

Home Repair Program

Eligibility Criteria

NEED

- You must own the home in need of repairs: residences located in Montgomery County are eligible for assistance.
- You must occupy the home as your primary residence, and you must be the property title holder.
- Homeowner(s) must either be a U.S Citizen or a legal permanent resident of the U.S.
- Applicants who own multiple real estate properties are not eligible.
- You (or a member of your household) must have a need that makes the requested repairs necessary. Supporting documents must be provided.
- Combined household income must be less than 80% of the Area Median Income of Montgomery County. Refer to the chart below.
- Eligible properties are Single Family Residences (SFR) and manufactured homes.
 - Multi-Family dwellings (apartment buildings, duplexes, tri-plexes, etc.), homes used as rental units, boats and recreational vehicles (RV's) are not eligible.
- Homeowner must be current with the following:
 - Mortgage loan payment (if homeowner is still making payments)
 - Homeowner's insurance coverage
 - Property taxes
 - HOA dues (if applicable)

ABILITY TO PAY

- Homeowners will be responsible to pay all or a portion of the material cost for the repair. The amount of payment is based on the homeowner's monthly income.

Household Size	Monthly	Maximum Annual:
1	\$0- \$4,349	\$0- \$52,192
2	\$0- \$4,971	\$0- \$59,648
3	\$0- \$5,592	\$0- \$67,104
4	\$0- \$6,213	\$0- \$74,560
5	\$0- \$6,710	\$0- \$80,525
6	\$0- \$7,208	\$0- \$86,490
7	\$0- \$7,705	\$0- \$92,454
8	\$0- \$8,202	\$0- \$98,419

WILLINGNESS TO PARTNER WITH HABITAT

- The homeowner must provide the required information by given deadlines.
- Homeowner must be agreed to partner with HFH Montgomery County to complete sweat equity hour requirement as listed below:
 - At least one person from the household needs to be on site by appointment to work on the project along with the volunteers. The homeowner, or an appointed family member or friend, will contribute to sweat equity hours. If there is any physical challenge to helping repairs, homeowner will work with Habitat to determine an alternate way to perform sweat equity.
 - For safety reasons, children under the age of 16 are not allowed on the construction site while construction is in progress. Children between the ages of 16 and 18 must be accompanied by a parent or a guardian.
 - Homeowners are strongly encouraged to attend education classes provided by Habitat for Humanity when available.

Home Repair Program Eligible Repairs

EXTERIOR	INTERIOR
<ul style="list-style-type: none"> • Siding and trim repair and replacement; replacing wood members • Exterior scraping, caulking and painting • Handrails at property entrances • Replace wood damaged by termites and dry rot, including sill, frames, etc. • Window repair (new screen, glass, glazing) or replacement • Gutter replacement/repair • Porch, deck or wheelchair ramp construction • Repair or replacement of porch, stairs or ramp • Minor drainage issues • Door repairs or replacements for house • Weather-stripping at doors • Caulking and foaming cracks and gaps at the doors and windows • Adding or replacing door seals • Supporting existing structural members 	<ul style="list-style-type: none"> • Installation or repairs of mechanical, plumbing, or electrical components and/or services • Floor and wall repair/replacement • Bathroom grab bars; installation of accessible bathroom components (bathtub, toilet, vanity, sinks, etc.) • Supporting existing structural members • Ceiling repairs • Venting issues for kitchen and bathroom • Weather-stripping at doors • Caulking and foaming cracks and gaps at the doors and windows • Insulating openings, attics, crawlspaces, etc. to eliminate heat loss • Insulating pipes and duct work; wrapping water heaters • Where applicable, applying insulation in walls

Repair Exclusions:

- Foundation repairs
- Cosmetic or decorative repairs and modifications
- Construction or demolition of rooms and additions
- Remodeling improvements not related to health, safety or accessibility needs
- Repairs on properties that are uninhabitable
- Repairs on properties with open permits
- Repairs on properties with unpermitted or illegal additions
- Repairs on properties undergoing current construction, renovation or remodeling
- Repairs on properties in a state of incomplete construction, renovation or remodeling
- Repairs on properties which Habitat deems unsafe for staff, volunteers or contracted professionals
- Homes that are “red tagged”, condemned, uninhabitable and/or with extensive damages over the program limit are not eligible.
- Property cannot currently be under construction, renovation or remodel OR in a state of incomplete construction, renovation or remodeling activity.
- The budget for total material cost on the entire project will be based on need.

Provide the following documents when you return your application:

You will need to provide proof of total household income by providing **copies** of the supporting documents listed below. Your application will be considered incomplete if **copies** of supporting documents are not provided with the application.

If you need assistance in completing the application, call the Main Office at 936-441-4663 to schedule an application appointment during business hours: Tue-Sat 8:30am to 4:30pm

- **Copies of Driver's License and/or Texas I.D. for all adult family members (18 years and older)**
- **Divorce Decree (if applicable)**
- **Proof of Income (as applicable)**
 - **Copies of current Award Letters or most recent stubs for:**
 - **Social Security**
 - **SSI**
 - **Pension or Retirement**
 - **Disability (SSDI)**
 - **Child Support, TANF (*SNAP is not a source of income*)**
 - **Copies of Pay Stubs for the most recent two months**
 - **Copies of bank account statements (6 mos.)**

To Order a Social Security Statement, please call 1-866-964-6304.

Requested Repairs:

Please note the types of repairs or modifications you are requesting for your home, noting the most important (1) to least (8).

- _____ Ramp access to primary entrance
- _____ Hand Rail to primary entrance
- _____ Grab bars in bathroom
- _____ Roof repair
- _____ Floor repair
- _____ Plumbing
- _____ Electrical
- _____ Other



P.O. Box 2624,
Conroe, TX
77305

Tel: (936) 441-4663
Fax: (936) 261-7478

Home Repair Program Application



We are pledged to the letter and spirit of U.S. policy for the achievement of equal Housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin.

Applicant
 Name _____
 Address _____

 Social Security Number ____ _ ____
 Date of Birth ____/____/____
 Marital Status:
 legally married
 separated
 unmarried (Incl. single, legally divorced, widowed)
 Phone Number (home) _____
 (cell) _____

Co-Applicant
 Name _____
 Address _____

 Social Security Number ____ _ ____
 Date of Birth ____/____/____
 Marital Status:
 legally married
 separated
 unmarried (Incl. single, legally divorced, widowed)
 Phone Number (home) _____
 (cell) _____

List the names, ages, and relationship to applicant of all people living in the home: (Attached a list if more space is needed)

Name	Relationship to applicant	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you own your home: **YES NO** Did you or anyone in your household serve or is currently in the military? **YES NO**

Personal Statement

Please write a *brief* explanation of why you are in need of Home Repair services.

FOR OFFICE USE ONLY-DONOTWRITEIN THIS SPACE

Date Application Received ____/____/____ o Accepted o Denied
Date of Family Visit ____/____/____ Date of Property Assessment ____/____/____

Combined Monthly Bills*	Amount per month (\$)
Mortgage	
Utilities (gas, electric, water)	
Phone/Internet/TV	
Car Payment	
Car Insurance	
Child Care	
Food	
Student Loans	
Medical Expenses and Medical Insurance	
Alimony/Child Support	
Average Credit Card Payment	
TOTAL	

Applicant Employment Information*

Employer's Name _____
Employer's Address _____

Employer's Phone _____
Type of Business _____
Years at this Job _____
Monthly Wages (gross) \$ _____

Co-Applicant Employment Information*

Employer's Name _____
Employer's Address _____

Employer's Phone _____
Type of Business _____
Years at this Job _____
Monthly Wages (gross) \$ _____

Applicant Assets *

Name of Bank/Savings and Loan/Credit Union:

Address: _____

Balance: \$ _____

Co-Applicant Assets*

Name of Bank/Savings and Loan/Credit Union:

Address: _____

Balance: \$ _____

Applicant Monthly Income*

Wages \$ _____
Food Stamps \$ _____
Social Security \$ _____
SSI \$ _____
Disability \$ _____
Alimony \$ _____
Child Support \$ _____
Other \$ _____
Total \$ _____

Co-Applicant Monthly Income*

Wages \$ _____
Food Stamps \$ _____
Social Security \$ _____
SSI \$ _____
Disability \$ _____
Alimony \$ _____
Child Support \$ _____
Other \$ _____
Total \$ _____

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat home repair program, my ability to repay the no-interest loan and other expenses for the repair product and my willingness to partner with Habitat. I understand that the evaluation will include personal visits, a credit check, and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied. The original or a copy of this application will be retained by Habitat for Humanity of Montgomery County, TX even if the application is not approved.

