

Partnerships for Affordable Homes, Inc., dba



P O Box 1064, Carbondale, IL 62903, Phone 618-457-8480

SHORT FORM APPLICATION FOR MINOR HOME REPAIR PROGRAM (Short Form is used for Projects under \$250 and no financial assistance requested)

Applicant Information:

Name: _____ Date: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell/Work Phone: _____

Do you own your home? Yes / No Do you have Homeowner's Insurance? Yes / No

Home Occupants:

Name:	Age:	Relationship to Homeowner:
_____	_____	_____
_____	_____	_____

Family Employment & Income:

Please list all sources of income for your household. (include salaries, retirement, disability, social security, alimony, child support, etc...)

Name of Income Source	Amount Received Monthly
_____	_____
_____	_____
_____	_____
Total collective household monthly income:	_____

Requested Minor Repairs: (Estimated cost of materials must be less than \$250)

Please give a detailed description of the repairs you require. Describe the work that needs to be done, reasons the repairs are necessary, and the desired end result. Attach additional pages (and pictures) if necessary. Estimated amount requested \$ _____.

Are you able to provide some of the labor necessary to complete your repair project:
(you, family, friends, neighbors, etc.) Yes / No

Are you able to offer any other support to Habitat volunteers while they work on your repair project? Yes / No

If approved, are you able to contribute money towards the cost of materials for your repair project? Yes / No

If yes, how much are you willing to contribute? 100% 50% other ____%. When will you pay for the materials? _____. A minimum of 50% is suggested upon completion of work. The balance should be paid as soon as possible, but no longer than three months from completion of work.

Do you already have some (or all) of the materials needed to complete your home repairs?
Yes / No

How long do you plan to stay in this home? _____

Homeowner Agreement

I certify that the information provided on this application is accurate. I agree to offer assistance and support to Habitat, and to the volunteers who complete my minor home repair project, to the best of my ability.

I understand that the labor for this program will be completed by unpaid volunteers. I understand that the Jackson Union County Habitat for Humanity offer no warranties, expressed or implied, regarding any of the materials used or work completed during this project. I hereby release Jackson Union County Habitat for Humanity and all volunteers associated with this program from any liability whatsoever.

Signature of Homeowner

Date

This application will not be reviewed and processed until ALL required information has been received

Application Process Checklist

- Complete this application in full.
- Add all required attachments.
- Send application and any attachments to the address listed on application.

Official Use Only

Date Application was received _____

Estimated amount requested _____

Date Application was reviewed _____

Application was reviewed by: _____

Approved? Yes / No Date: _____ By: _____

**JACKSON UNION COUNTY HABITAT FOR HUMANITY
MINOR HOME REPAIR PROGRAM**

PRE-PROJECT CHECK LIST

Homeowner: _____

Address: _____

Jackson Union County Habitat for Humanity agrees to perform the following repairs to the home at the address listed above. These minor repairs will commence on the start date below, we will do our best to complete them in a timely manner. Upon completion of minor repairs, we will complete a post-project checklist to review our progress. If the homeowner wishes to request any repairs beyond those listed below he/she should complete and submit a new application after these minor repairs are completed:

Repairs to be completed:

Estimated Material Cost \$ _____

Projected Start Date: _____

Prior to the project start date, the homeowner is expected to do all of the following:

- Remove all pets from the premises, or lock them out of the work area.
- Remove all personal belongings from the area being repaired.
- Keep jewelry and other valuables out of sight, to minimize any potential liability.
- Lock up any weapons or other hazardous items you may have in your home.
- Move any furniture that may impede the progress of the minor repairs.

If these tasks are not completed by the minor repair start date, Habitat volunteers may choose to postpone your minor repair project.

Homeowner Signature: _____ **Date:** _____

Habitat Signature: _____ **Date:** _____

**JACKSON UNION COUNTY HABITAT FOR HUMANITY
MINOR HOME REPAIR PROGRAM**

COMPLETED PROJECT CHECKLIST

The following minor repairs have been completed to the home at the address listed below, as per the agreement between Jackson Union County Habitat and the homeowner.

Homeowner: _____

Address: _____

Repairs Completed:

All parties agree that these minor repairs have been completed to the best ability of Jackson Union County Habitat for Humanity volunteers. Habitat has fulfilled its commitment to complete these minor repairs. The homeowner understands that there is no warranty, expressed or implied, on the labor performed, and that any warranty available on the materials used will be given to the homeowner upon completion of the project. The homeowner accepts full responsibility for the maintenance and upkeep of this home, including any further maintenance/upkeep necessary to sustain the minor repairs above.

Homeowner Signature: _____ **Date:** _____

Habitat Signer: _____ **Date:** _____