



# Deadline to submit application is April 15, 2021

#### Instructions

Read all instructions carefully and complete the entire application. If you need assistance, please ask by contacting:

Janet Risley

office@pikespeakhabitat.org (719) 475-7800 x103

### **Program requirements**

- Must be a Veteran and have either an Honorable or General Discharge.
- Mobile home repairs will not be a part of this home repair program.
- Applicant must be willing to contribute to a small percentage of the repair costs. Payment is calculated on a sliding scale, based on income.
- Home must be located within El Paso County.
- Applicant must be recorded owner and live in the home as their primary residence.
- Home must be insured.
- Mortgage payments must be current.
- There will be a in home inspection completed as part of the application process.
- All property owners are subject to a Sex Offender Registry Check.
- Household income must fall below 80% of the Area Median Income (AMI):

| Number in<br>Household | Annual<br>Minimum | Annual<br>Maximum | Monthly<br>Minimum | Monthly<br>Maximum |
|------------------------|-------------------|-------------------|--------------------|--------------------|
| 1 person               | \$19,992          | \$45,750          | \$1,666            | \$3,813            |
| 2 person               | \$22,848          | \$52,250          | \$1,904            | \$4,354            |
| 3 person               | \$25,704          | \$58,800          | \$2,142            | \$4,900            |
| 4 person               | \$28,560          | \$65,300          | \$2,380            | \$5,442            |
| 5 person               | \$30,845          | \$70,550          | \$2,570            | \$5,879            |
| 6 person               | \$33,130          | \$75,750          | \$2,761            | \$6,313            |
| 7 person               | \$35,414          | \$81,000          | \$2,951            | \$6,750            |
| 8+ person              | \$37,699          | \$86,200          | \$3,142            | \$7,183            |

## **How do I apply**

| Ц | Complete all sections of this application and <b>sign application</b> .   |
|---|---|
|   | Did you enclose a copy of the deed on your home or other proof of ownership, such as a property tax receipt? All  |
|   | documents submitted must show the name and address of the applicant.  |
|   | Copy of DD Form 214   |
|   | Current mortgage statement  |
|   | Are you current on your homeowner's insurance premiums?   Yes   No  |
|   | Attach copy of insurance certificate from your Insurance Company.   |
|   | Copy of government issued U.S. Photo ID for <u>all adults</u> over the age of 18  |
|   | Did you include a statement verifying income? This statement can be a copy of one or more of the following: tax return, social security receipts, retirement pay receipts, or other documentation of household income. <u>All adults</u> , over the age of 18, must submit an income document (or prove <u>current</u> student status) showing name and address. <b>Must provide 2 months of paystubs at current job (if applicable).</b> |
|   | ινιασι ριονίας ε πιοπιπό ομ ραγοίασο αι ταπτέπε μου τη αρρπίταυτεμ.   |

## Submitting your application

You may email the application, fax or drop it off in person during business hours at our office:

Office@pikespeakhabitat.org

2802 N. Prospect St., Colorado Springs, 80907 Fax number is (719) 473-3891 Attention: Janet





# **APPLICANT INFORMATION**

| Applicant   |                 |                | Co-Applicant |        |
|---|-----------------|----------------|--------------|--------|
| Full Legal Name   | Full Leg        | al Name        |              |        |
| Other Names Used  | Other N         | lames Used     |              |        |
| Social Security Number  | Social S        | ecurity Number |              |        |
| Date of Birth   | Date of         | Birth          |              |        |
| Contact Inf   | ormation        | 1              |              |        |
| Home/Cell Phone   | <u>ormation</u> |                |              |        |
| Home Address  | City            |                | State        | Zip    |
| Email   |                 |                |              |        |
|   |                 |                |              |        |
| List the names, ages, and relationship to homeowner of all people               | e living in     | the home       |              |        |
| Name/relationship:  |                 |                | Age:         | _      |
| Name/relationship   |                 |                | Age:         |        |
| Name/relationship Age:  |                 |                |              |        |
|   |                 |                |              |        |
| Name/relationship Age:  Residence Information                                   |                 |                |              |        |
| Residence Inf   | formatio        | n              |              |        |
| Do you own your home: ☐ Yes ☐ No  |                 |                |              |        |
| Do you have Insurance: □ Yes □ No   |                 |                |              |        |
| Is your homeowners insurance current ☐ Yes ☐ No                                 |                 |                |              |        |
| Name of insurance company   |                 |                |              |        |
| Date Purchased Home (mm/yy)   |                 | _              |              |        |
| Monthly payment:Is your mortgage  |                 |                | Yes □ No     |        |
| Are you or the co applicant currently in an open bankr                          | ruptcy          | ☐ Yes ☐ No     |              |        |
| Is your home located in a HOA ☐ Yes ☐ No  |                 |                |              |        |
| V   | _ 1             |                | Name to B    | 241    |
| Is anyone in your household a veteran?  | 5               | No             | Name Indiv   | riduai |
| Is anyone in your household currently in the military?                          |                 |                |              |        |
| Is the homeowner or anyone in the household disabled?                           |                 |                |              |        |
| If yes, indicate the type of disability below (check all that apply, pleas      | se describ      | e if "other"): | L            |        |
| ☐ Uses a Walker, Cane or Crutches ☐ Wheelchair Bound ☐ Blind ☐ Hearing Impaired |                 |                |              |        |
| ☐ Loss of Limb ☐ Mentally Disabled ☐ Other                                      | er:             |                |              |        |





#### Income

List all income received by members of your household. **You must include all household income.** This may include income from work, public assistance like Social Security, retirement or pension funds, or any other source of income. **All income requires documentation.** If you need more space, attach a separate page. Please state Gross income, not take home(net income).

| Туре | Company / Agency | Whose Income? | Gross Monthly Amount |
|------|------------------|---------------|----------------------|
|      |                  |               |                      |
|      |                  |               |                      |
|      |                  |               |                      |
|      |                  | Total         |                      |

## **Assets**

Type of account: checking, savings, IRA, etc. Please list all

| Type of accounts checking, savings, in the contribution |               |              |               |  |  |
|---|---------------|--------------|---------------|--|--|
| Type of account:  | Cash or Value | Whose Assets | Total Balance |  |  |
|   |               |              |               |  |  |
|   |               |              |               |  |  |
|   |               |              |               |  |  |
|   |               | Total        |               |  |  |

Briefly describe the type of work you would like done on your home. Remember that the items listed below will be <u>considered</u> for repair, the work done by PPHFH will address health and safety concerns. **Our volunteers are not professionals and may not be able to make all repairs, subcontractors may be hired by PPHFH.** Please print

|                         | HOUSE DESCRIPTION |                                     |                |  |  |
|-------------------------|-------------------|-------------------------------------|----------------|--|--|
| Year Built              |                   |                                     |                |  |  |
| Approximate Square Feet |                   |                                     |                |  |  |
| # of Bedrooms           |                   |                                     |                |  |  |
| # of Bathrooms          |                   |                                     |                |  |  |
| Style of home:          | ☐ Single Family   | ☐ Manufactured (on foundation only) | □Duplex □Other |  |  |

|                              | Yes, needs | No, repair | Description of needed repairs |
|------------------------------|------------|------------|-------------------------------|
|                              | repair     | needed     |                               |
| Roof Repair / Replacement    |            |            |                               |
| Gutters and Downspouts       |            |            |                               |
| Windows and Doors            |            |            |                               |
| Exterior Doors               |            |            |                               |
| Replacement of Siding/Trim   |            |            |                               |
| Exterior Electrical Defects  |            |            |                               |
| Grading and Drainage         |            |            |                               |
| Porch / Fencing              |            |            |                               |
| Handicap Accessibility Needs |            |            |                               |
| Any other Exterior Repairs   |            |            |                               |





