

The Fuller Center of Portage County
Home Improvement Application Form

Applicant/co-applicant information			
Applicant name		Co-applicant name	
Date of birth		Date of birth	
Home phone	Cell phone	Home phone	Cell phone
Email address		Email address	
Mailing Address (street, city, state, zip code)		Mailing Address (street, city, state, zip code)	
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)	
Dependents and others who live with you (not listed by co-applicant)		Dependents and others who live with you (not listed by applicant)	
Name	Age	Male/Female	
Home Address (street, city, state, zip code)		Home Address (street, city, state, zip code)	

Number of years	Year purchased	Number of years	Year purchased
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Please describe repairs needed in this box:

Do you have homeowners insurance? Yes No

If so, please list your homeowner's insurance company name

Please list your homeowner's insurance policy number

Monthly income and combined monthly bills

***Monthly income is the total monthly income for ALL household members*

Please include proof of monthly income for any items below

Gross monthly income	Applicant	Co-applicant	Others in household	Monthly bills	Monthly amounts
Base employment income	\$	\$	\$	Rent/mortgage	\$
AFDC/TANF	\$	\$	\$	Utilities	\$
Food stamps	\$	\$	\$	Car payments	\$
Social security	\$	\$	\$	Insurance	\$
SSI	\$	\$	\$	Child care	\$
Disability	\$	\$	\$	School lunches	\$
Alimony	\$	\$	\$	Credit card payment	\$
Child support	\$	\$	\$	Student loans	\$
Other (specify)	\$	\$	\$	Alimony/child support	\$
TOTAL	\$	\$	\$	TOTAL	\$

Authorization and release

The homeowner is to read each statement and mark his/her initials next to each statement.

_____ I certify that this information is accurate, to the best of my knowledge.

_____ I own the property at the address on this form above.

_____ I understand that The Fuller Center of Portage County is a 501(c)(3) not-for-profit charitable organization run by unpaid volunteers. I understand that, as I am physically able, I will be present with these volunteers and will work alongside them.

_____ I state that the premises are safe for the work to be performed, except for these conditions (list any hazards): _____

_____ By signing this document, in addition to other documents, I invite and authorize the Fuller Center of Portage County volunteers to come onto my property for the purpose of performing repairs to my home.

_____ I understand that all repairs described herein and discussed with The Fuller Center of Portage County are subject to funding restraints, feasibility, recommendation and other restraints of any nature which may arise.

_____ I understand that the work/project at my home may be discontinued by The Fuller Center of Portage County at any time if the environment or situation becomes hostile or poses any hazards, in the opinion of the Fuller Center of Portage County volunteers.

I understand that by filing this application, I am authorizing The Fuller Center of NW Portage County – Neighbor 2 Neighbor to evaluate my actual need for repairs to my home. I own my home and it is my intent to live in that home for at least the next 5 years and my willingness to be a partner family. I understand that the evaluation will include personal visits. 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. By signing you further agree to allow The Fuller Center of NW Portage County - Neighbor 2 Neighbor to use the fact that your home is being repaired and photographs, videos and other media may be taken and used to promote The Fuller Center mission. The original or a copy of this application will be retained by The Fuller Center of NW Portage County - Neighbor 2 Neighbor even if the application is not approved. Under the Privacy Act, all personal information provided to The Fuller Center of NW Portage County - Neighbor 2 Neighbor is on a voluntary basis, and that information provided will be protected to the extent permitted by the Privacy Act. Voluntarily submitting information constitutes your consent for The Fuller Center of NW Portage County - Neighbor 2 Neighbor to use the information for the purpose stated and indicates to us you are aware of The Fuller Center of NW Portage County - Neighbor 2 Neighbor's Privacy Policy provisions. In consideration of the services and materials provided by The Fuller Center of NW Portage County - Neighbor 2 Neighbor I/we (the homeowners) fully release, discharge and agree to indemnify and hold harmless The Fuller Center of NW Portage County - Neighbor 2 Neighbor, all in their organization, all volunteers, all persons, companies and firm associated with The Fuller Center of NW Portage County - Neighbor 2 Neighbor, from any and all claims, demands, causes of action, or suits at law or in equity of any nature, to property or person, for or because of any actions done or omitted or suffered to be done at my home to me/us, my heirs, executors,

representatives, assigns or guests or any other person by any person or entity related to or arising out of the services or materials or efforts of The Fuller Center of NW Portage County - Neighbor 2 Neighbor.

Applicant signature

Date

Co-applicant signature

Date

x _____

x _____

For office use only

Date application received _____	More information requested: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date denial letter sent _____
Date of home visit for assessment of repairs _____	Date sent to board _____	Date agreement and release waiver signed _____
	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied	