



**Habitat
for Humanity®**
of Island County

Habitat for Humanity of Island County
380 SE Pioneer Way, Suite 103/ P.O. Box 2279
Oak Harbor, WA 98277
(360)679-9444

Application for Home Repairs

* APPLICATION DEADLINE : NOVEMBER 25, 2019



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 INFORMATION

Applicant	Co-Applicant
Applicant Name: _____	Co-Applicant Name : _____
Birthdate: _____ SSN: _____	Birthdate: _____ SSN: _____
Phone: _____	Phone: _____
Email: _____	Email: _____
Gross Monthly Income: \$ _____	Gross Monthly Income: \$ _____
Total of monthly bills: \$ _____	Total of monthly bills: \$ _____
Source/s of Income: _____	Source/s of Income: _____

Other Household Members

Name (First,Last)	Birthdate	Relation to Applicant/s
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PROPERTY INFORMATION

House Condo Duplex Manufactured Home Other (explain) _____

Address of the home needing repairs: _____ Year Built: _____

In the space below, describe the condition of your residence and how can we help you through the repair program?

AUTHORIZATION AND RELEASE

I understand that by filling out this application, I am authorizing Habitat for Humanity to evaluate my need for participation in the repair program and my willingness to partner with Habitat. I further understand that by completing this application, I am submitting myself and all persons listed on the first page to a criminal background check.

Applicant Signature	Date	Co-applicant Signature	Date
X _____	_____	X _____	_____

FOR OFFICE USE ONLY - DO NO WRITE IN THIS SPACE

Date Received: _____
By: _____

Date Approved/Denied: _____