

Critical Home Repair Program



For Office Use Only:

Mail completed form and all requested attachments to):
Habitat for Humanity of McHenry County	
907 N Front St	
McHenry, IL 60050	

or

Email scanned application including all requested attachments to: jflores@habitatmchenry.org

Date Received:
Date Reviewed:
AMI
Date of Assessment:
Letter of Intent Mailed:
Homeowner Agreement:
Completion Date:

The Habitat for Humanity of McHenry County Home Repair program assists qualified low-income homeowners struggling to maintain their homes with Home Preservation (yard clean-up, exterior painting, exterior repairs) and Critical Home Repair (extensive repairs, modifications, accessibility improvements). Call 815-759-9002 x108 with any questions.

SECTION 1 – Applicant		
Name(s) of Homeowner:		
Property Address:		
Mailing Address (if different from property address):		
Telephone (incl. area code):	e:	
Cell:		
Work	-	
Email Address:		
Eman Address.		
Point of Contact (if different from Homeowner):		
Relationship:	Phone Number:	
Empil Address	<u>I</u>	
Email Address:		

SECTION 2 – Property Information				
Street Address of Home:		(City:	
	County			
Number of bedrooms:				
Do you still have a mortgage on your home?				
Are your mortgage payments up to date?	☐ Yes ☐ N	o If no, how many	months in the arrears	?
What is your monthly mortgage payment (inc	el. taxes and insurance	ce)? \$		
Are the County Real Estate Taxes paid up to	date on the Propert	y?	o PIN:	
If no, how much in the arrears \$:				
Other than a mortgage, are there any other li	ens on your propert	y? No Y	<i>T</i> es	
If yes, explain:				<u></u>
Have you received notice of any code violati	ions, which have no	t been resolved?	No Yes	
If yes, explain:				
SECTION 3: Household Information	n			
List the names, <u>relationship</u> to homeowner(s) needed) [**Race is not a required field but does a				a list if more space is
Full Name	Relationship	Occupation:	Age:	Race:**
1.	HOMEOWNER			
2.				
3.				
4.				
5.				
6.				
The <i>total</i> , <i>combined</i> income <i>before taxes</i> for You must attach verification of all HOUS proof of school registration) and/or benefits to (For instance, the most recent income tax ret	EHOLD income for children.	each adult in the ho		4
employment check stub. Please note on attack weekly income.)				
After paying your monthly bills (gas, electric have left to spend on house repairs? \$	c, insurance, food, pl	none, medical, etc.),	approximately how r	nuch money do you

SECTION 4: Military Veteran Habitat for Humanity has access to grants that	t assist veterans with home repairs	
Did you or anyone in your household, serve or is currently serving in the military? No Yes (If "YES" please provide a copy of discharge papers, either DD 214 Form, NAVPERS 1070/615, WD AGO, NG22/NGB22 or Selective Reserve annual points statement and evidence of honorable service)		
Name:	Branch of Service:	
Years of service: to	Final Rank:	
SECTION 5 - 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):		
☐ Uses a Walker, Cane or Crutches ☐ Wheelchair Bound ☐ Blir	nd Hearing Impaired	
□ Loss of Limb □ Mentally Disabled □ Other (explain):		
Is translation needed?		
SECTION 6 – Application History		
Have you applied to <i>Habitat for Humanity</i> in the past? Yes No	What year(s)?	
Has Habitat for Humanity done work at your home in the past? Yes No		
Have you received home repair/improvement assistance from any other public or	non-profit organization?	
Organization(s):	What year(s)?	
SECTION 7 – Personal Statement		
Please write a brief explanation of why you would like Habitat's assistance in repairi mean to your quality of life.	ng your home and what our assistance would	

SECTION 8 – Description of Work
Please list the concerns you have with your home and the severity of the problem(s).
What has prevented you from making the repairs previously? (<i>check all that apply</i>)
Lack of Funds Health-related issues Other
SECTION 9 – Willingness to Partner
To be considered for Habitat Home Repair, you and your family must be willing to complete a certain number of "sweat equity" hours. Your participation working on your own home or another Habitat project is called "sweat equity" and may include assisting with the repairs to your home, working on someone else's home or working in our ReStores. I am willing to complete the required sweat-equity hours. Yes No Explain:
Lapiani.
SECTION 10 – Media and Publicity
•
Where did you learn about <i>Habitat for Humanity?</i> TV Radio Newspaper Brochure Friend Neighbor Relative Neighborhood Organization
Other Explain:
If <i>Habitat for Humanity</i> selects your house to be repaired, pictures of you and/or your house may be taken. Are you willing to be interviewed by media reporters? May we bring elected officials to your home?
Yes, interviews are okay. Yes, visits by elected officials are okay.
☐ No, I do not want interviews ☐ No, I do not want visits by elected officials

