



Raritan Valley
Habitat
for Humanity®

Preliminary Home Repair Application

Send applications **and copy of last filed tax returns** by

US Mail to:

Raritan Valley Habitat for Humanity

Homeowner Services

PO Box 330, Pluckemin, NJ 07978

Homeownerservices@rvhabitat.org

908-704-0016, ext. 100

HOUSEHOLD INFORMATION

Applicant (legal name):	Birth Date:	Gender:
Email:	Phone #:	
Co-Applicant (if applicable):	Birth Date:	Gender:
Email:	Phone #:	

OTHER HOUSEHOLD RESIDENTS

Name	Relationship	Birth Date
Name	Relationship	Birth Date
Name	Relationship	Birth Date
Name	Relationship	Birth Date

HOME INFORMATION

Address	Unit #	
City	State	Zip
Do you currently own this home?	Yes	No
Is this home your primary residence?	Yes	No
Was this home built before 1978?	Yes	No
Are there other listed owners besides the applicant and co-applicant? (If yes, please list)	Yes	No
Have you received repair help from us before? If so, when? _____	Yes	No
Do you expect to move within the next year? (If so, please list reason for moving)	Yes	No

DEMOGRAPHICS

The following information is requested by the Federal Government to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race, ethnicity, and gender of applicants based on visual observation or surname.

Are you or any household members currently serving or have any household members ever served in the U.S. military? (Yes/No)	Do you or any household members have a disability? (Yes/No)
Race (Please Circle Applicable): Black/African American, White, Asian, Native Hawaiiin/Pacific Islander, Rather Not Say	Ethnicity (Please Circle Applicable): Hispanic or Latino, Not Hispanic or Latino, Rather Not Say

ANNUAL INCOME

Gross Annual Income	Applicant	Co-Applicant	Other Resident	Other Resident
Estimated Annual Wages Primary Job				
Estimated Annual Wages Secondary Job				
Pension				
Social Security				
Unemployment				
Supplemental Security Income (SSI)				
Child Support Income				
Alimony/Spousal Support Income				
Other (specify):				
Other (specify):				

Applicant Name: _____

HOME REPAIRS NEEDED

Please describe the repairs you are requesting next to the Area of Repair, otherwise leave section blank. Raritan Valley Habitat for Humanity may be unable to complete all of repairs requested and prioritize repairs to complete based on homeowner affordability and the repair's effect on the safety, accessibility and/or preservation of the home.

AREA OF REPAIR	DESCRIPTION
Accessibility Modifications (Examples: wheelchair ramp, bathroom grab bars, handrails, etc.):	
Interior Repairs: Describe problems with flooring, walls, ceilings, etc.	
Doors and Windows: Describe any repairs to locks, glass, frames, weather-stripping, etc.	
Roofing Repairs: Identify where roof leaks. How many years has it been since the roof was replaced?	
Exterior Repairs: Describe repairs required, including siding, skirting, painting, steps, etc.	
Electrical/Plumbing/Appliances: Identify any wall outlets, light fixtures, sink or toilet leaks, stove, refrigerator, hot water heater repairs.	
Other: Identify other repairs requested but not listed above.	
Please share how these repairs will help improve your quality of life and/or the quality of the home.	

Applicant Name: _____

HOMEOWNER ACKNOWLEDGEMENT

I understand that by filling this application, I am authorizing Raritan Valley Habitat for Humanity (RV Habitat) to evaluate my need for repairs and my willingness to participate in the RV Habitat repair program. I understand that the evaluation may include, but my not be limited to visits to my current housing from Habitat representatives. I have answered all the questions on this application truthfully . I understand that if I have not answered the question truthfully, my application may be denied. I also understand that if I am selected into the RV Habitat repair program, I may be disqualified if my situation changes or if any information I provided or RV Habitat obtains, is false or misleading. The original or a copy of this application may retained by RV Habitat even if the application is not approved.

I understand that RV Habitat is a nonprofit organization that depends on volunteers. RV Habitat does not guarantee that it will be able to meet the needs of every applicant. We will prioritize and select applications as necessary based on factors including urgency of repair/cleanup and ability of repair crews available.

Applicant Signature

Date

Co-Applicant Signature

Date

Applicant Name (Print)

Co-Applicant Name (Print)

This institution is an Equal Opportunity Provider. Raritan Valley Habitat is pledged to the letter and spirit of U.S. and State of NJ policy for the achievement of equal housing opportunity throughout the nation. Raritan Valley Habitat does not discriminate against any person on the basis of race, religion, color, national origin, ancestry, nationality, marital or domestic partnership or civil union status, familial status, sex, gender identity or expression, sexual orientation, age, disability, source of lawful income, receipt of public assistance, because an individual has exercised a right under the federal Consumer Credit Protection Act, or any other characteristic or class protected by federal or state statute with regard to housing.