Applicant Signature _____ Date _____
Co-Applicant Signature _____ Date _____

*Attach extra sheet if there is income from other adult household member besides the applicant/Co-applicant.

Photo / Video Release

I, the homeowner, hereby grant and convey in perpetuity to Habitat for Humanity all right, title, and interest in any and all photographic images, use of homeowner's name, printed interviews or statements, and video or audio recordings made by Habitat and/or its agents, contractors, directors, employees, officers, volunteers, and other representatives in the course of performing the Work (described in the pre-work agreement form, to be signed before beginning any work), including, but not limited to, any royalties, proceeds or other benefits derived from such photographs, printed materials or recordings.

Homeowner's Name (Printed)

Homeowner's Signature

Date

Permission to Refer

If your needs can be met more appropriately by another program, may we share your application with them?
(circle one)

YES

NO

Unless you give us permission to share your information with other organizations, your application will be kept confidential.

Home Repair Applicant Agreement

I hereby authorize and instruct Habitat for Humanity of Montgomery County. (hereafter Habitat MCTX) to obtain and review my credit report. My credit report will be obtained from a credit-reporting agency chosen by Habitat MCTX. I understand and agree that Habitat MCTX intends to use the credit report for the purpose of evaluating my financial readiness for the Home Repair Program.

I understand that by filing this application, I am authorizing Habitat MCTX to evaluate my need for critical home repairs, my ability to repay a no-interest loan, and my willingness to be a partner family. I understand that the evaluation will include a home assessment and income verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to be eligible to receive Critical Home Repair services, I may be disqualified from the program. I further understand that Habitat for Humanity will notify me of repairs that can complete, if any. The original or a copy of this application will be retained by Montgomery County Habitat for Humanity even if the application is not approved.

Applicant Name (Print)

Applicant Signature

Co-Applicant Name (Print)

Co-Applicant Signature

Date: _____

Complete the following if you are not the Applicant but are assisting the Applicant in completing the application:

Name

Date

Contact Number

Organization

Send completed application along with supporting documentation to:

Habitat for Humanity of Montgomery County, TX

Attention: Family Services

PO. Box 2624

Conroe, TX 77305 United States

(936) 441-4663 OFFICE



Home Repair Program Application Checklist

- Complete application form with signature of applicant and co-applicant
- Copies of Driver's License and/or Texas I.D. for all adult family members (18 years and older)
- Divorce Decree (if applicable)
- Copy of most recent property tax bill or proof of payment plan from the Montgomery County Tax Office
- Copy of the deed on the home or other proof of ownership, such as a property tax receipt. All documents submitted must show the name and address of the applicant.
- Mortgage Statement (if applicable)
- Proof of homeowner insurance(if applicable)
- Documentation of all salary/income for applicant and co-applicant
 - Copy of income tax return for last two years
 - Copy of last pay stubs or other proof of income for the last 2 months
 - Copy of most recent bank statements for the last 6 months
 - Copy of benefit letters for social security, disability, retirement, and proof of child support, if any

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW:

We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation of surname.

Applicant	Co-applicant						
<input type="checkbox"/> I do not wish to furnish this information Race: (applicant may select more than one racial designation) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Date of Birth: _____ / _____ / _____ Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	<input type="checkbox"/> I do not wish to furnish this information Race: (applicant may select more than one racial designation) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Date of Birth: _____ / _____ / _____ Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed						
To be completed only by the person conducting the interview							
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;">Interviewer's Name (print or type)</td> <td style="width: 30%;"></td> </tr> <tr> <td style="padding: 5px;">Interviewer's Signature</td> <td style="padding: 5px; text-align: right;">Date</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Interviewer's Phone Number</td> </tr> </table>	Interviewer's Name (print or type)		Interviewer's Signature	Date	Interviewer's Phone Number	
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