

Mail or fax completed form to:

Pemi-Valley Habitat for Humanity P.O. Box 238 Plymouth NH 03264 Ph. 603-536-1333

	For Office Use Onl
Date Received:	
City Citation:	
Referred By:	
Phone #:	
Application #:	

A Brush with Kindness is a volunteer based program of Pemi-Valley Habitat for Humanity that paints and repairs homes for under-resourced homeowners who need assistance to do necessary work. Call **603-536-1333** with any questions.

SECTION 1 - Homeowner Information	-536-1333 with any questions.			
Legal Name of Homeowner:	Date of Birth:			
Legal Name of Homeowier.	Date of Birth.			
List anyone else on the title of your home:	Date of Birth:			
Home Address: City:	Zip:			
County: Name of Neighborh	ood:			
Home Phone: () - Email:				
Cell Phone: () -				
Work Phone: () - Year you move	d into your home:			
List the name, birthdate and relationship to homeowner of all people in the household	old (attach a list if more space is needed):			
Name: Date of Birth: Re	elationship:			
Name: Date of Birth: Re	elationship:			
Name: Date of Birth: Re	elationship:			
Name: Date of Birth: Re	elationship:			
Name: Date of Birth: Re	elationship:			
Has anyone in your household ever served in the U.S. Military? □Yes □ No				
Name: Branch: Name:	Branch:			
Is anyone in your household currently in the military? □Yes □ No				
Name: Branch: Name:	Branch:			
SECTION 2 – Special Needs				
Is anyone in the home disabled? □Yes □ No Please list the resident name	e and type of disability.			
Name: Type of Disability:				
Name: Type of Disability:				
Name: Type of Disability:				
Is interpretation needed? □Yes □ No If yes, what language:				
SECTION 3 - Household Income and Mortgage Information				
The <i>total</i> , <i>combined</i> income <i>before taxes</i> for <u>ALL</u> persons in the household is: \$	1			
You must attach verification of all HOUSEHOLD income and a copy of the driver's license or state ID card for each				
person on the title of the home (even if they do not live there) and adult resident 18 at (provide proof of registration) and benefits for children. We accept copies of the mos				
social security statements, other retirement income statements, three months of emplo	· · · · · · · · · · · · · · · · · · ·			

attached statements if it represents annual, monthly, twice-monthly, bi-weekly or weekly income.

Are you still making loan payments on your home? □Yes □	□No		
If yes, what is your monthly payment? \$/month	How much are your prope	erty taxes? \$	
Are you over three months behind on your mortgage payments	s? □Yes □ No		
Do you currently have homeowner's insurance?	No		
SECTION 4 – Application History			
Have you applied to ABWK in the past? ☐ Yes ☐ No What year(s)?			
SECTION 5 – Personal Statement			
Please write a <i>brief</i> explanation of why you feel you should be selected			
and how it w	vill help you.		
Do you have a city citation? \square Yes \square No When is the d			
Please attach a copy of your citation letter along with your a	pplication.		
Do you have a homeowner's insurance notification? Yes			
Please attach a copy of your notification along with your app	olication.		
SECTION 6 – House Information / Exterior			
HOUSE INFORMATION	<u>House Exterior</u>	Garage Exterior	
Place a large "X" over the house (below), which most	Siding Trim	Siding Trim	
resembles the size of your house.	□ wood □ wood	□ wood □ wood	
	□ brick □ vinyl	□ brick □ vinyl	
	shakes metal	shakes metal	
	□ stucco □ painted stucco	☐ stucco☐ painted stucco☐	
Mobile Home 1 Story 1.5 Story 2 Story 2.5 Story	□ asbestos/slate	□ asbestos/slate	
Year Purchased: Year Built:	□ aluminum	□ aluminum	
Last Painted: Square Feet:	□ vinyl	□ vinyl	
Square 1 con			

Parts of house and garage that need painting:	Repairs needed on exterior:
☐ House siding	
☐ House trim (around doors, windows, overhangs,	etc.)
☐ Garage siding	
☐ Garage trim (around doors, windows, overhangs,	, etc.)
□ Other	
Other	-
☐ Other	
SECTION 7 - Requested Repairs	
Remember that the items listed below will be considered for repair will be made at the discretion of Pemi-Valley Habitat for Humanit and independence. The opportunity to have electrical and plumbin	me. Attach a separate piece of paper if there is not enough space to list all repairs. r, but the final decision on what work can be done with our time and financial resources v. The work done by Pemi-Valley Habitat for Humanity will focus on health, safety ng work done is dependent on the limited availability of a licensed volunteers. Our
volunteers are not professionals and may not be able to make	e all repairs. Please print
Area of Repair	Description
Accessibility Modifications. Examples: wheelchair ramp,	
bathroom grab bars, handrails, etc.	
Painting. List all interior rooms that require painting and any	
other exterior painting requirements.	
Carpentry Repairs. Describe problems with doors, floors, porches, steps, walls, ceilings, etc. Indicate places inside the house that need repair.	
Deeps and Windows Despite and in a suite	
Doors and Windows. Describe repairs required, including locks, glass, frames, weather-stripping, etc.	
General Cleaning. Indicate if there is cleaning and/or trash	
removal required. Identify if yard work is necessary. (Please note, we DO NOT provide regular lawn care, snow removal or	
house cleaning)	
The opportunity to have the below work done is dependent	on the limited availability of a volunteer licensed technician.
Roofing Repairs. Identify where roof leaks. How many years	
has it been since the roof was replaced? (It is rare that we can find a contractor to donate labor for a roof. Typically, we are	
able to provide materials if the homeowner is able to provide their own labor.)	
Appliances. Identify appliances such as stove, refrigerator or	
hot water heater that do not work or need repair. (Appliance repair or replacement is limited by volunteer and in-kind donation resources)	

