



Mail or fax your form to:  
 Brookings Area Habitat for Humanity  
 ATTN: A Brush with Kindness  
 321 9<sup>th</sup> Street, P.O. Box 412  
 Brookings, SD 57006  
 Ph. (605) 692-5601 Fax (605) 692-7235  
 Referred By: \_\_\_\_\_  
 Phone No.: \_\_\_\_\_  
 Application No.: \_\_\_\_\_

**SECTION 1 - Homeowner Information**

Name of Homeowner:	Age:
Address:	Zip:
Telephone Numbers: H: _____ W: _____	Number of Years at Address: _____
Please include area code	Name of Neighborhood: _____

List the names, ages, and relationship to homeowner of all people living in the home (attach a list if more space is needed):

Name/relationship: _____	Age: _____
Name/relationship _____	Age: _____
Name/relationship _____	Age: _____
Name/relationship _____	Age: _____

**SECTION 2 - Special Needs**

Is the homeowner or anyone in the home disabled? Yes No

If yes, indicate the type of disability below (check all that apply, please describe if "other"):

Uses a Walker, Cane or Crutches Wheelchair Bound Blind Hearing Impaired

Loss of Limb Mentally Disabled Other: \_\_\_\_\_

Is translation needed? Yes No If yes, what language: \_\_\_\_\_

**SECTION 3 - Sharing Your Personal Information**

If your application is a more appropriate fit with other, similar programs may we share it with them?  
 Yes No

*Unless you give us permission to share information with other organizations, your application will be kept confidential and will be used solely for the purpose of evaluating the acceptability of your home for repairs or refurbishment by Brookings Area Habitat for Humanity.*

**SECTION 4 - Household Income and Mortgage Information**

The total, combined income before taxes for ALL persons living in the home is: \$ \_\_\_\_\_ per Year

**You must attach verification of all HOUSEHOLD income** for each adult in the house, unless a full time student (provide proof of registration) and/or benefits for children.

*(For instance, a copy of previous year's income tax return, monthly social security statement, other retirement income statements, employment check stub; please note on attached statements if it represents annual, monthly, twice-monthly, bi-weekly or weekly income). Do not submit originals – copies only.*

Are you still making loan payments on your home? Yes No

If yes, what is your monthly payment? \$ \_\_\_\_\_ / month

After paying your monthly bills (gas, electric, insurance, food, phone, medical, etc.), approximately how much money do you have left to spend on house repairs? \$ \_\_\_\_\_ / month



**SECTION 8 - Media and Publicity**

Where did you learn about **A Brush with Kindness?** (Circle one)

TV/Radio/Newspaper/Flyer/Friend/Neighbor/Neighborhood Organization

Other: \_\_\_\_\_ (please describe)

If **ABWK** selects your house to be repaired, would you be willing to have your picture taken or be interviewed by media reporters? May we bring elected officials to your home? (Check all that apply)

\_\_\_ YES Interviews and photographs are OK. \_\_\_ YES Visits by elected officials are OK.

\_\_\_ NO I do not want interviews or photographs. \_\_\_ NO I do not want visits by elected officials.

**SECTION 9 – Personal Statement**

Please write a *brief* explanation of why you feel you should be selected, and how it will help you.

**SECTION 10– Race/Ethnicity**

*For governmental funding purposes this question is included: It is voluntary, but ABWK does not discriminate by race or ethnicity. Please check the group that you most closely identify with.*

American Indian    Asian    Black    Hispanic    Pacific Islander    White    Other

**CHECKLIST**

Did you complete all 9 sections of this application?    Yes    No

Did you sign the application? (SECTION 5)    Yes    No

Did you read/sign the **Homeowner’s Statement of Eligibility** on page 4?    Yes    No

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 name and address of applicant.*    Yes    No

Do you currently have homeowner’s insurance?    Yes    No

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. *All adults, over the age of 18, must submit an income document (or prove current student status) showing name and address.*    Yes    No

**NOTE: Incomplete applications, or applications submitted without the required documents, will not be processed.**

**A Brush with Kindness** is a Brookings Area Habitat for Humanity program providing assistance to

low-income elderly or disabled homeowners with outside painting, minor repairs and landscaping.

## Homeowner's Statement of Eligibility

I, \_\_\_\_\_ have asked the Brookings Area Habitat for Humanity's 'A Brush with Kindness to provide repairs to my home at \_\_\_\_\_ in \_\_\_\_\_ SD. I understand that Brookings Area Habitat for Humanity's *A Brush with Kindness* is funded by charitable donations and grants to provide assistance to low-income homeowners who have no other means to afford home repairs. I also understand that Brookings Area Habitat for Humanity's *A Brush with Kindness* is obligated to use its charitable donations only for assistance to eligible homeowners. In addition, I understand that to knowingly submit false information is considered fraud and punishable under law. By signing my name to this statement, I guarantee that I am eligible to receive this assistance as follows:

1. All the information submitted on my Homeowner Application is complete and correct. \_\_\_\_\_ *Initial*
2. I am the owner of the home at the above address. \_\_\_\_\_ *Initial*
3. This same house is my full-time residence. \_\_\_\_\_ *Initial*
4. If I sell the home before the term of the financial agreement expires, I will pay back the remaining amount owed. \_\_\_\_\_ *Initial*
5. I, my spouse, partner and/or any other owners of my home have no other financial resources to afford the services that I have requested. \_\_\_\_\_ *Initial*
6. I authorize *Brookings Area Habitat for Humanity* and its representatives to complete paperwork required to obtain building permits necessary to repair my home. \_\_\_\_\_ *Initial*
7. I understand that *Brookings Area Habitat for Humanity* is a neighbor-helping-neighbor organization and I will do everything possible to get my friends and family to help on the workday. \_\_\_\_\_ *Initial*
8. I am aware *Brookings Area Habitat for Humanity* is a one day volunteer program. Promises cannot be made as to the specific work outside our scope will be done. I understand it may not be possible for the same volunteers to return after the initial work day. \_\_\_\_\_ *Initial*
9. I authorize *Brookings Area Habitat for Humanity* to verify any information I have provided on this application, and I understand that the Brookings Police Department may screen my address for history of illegal activity. \_\_\_\_\_ *Initial*
10. I will take full responsibility for securing valuables located in my house when volunteers are working in my home. I understand *Brookings Area Habitat for Humanity* cannot be held responsible for misplaced or broken items. \_\_\_\_\_ *Initial*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Homeowner)  
\_\_\_\_\_  
(Homeowner) Date: \_\_\_\_\_

<b>FOR INTERNAL USE ONLY</b>
Date Received: _____ Date Acknowledged: _____

