Signed W-9 Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Copy of Form DD214 to verify honorable discharge from military service for any Veteran living in the household If you would like to be considered for other source of possible repair funds. |

APPLICANT CERTIFICATION

I/WE DO HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE, AND INQUIRIES MAY BE MADE TO VERIFY THE STATEMENTS MADE HEREIN. I UNDERSTAND THAT PROVIDING FALSE INFORMATION WILL RESULT IN DENIAL OR TERMINATION FROM THE HOUSING REHABILITATION PROGRAM.

Applicant Signature

Date

Applicant Signature

Date

HOLD HARMLESS AGREEMENT

This Hold Harmless Agreement is entered into between HABITAT FOR HUMANITY OF GREATER CINCINNATI, hereinafter "Promisee" and _____ hereinafter "Promisor", on this ____ day of _____, 20__, in Cincinnati Ohio.

Recitals

WHEREAS; The Promisee has been retained by the Promisor for the purpose of performing critical home repairs to the real property located at _____, hereinafter "Worksite".

WHEREAS; The Promisee has agreed to a clearly outlined scope of work and understands the guiding premises of this program as a repair program as opposed to a rehab or restoration program.

WHEREAS; The Promisee may need to run tests for the presence of potentially harmful environmental conditions including but not limited to lead, mold, or asbestos to ensure the safety of subcontractors, volunteers, staff, or other affiliates on the Worksite and to inform the prioritization of repairs.

WHEREAS; The Promisee is accepted on good faith to have attempted to abate with the funds and resources available the harmful environmental conditions found in order of magnitude from greatest to least.

WHEREAS; The Promisee may make known to the Promisor the presence of potentially harmful environmental conditions which the Promisee may subsequently be unable to abate.

WHEREAS; This agreement will attach as addenda to the COST OF REPAIR AGREEMENT signed by the Promisor prior to any work being done at the Worksite.

Agreement

FOR VALUABLE CONSIDERATION, it is hereby acknowledged, that the Promisor and Promisee agree as follows: The Promisor will hold the Promisee harmless of any claims, suits, judgments, attorney fees and court related costs, and damages of any type relating to injury to person or property from unabated harmful environmental conditions made known to them by the Promisee as outlined in the "Recitals" section. Any legal costs incurred by the Promisee to defend any actions made by a third party, will be repaid by the Promisor.

Signed: Promisee Date

Signed: Promisor Date

Signed: Promisor Date

MEDIA RELEASE

WHEREAS;

I hereby grant Habitat for Humanity of Greater Cincinnati, its partners, and its affiliates permission to use my, my spouse, or my minor child's likeness in a photograph and/or video in any and all its publication, including press and website entries, without payment or any other considerations.

I irrevocably authorize the above mentioned to alter, edit, copy, exhibit, publish, or distribute this photo for purposes of publicizing and promoting Habitat for Humanity of Greater Cincinnati, its partners, or its affiliates. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to any royalties or other compensation arising or related to the use of the photograph.

I hereby hold harmless and release and forever discharge Habitat for Humanity of Greater Cincinnati, its partners, affiliates, or any person officially representing HFH from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other person acting on my behalf or on the behalf of my estate, have or may have by reason of this authorization..

CONSENT;

I have read and understand the provisions of this document. I fully enter into and agree to the above release.

Print: Signed: Date:

Print: Signed: Date:

Third Party Authorization Form

The Applicant and Co-Applicant (if any) named below (individually and collectively, "Applicant"), authorize Habitat for Humanity of Greater Cincinnati to appropriate third parties in order to complete the necessary work on the home and/or to promote the partnership and collaboration with Repairs Corps.

(individually and collectively, "Third Party") to share, release, discuss, and otherwise provide to and with each other public and non-public personal information contained in or related to the application for home ownership of the Applicant. This information may include (but not limited to) the name, address, telephone number, social security number, credit score, income, government monitoring information, application status, account balances, and program eligibility of the Applicant.

Habitat for Humanity of Greater Cincinnati will take reasonable steps to verify the identity of a Third Party, but has no responsibility or liability to verify the identity of such Third Party. Habitat for Humanity of Greater Cincinnati also has no responsibility or liability for what a Third Party does with such information.

This Third Party Authorization is valid when signed by all Applicants and Co-Applicants named on the application for home ownership. This Third Party Authorization is terminated when Habitat for Humanity of Greater Cincinnati receives a written revocation signed by any Applicant or Co-Applicant.

I understand and agree with the terms of this Third Party Authorization:

Applicant: _____
Printed Name

Signature

Date

Co-Applicant: _____
Printed Name

Signature

Date