

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, disability, familial status, national origin, or any other protected class.

## A Brush with Kindness APPLICATION

Return Application to: 280 Alligator Drive, Venice, FL 34293

office: 941-493-6606

www.habitatsouthsarasota.org



	Applicant	Information			
Applicant		Co-Applicant			
Applicant Legal Name		Co-Applicant Legal Name			
Phone #	Email	Phone #	Email		
☐ Married ☐ Separated ☐ Unmarrie	d (single, divorced, widowed)	☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed)			
Dependents (People who live with you	not listed by Co-Applicant)	Dependents (People who live with you not listed by Applicant)			
Name/Relationship	Date of Birth	Name/Relationship	Date of Birth		
Present Address (Street, City, State, 7	Zip Code)	Present Address (Street, City, State, Zip Code)			
How Long?		How Long?			
To be considered for Habitat's ABWH done.		a willingness to partner with	h volunteers while work is being		
I am willing to paticipate in the vo	lunteer work:	Applicant □ Yes □ No  Co-Applicant □ Yes □ No			
Are there any factors that could liv	mit your ability to partio	cipate? (check one)  Applicant □ Yes □ No  Co-Applicant □ Yes □ No			
If yes, what measures could be taken					
If unable to participate, would you b					
Note - There is a \$200 progra	am fee to be paid by	homeowner.			

				Curre	nt Hoi	using Cor	nditions		
Current Housing Conditions  Number of Stories									
Siding	wood	brick	vinyl	Other					
		_							
Trim	wood	metal	vinyl	Other					
Parts of	Parts of home that need to be painted Siding Trim Other								
				Pro	perty	y Informa	ation		
Do you h	ave home	owners ins	surance?	Yes N					
Are the p	property ta	ixes curren	t on prop	erty? Ye	es No	If no, wh	y not?		
				Empl	oyme	ent Inforr	nation		
Applica	Applicant Co-Applicant								
Name and Address of <b>Current</b> Employer			Name and Address of <b>Current</b> Employer						
What is your job?					What is y	What is your job?			
Date Started					Date Star	Date Started			
Monthly Wages					Monthly V	Monthly Wages			
Business I	Phone					Business	Business Phone		
	Monthly Income								
Monthly	y Income			Applicant		ţ.	Co Applicant	Others in Household (Age 18 & over)	
Gross-E	mploymer	nt Income		\$			\$	\$	
Social Se	ecurity			\$			\$	\$	

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

Disability

Child Support

SSI

Other

TOTAL

Referral Source Income Guidelines

Where did you learn about Habitat for Humanity South Sarasota County? and the <i>A Brush with Kindness</i> Program?							
	Friend						
	Family						
	TV						
	Social Media						
	Website						
	Newspaper						
	Radio						
	Church/Faith Organization						
	Neighborhood Meeting						
	Non-profit organization						
	Other						

	Sarasota County 2019					
Family Max Income						
	<u>Size</u>					
	1	\$39,700				
	2	\$45,400				
	3	\$51,050				
	4	\$56,700				
	5	\$61,250				
	6	\$65,800				

## **Supporting Documents**

Your application				

- □ Proof of <a href="https://example.com/homeownership">homeownership</a> (This may include a copy of the Deed of Trust or most recent Property Tax Receipt.)
- □ Proof of current <u>homeowner insurance</u>
- □ Last four (4) most recent <u>payroll stubs</u> from each place of employment. If you are self-employed we must have valid verification of business income and expenses.
- □ Verification of all <u>unearned income</u> (SSI, social security, FIP, Section 8 Housing, rental reimbursement, student loans, etc.)
- ☐ Child Support verification (this is optional to report, but if you report it we must have documentation)
- ☐ Verification of any other income not listed above
- □ Complete all sections of the application
- ☐ Driver's License of all household members
- □ Sign and date the application

Note - If approved, there is a \$200 program fee to be paid by homeowner.

## **Notices and Agreement**

**PRIVACY ACT NOTICE:** This information is to be used by the agency collecting it or its assignees in determining whether you qualify for this program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not, your application for approval may be delayed or rejected. The information requested in this form is authorized by Title 38 USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. Seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. Seq., or 7 USC, 1921 et. Seq. (If USDA/FmHA).

I/we understand that Habitat for Humanity South Sarasota County Inc. screens all applicants on the sex offender registry, and that by completing this application, I am submitting myself and all persons 18 and older who reside in the home to such an inquiry. I further understand that by completing this application, I am submitting myself and all persons 18 and older who reside in the home to a criminal background check.

**MEDIA AND PUBLICITY:** Habitat for Humanity South Sarasota County often works with corporate and/or church sponsors. These sponsors provide funds for our projects. Additionally, they provide some of the volunteers to help complete the work on the home. In celebration, some sponsors may wish to publicize the event and/or information about the family in different newsletters, newspapers, radio stations television, etc. Applicants will not be disqualified from the program should they choose not to release their names to our partners and media.

I/we consent to having information released about ourselves and/or our family to sponsors and for internal Habitat for Humanity publications including, but not limiting to, the organizations newsletters, and website. This may include, but is not limited to, photographs and interviews.

and interviews.	,
HOMEOWNERS AGREEMENT	
I,certify that the information on this application property at I have no present intention to may ears. I confirm that, except for the conditions listed in this application, my home is a sa people who may work on my house are unpaid volunteers; that few, if any of them, are say that I, my assignees, their heirs, distributes, guardians, and legal representatives will not of Habitat for Humanity South Sarasota County or any affiliated organizations or the sup activities, for injury or damage resulting from negligence or other acts, howsoever cause participant in Habitat for Humanity South Sarasota County activities. I hereby release Hany of its affiliated organizations from all actions, claims or demands that I, my assignee have or may hereafter have for injury or damages resulting from my participation in any activities.	nove or offer my home for sale for at least three fe place for volunteers. I understand that the skilled in the building trades; and that A Brush with rork done by anyone at my house. I hereby agree make a claim against, sue or attach the property pliers of any tools or equipment that I use in these d by any employee, agent, contractor of, or abitat for Humanity South Sarasota County and s, heirs, guardians, and legal representatives now
Printed Name of homeowner	_
Signature of homeowner	Date
Printed Name of homeowner	_
Signature of homeowner	Date
18+ Residing in home printed name	
Signature	Date
18+ Residing in home printed name	
Signature	Date