



**Strengthening communities by building
homes, hope, and opportunities for
families to help themselves**

Critical Home Repair

Thank you for your interest in Fort Bend Habitat for Humanity's Critical Home Repair program. Fort Bend Habitat's work through the Critical Home Repair Program will include handicap accessibility modifications (wheelchair ramps, grab bars, and handrails), roof repair, floor repair, and other health and safety home repairs. Critical Home Repair is **NOT** an emergency repair program; there will likely be a months-long waiting period for repair work to be started and completed.

Eligibility Criteria for the Critical Home Repair program are as follows:

- You must own the home where the repairs are to be made.
- You must occupy the home as your primary residence.
- You (or a member of your household) must have a need that makes the requested repairs necessary.
- Your household income must fall between 30%-60% of A.M.F.I. (Area Median Family Income). *See income guidelines listed below on page 2.*
- Those receiving Critical Home Repair services must be present during the duration of the repair work. Any able-bodied household members must help during the project (where applicable). Other friends and family (not in the household) are also encouraged to participate.
- Applicant must demonstrate willingness and ability to pay for project cost based on a sliding scale. *(These criteria are subject to change.)*

Important to understand:

- **Homeowners will have to pay for Critical Home Repair services based on a sliding scale based on household income.**
- We may only be able to commit to part of what a house needs
- No promises of acceptance into the program are made, until a binding agreement is fully executed
- Cost for project will include materials and contracted labor, and a processing fee
- Upon acceptance into the program, participants must agree to a payment plan, which will begin immediately. Applicant must be current with plan to remain eligible. All pre-payments will be held in escrow until project is begun. If applicant withdraws from the program or is disqualified for any reason prior to beginning the project, 100% of escrowed funds will be returned to the applicant.
- Applicant will receive a 25% discount on the payment amount required if full payment is received before project begins.
- No interest will be charged
- A Deed Restriction will be required for projects over \$1,000. The Deed Restriction will have a retention period of 5 years forgiven on a pro rata basis.
- Participants will be required to sign a promissory note for balance of payment not paid before project completion

**Fort Bend Habitat for Humanity
Critical Home Repair
13570 Murphy Rd, Stafford, TX 77477
(281) 403-0708 OFFICE
www.FortBendhabitat.org
repairs@FortBendhabitat.org**

Critical Home Repair

Critical Home Repair Income Guidelines

(30% - 60% of Area Median Family Income AMFI)

Monthly Gross Household Income (before taxes):

Household Size	No less than:	No more than:
1	\$1,311	\$2,621
2	\$1,498	\$2,996
3	\$1,685	\$3,371
4	\$1,873	\$3,745
5	\$2,022	\$4,045
6	\$2,172	\$4,344
7	\$2,322	\$4,644
8	\$2,472	\$4,943

Annual Gross Household Income (before taxes):

Household Size	No less than:	No more than:
1	\$15,729	\$31,458
2	\$17,976	\$35,952
3	\$20,223	\$40,446
4	\$22,470	\$44,940
5	\$24,268	\$48,535
6	\$26,065	\$52,130
7	\$27,863	\$55,726
8	\$29,660	\$59,321

Paperwork Needed for Critical Home Repair Application

You will need to provide proof of total household income by providing copies of the supporting documentation listed below. Your application will be considered incomplete if copies of supporting documentation are not provided with the application. You can bring supporting documentation to our office, located at 13570 Murphy Rd, Stafford, TX 77477, and we will gladly make the copies for you.

If you need assistance in completing the application, call the Fort Bend Habitat Office at (281) 403-0708 to schedule an application appointment.

Provide the following documents when you return your application:

- **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**
 - **Copies of Pay Stubs for the most recent two months**

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

Critical Home Repair



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Critical Home Repair Application

Dear Applicant: We need you to complete this application to help determine if you qualify for Fort Bend Habitat for Humanity's Critical Home Repair program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

Applicant Information

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Years at Address: _____

Do you own the home where work is to be done? YES or NO

Home Phone: _____ Work Phone: _____ Cell: _____

Date of Birth: _____

Marital Status: Married Separated Unmarried (Single, Divorced, Widowed)

Is anyone in your household a veteran? Yes No Name: _____

Seniors (Y / N) How Many? _____ Race _____

Have you every applied to Fort Bend Habitat for Humanity? _____ If yes, when? _____

Do you have pets? _____ If yes, what kind and how many? _____

Number of persons living in your home (including applicant): _____ Number of Dependents _____

Mortgage Information

Are you making loan payments on your home? YES or NO

If yes, what is your monthly payment? \$ _____ per month.

Are your loan payments current? YES or NO

Do you currently have homeowner's insurance? YES or NO

Critical Home Repair

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

Personal Statement

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

Critical Home Repair

Anticipated Gross Monthly Income

List the names, relationship to applicant, ages, and monthly gross income of all people living in the home.
You must provide proof of all household income.

Name	Relationship	Age	Gross Monthly Income (before taxes)	Income Source (Employment Income, Social Security, SSI, Child Support, Veteran's Benefits, ect...)
	Self			

I certify that the income reported above represents 100 percent of the total monthly income for my household:

Applicant Signature

Date

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.

Critical Home Repair

Applicant Agreement

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

I understand that by filing this application, I am authorizing Fort Bend Habitat for Humanity 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 Fort Bend Habitat for Humanity will notify me of repairs that Fort Bend Habitat for Humanity can complete, if any. The original or a copy of this application will be retained by Fort Bend Habitat for Humanity even if the application is not approved.

Applicant Name (Print)

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:

**Fort Bend Habitat for Humanity
Attention: Critical Home Repair
13570 Murphy Rd, Stafford, TX 77477**

(281) 403-0708 OFFICE

Critical Home Repair

Sliding Scale Payback

% AMFI	% payback
	of cost
60%	100.00%
59%	97.75%
58%	95.50%
57%	93.25%
56%	91.00%
55%	88.75%
54%	86.50%
53%	84.25%
52%	82.00%
51%	79.75%
50%	77.50%
49%	75.25%
48%	73.00%
47%	70.75%
46%	68.50%
45%	66.25%
44%	64.00%
43%	61.75%
42%	59.50%
41%	57.25%
40%	55.00%
39%	52.75%
38%	50.50%
37%	48.25%
36%	46.00%
35%	43.75%
34%	41.50%
33%	39.25%
32%	37.00%
31%	34.75%
30%	32.50%