and l	trical Repairs. List rooms where wall outlets, switches ight fixtures do not work. (The opportunity to have this done is dependent on the limited availability of a sed electrician)	
(The	nbing Repairs. Describe sink, tub or toilet leaks, etc. opportunity to have this work done is dependent on the ed availability of a licensed plumber)	
Oth	er. Identify other repairs requested but not listed above.	
SE	CTION 8 – Sharing Your Personal Info	ormation — Your answers do not affect your acceptance into the program
If y	our application is a more appropriate fit with othe	r, similar programs may we share it with them?
che	ck yes, you give Pemi-Valley Habitat for Humanity yo	MEOWNER DATE with other organizations, your application will be kept confidential. If you our consent to share the information you provide on this application with w is not able to assist you. Please sign above to confirm your decision.
SE	CTION 9 – Media and Publicity – Your a	answers do not affect your acceptance into the program
$\Box T$	ere did you learn about A Brush with Kindness V □Radio □Newspaper □Flyer □Friend/Fa THER:	? mily □Neighbor □Social Worker □Hospital/Rehab □Website _ please describe
Are	you willing to be interviewed by media reporter	ouse to be repaired, pictures of you and your home may be taken. s? May we bring elected officials to your home? YES Visits by elected officials are okay NO I do not want visits by elected officials
SE	CTION 10 – Homeowner's Checklist	
	Did you complete all 11 sections of this applicati	on?
	Did you sign the application? (SECTION 8 an	d SECTION 11)
	Did you enclose a copy of the deed on your hor documents submitted must show the name and ad	me or other proof of ownership, such as a property tax receipt? All ldress of the applicant.
	return, social security receipts, retirement pay recodocumentation of household income. <i>All person</i> .	This statement can be a copy of one or more of the following: tax reipts, three months of employment check stubs or other is listed on the title of the home (even if they do not live in the home) in income document (or prove current student status) showing name
		or state ID card for each person on the title of the home (even if he lt resident 18 or older in the home?
SE	CTION 11 – Homeowner's Agreemen	t

I certify that the information on this applica	tion is accurate and I own the property a	t the address given on this application. I/we certify		
that verification may be obtained from any	source named in this application. I/we	understand that this application can be rejected at		
any time if information provided is incorrect or untrue. <u>I/we have no present intention to move or offer my/our home for sale for at</u>				
least three years. I/we authorize Pemi-Vall	ey Habitat for Humanity (PVHFH) to e	xamine my/our income, residency, and any other		
requirements throughout the application pr	cocess. I/we confirm that any physically	able persons residing in my home or visiting for the		
project day(s) will work alongside the PVH	FH volunteers. I/we confirm that, excep	t for the conditions listed above, my/our home is a		
safe place for volunteers Additionally, I/w	re certify that no members of our house	hold are currently or will be involved in the future		
in any type of illegal activity and I/we aut	horize PVHFH to investigate my/our cr	iminal history. As an applicant I/we acknowledge		
·	• •	processed. I/we understand that PVHFH will keep		
*	this information in a secure place and it will not be shared with any unauthorized parties. To the extent permitted by law and without			
affecting the coverage provided by the required homeowners insurance, I agree to sign the release and waiver of liability.				
affecting the coverage provided by the requ	uired nomeowners insurance, I agree to	sign the release and waiver of hability.		
affecting the coverage provided by the requ	uired nomeowners insurance, I agree to	sign the release and waiver of hability.		
	URE OF HOMEOWNER	DATE		
SIGNATU	URE OF HOMEOWNER	DATE		
SIGNATU	URE OF HOMEOWNER			
SIGNATU Complete the following if you are not to	TRE OF HOMEOWNER the homeowner, but are assisting the	DATE c homeowner to complete this application.		
SIGNATU	TRE OF HOMEOWNER the homeowner, but are assisting the	DATE		
SIGNATU Complete the following if you are not to Your name/title:	The homeowner, but are assisting the Relationship	DATE c homeowner to complete this application. to Homeowner:		
SIGNATU Complete the following if you are not to	TRE OF HOMEOWNER the homeowner, but are assisting the	DATE c homeowner to complete this application.		

EQUAL HOUSING

EQUAL HOUSING OPPORTUNITY 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.