# **MEDIA AND PUBLICITY**

| Wh  | nere did you learn about Habitat's Home Repair Program?  |
|---|--|
| If H  | labitat selects your house to be repaired, pictures of you and your home may be taken.   |
|   | <ul> <li>Can Habitat share photos of your home online or on social media? ☐ Yes ☐ No</li> <li>Can Habitat share photos of you online or on social media? ☐ Yes ☐ No</li> <li>Can Habitat share photos of your children online or on social media? ☐ Yes ☐ No</li> <li>Are you willing to be interviewed by Habitat staff for media or newsletter purposes? ☐ Yes ☐ No</li> <li>Are you willing to be interview by media reporters? ☐ Yes ☐ No</li> </ul>   |
|   | HOMEOWNER CONTRIBUTION   |
| be<br>beg<br>Ag<br><b>Pik</b><br><b>Oc</b><br>pro<br>lier | sed on the project costs and the income of the applicant, the homeowner's contribution (as a down payment) will as low as \$25 or up to 15% of total cost based on applicant's income. Payment would be required prior to work ginning; homeowner would have up to 90 days from the signing of the Letter of Acceptance and Partnership treement to submit the down payment amount. To prevent this program from being used to flip houses for profit, wes Peak Habitat for Humanity will secure the unpaid portion of the project cost with a forgivable Owner-cupied Retention Agreement, on the property. If the home is sold during the first 3 years after the date that the oject is completed, then the homeowner will repay PPHFH for the work with the proceeds of the sale. In 3 years, the n will forgive completely, and nothing will be due. I understand that there is a non-refundable \$25 assessment fee ould your application proceed to the assessment stage. |
| ho<br>ap <sub>l</sub>                                     | <u>WILLINGNESS TO PARTNER</u> be considered for the program, you and your household members must be willing to partner. Each adult in your usehold is considered a program participant who is required to complete program requirements. This includes plicants and any person over the age of 18 at the time of the application. This is what is called "sweat equity", each plicant must contribute <u>8</u> hours minimum.  |
| Are   | e you willing to partner?  Applicant   |
| Pleas   | HOMEOWNER CERTIFICATION  se read carefully. The signatures of everyone on the homeowner deed are required for the application to be considered. Check  |
| each  | box to show that you understand the statement and that it is true.   |
|   | I certify that I own the property at the address above and use it as my primary residence.   |
|   | I intend to continue to occupy my home for at least 3 years.   |
|   | I agree to sign the release and waiver of liability, which will not affect the coverage provided by the required homeowner's insurance.  |
|   | I certify that in signing this application, I am authorizing Pikes Peak Habitat for Humanity to evaluate my need for home repairs and renovations.   |
|   | I certify that I understand that Pikes Peak Habitat for Humanity will obtain an Owner-Occupied Retention Agreement on my property for the amount of the repair minus my financial contribution (if any) to the project.  |
|   | I certify that I understand that Pikes Peak Habitat for Humanity may not be able to provide all the repairs I have requested on this application.  |





| Pikes Peak Habitat for Humanity assumes hom<br>any work being performed, the areas impacted<br>and should the test(s) prove positive, Pikes Pea         | d by the requested repair will be teste | ed for the existence of lead- based pain  |
|---|---|---|
| I certify that I will notify Pikes Peak Habitat for occur.  | Humanity of any changes to my finar     | ncial or living situation as soon as they |
| I certify that Pikes Peak Habitat for Humanity hoffender registry.  | nas permission to search for all adult  | members of my household on the sex        |
| I certify that I understand that this application<br>Peak Habitat for Humanity and will not be retu<br>application on file for two years, whether or no | urned to me, and that Pikes Peak Hab    |   |
| I certify that the information on this applicatio   | n is accurate.                          |   |
| SIGNATURE OF HOMEOWNER  | DATE                                    | •   |
| SIGNATURE OF HOMEOWNER  | DATE                                    | -   |
|   |   |   |

| Applicant   | Co-applicant  |  |
|---|---|--|
| ☐ Ido not wish to furnish this information                    | ☐ Ido not wish to furnish this information                    |  |
| Race (applicant may select more than one racial designation): | Race (applicant may select more than one racial designation): |  |
| ☐ American Indian or Alaska Native                            | ☐ American Indian or Alaska Native                            |  |
| ☐ Native Hawaiian or other Pacific Islander                   | ☐ Native Hawaiian or other Pacific Islander                   |  |
| ☐ Black/African-American                                      | ☐ Black/African-American                                      |  |
| ☐ White   | ☐ White   |  |
| ☐ Asian   | ☐ Asian   |  |
| Ethnicity:  | Ethnicity:  |  |
| ☐ Hispanic or Latino ☐ Non-Hispanic or Latino Sex:            | ☐ Hispanic or Latino ☐ Non-Hispanic or Latino ☐ Sex:          |  |
| ☐ Female ☐ Male   | ☐ Female ☐ Male   |  |
| Birthdate://  | Birthdate://  |  |
| Marital status:   | Marital status:   |  |
| ☐ Married   | ☐ Married   |  |
| ☐ Separated   | ☐ Separated   |  |
| ☐ Unmarried (Incl. single, divorced, widowed)                 | ☐ Unmarried(Incl. single, divorced, widowed)                  |  |





# **Privacy Disclosure**

| FACTS:  | What does Pikes Peak Ha   | bitat for Humanity DO   | WITH YOUR PERSONAL INFORMATION?  |  |  |
|---|---|---|--|--|--|
| Why?  | Financial companies, including Pikes Peak Habitat for Humanity as a mortgage lender, choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand our procedures. |   |  |  |  |
| What?   | The types of personal information we collect and share depend on the consumer having a mortgage loan with Pikes Peak Habitat for Humanity This information can include:  Social Security number and account balances Payment history and transaction history Credit history and credit score  |   |  |  |  |
| How?  | All financial companies need to share <b>consumers'</b> personal information to run their everyday business. In the section below, we list the reasons financial companies can share their <b>consumers'</b> personal information; the reasons Pikes Peak Habitat for Humanity chooses to share; and whether you can limit this sharing.  |   |  |  |  |
| Reasons we can share information  | your personal   | Does Pikes Peak Habit   | at for Humanity share? Can you limit this sharing?   |  |  |
| For our everyday busing to process your transaccounts(s), respond to legal investigations, or bureaus | to court orders and   | Yes   | No   |  |  |
| For our marketing pur<br>products and services  | -   | Yes   | No   |  |  |
| For joint marketing w companies   | •   | No  | We don't share   |  |  |
| For our affiliates' ever<br>purposes – information<br>transactions and expe                           | on about your   | No  | We don't share   |  |  |
| For non-affiliates to n   |   | No We don't share   |  |  |  |
| Questions:  | 7.0   | Call 719-475-7800   |  |  |  |
| Who we are  |   | Cuii 713 173 7000   |  |  |  |
| Who is providing this   | notice?   |   | Pikes Peak Habitat for Humanity  |  |  |
| What we do  |   |   | Theorem and the first training   |  |  |
| How does Pikes Peak Habitat for Humanity protect my personal information?                             |   | ect my personal   | To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.  |  |  |
| How does Pikes Peak Habitat for Humanity collect my personal information?                             |   | ct my personal  | We collect your personal information, for example, when you  > Show your driver's license  > Apply for a residential mortgage loan or provide your employment history  > Make payments to your mortgage  We also collect your personal information from others, such as credit bureaus, affiliates, and other companies. |  |  |
| Why can't I limit all sharing?  |   |   | Federal law gives you, the consumer, the right to limit only  Sharing for affiliates' everyday business purposes — information about your creditworthiness  Affiliates from using your information to market to you  Sharing for non-affiliates to market to you   |  |  |
|   |   |   | State laws and individual companies may give you additional rights to limit sharing.   |  |  |
| someone else?   | limit sharing for an accou  | nt I hold jointly with  | Your choices will apply to everyone on your account.   |  |  |
| Definitions Affiliator  |   | Companies related by  | common awayship or control. They can be financial and perfinancial   |  |  |
| Affiliates  |   | Companies related by common ownership or control. They can be financial and nonfinancial companies.   |  |  |  |
| Non-affiliates  |   | Companies not related by common ownership or control. They can be financial and nonfinancial companies.  *Pikes Peak Habitat for Humanity does not share with non-affiliates. |  |  |  |
| Joint marketing   | A formal agreement between nonaffiliated financial companies that together market financia products or services to you.   |   |  |  |  |