SECTION 11 – Authorization, Release	e, and Homeowner's Agreement	
I/We certify that the information on this application	n is true and accurate and that I/we own the property listed on this application.	
•	in this application, my/our home is a safe place for volunteers.	
I/We understand that most of the people who may building trades; and that Habitat for Humanity of N	work on my/our house are unpaid volunteers; that few, if any of them, are skilled in the McHenry County MAKES NO WARRANTIES, EXPRESSED OR IMPLIED ORK DONE BY ANYONE AT MY/OUR PROPERTY.	
sue or attach the property of Habitat for Humanity or equipment that are used in these activities, for in	ir heirs, distributes, guardians, and legal representatives will not make a claim against, of McHenry County or any of its affiliated organizations or the suppliers of any tools jury or damage resulting from negligence or other acts, howsoever caused by any abitat for Humanity of McHenry County's activities.	
	enry County and any of its affiliated organizations from all actions, claims or demands egal representatives now have or may hereafter have for injury or damages resulting nity of McHenry County activities.	
I/We hereby agree to the terms set out in Addendu	m A to this Application (Homeowner responsibilities and expectations)	
Signed:		
Applicant	Date	
Co-applicant	Date	
Complete the following if you are not the hor	meowner, but are assisting the homeowner in completing this application:	
Your Name:		
Your Daytime Phone Number:		
CHECKLIST ATTACHMENTS		
Latest W-2 Form	Latest Mortgage Payment Statement	
Latest Pay Stub, if employed	2022 Pension/Social Security Statement showing monthly payment	
2022 Homeowner's Insurance policy	2021 Real Estate Tax Receipt	
2021 IRS Income Tax Return	Copy of DD214 Form (veterans only)	
Last two (2) Bank Statements of <u>all</u> bank accoun	ats	
NOTE: No "originals" will be acce	epted – <u>only copies</u> .	



Requirements for Critical Home Repair Applicants

1. Family income must be between 30% and 80% of the McHenry County' Area Median Income.

2022 Income Guidelines (Effective April 2022. Source: HUD)

Family Size	Minimum Gross	Maximum Gross
railily Size	Income	Income
1	\$21,900	\$ 58,350
2	\$25,000	\$ 66,700
3	\$28,150	\$ 75,050
4	\$31,250	\$ 83,350
5	\$33,750	\$ 90,050
6	\$37,190	\$ 96,700
7	\$41,910	\$ 103,400
8	\$46,630	\$ 100,050

- 2. Homes must be owner-occupied; rental properties are **not** eligible.
- 3. Scope of work must match program resources.
- 4. All able-bodied homeowners and residents of the home are requested to work alongside our volunteers.
- 5. Mortgage payments and property taxes must be current.
- 6. Property insurance must be in force.
- 7. Homeowners are expected to be cooperative partners with staff and volunteers.

Our Home Repair program is not a free program. HFHMC asks that the homeowner attempts to repay at least a portion of the cost of project materials if possible. Zero interest repayment plans are available if needed. If financial hardship precludes repayment, a forgivable "silent lien" that doesn't impact the homeowner's credit or ability to borrow may be placed against the home for a period of time according to HUD guidelines. If the home is sold within this "affordability period" defined by HUD, the lien would become due, and would be collected from the proceeds of the home sale.

If you have any questions or need any assistance feel free to contact our Community Outreach Coordinator, Jessie Flores, at 815-759-9002 x108 or jflores@habitatmchenry.org.

Programa Critical Home Repair (CHR) REQUISITOS DE ELEGIBILIDAD

1. Ingreso bruto familiar debe ser entre 30%-80% del ingreso medio del condado de McHenry al momento de la aplicación.

2022 Income Guidelines (Effective April 2022. Source: HUD)

Tamaño de familia	Ingreso Bruto Mínimo	Ingreso Bruto Máximo
1	\$21,900	\$ 58,350
2	\$25,000	\$ 66,700
3	\$28,150	\$ 75,050
4	\$31,250	\$ 83,350
5	\$33,750	\$ 90,050
6	\$37,190	\$ 96,700
7	\$41,910	\$ 103,400
8	\$46,630	\$ 100,050

- 2. La vivienda debe ser habitada por el dueño, propiedades rentadas no son aplicables.
- 3. La proporción del trabajo debe igualar a los recursos disponibles del programa.
- 4. Los pagos de hipoteca e impuestos de la propiedad deben estar al corriente.
- 5. Seguro de casa debe estar en vigor.
- 6. El solicitante debe residir en el condado de McHenry
- 7. El dueño de la vivienda debe ser un socio cooperativo, tanto con los empleados de Habitat como con los voluntarios.

El programa CHR no es un programa gratuito. HFHMC pide al dueño de la vivienda que pague por lo menos una parte del costo de los materiales, si es posible. Planes de pago con 0 interés están disponibles si se necesitan. Si dificultad financiera impiden el pago, un "Derecho de Retención" (silent lien) perdonable puede ser puesto sobre la propiedad por un periodo de tiempo determinado por HUD; este derecho de retención no impacta el crédito del dueño de la propiedad ni su habilidad de pedir préstamos. Si la propiedad es vendida dentro de un tiempo definido por HUD como "periodo razonable", el derecho de retención llegara a su término y el dinero será recolectado del ingreso que se obtenga por la venta.

Para más información o si desea llenar una aplicación llame a Jessie Flores al 815-759-9002 x108 o jflores@habitatmchenry.org.