

# Home Repair Programme Application Form

FOR OFFICE USE ONLY: (Do not write in this space)

Date received:

Name of applicants:

Ref #:

Version 2.1

### **HOME REPAIR PROGRAMME**



#### PROGRAMME OVERVIEW

Our Home Repair programme provides affordable home maintenance and repair solutions specific to your needs. From minor repair to major projects, we have developed these unique services to address challenges associated with home maintenance and repairs, helping to keep your home safe, warm, and healthy for you and your family. All work is costed by Habitat for Humanity, in conjunction with qualified trades people where necessary. We then offer an affordable repayment option based on income and ability to meet the repayments.

#### **URGENT REPAIRS**

- Any issues related to Health and Safety.
- Weather-proofing your home.
- Electrical rewiring.
- Roofing replacement.
- Wall lining replacement.

#### **NECESSARY RENOVATIONS**

- Disability access & conversions.
- Kitchen modifications.
- Wall / flooring repairs.
- Driveway repairs.
- Installation of security fittings.
- Insulation, heating, and ventilation.
- · Bathroom modifications.

#### PREVENTATIVE MAINTENANCE

- Section / drainage cleaning.
- Exterior cladding replacement or repair.
- Painting.
- Minor electrical / plumbing repairs.

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	You must	own your	own home	(with or	without	a mortgage).
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☐ Your home requires work which you are unable to afford.

	You are willing to	nartner with	Habitat for t	ha duration	of the project
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☐ You are willing and able to meet the affordable repayments.

#### **PROCESS**

- **Submit application:** Complete an application form ensuring you include all bank statements, proof of income, and a copy of identification for all applicants.
- 2. Applications assessed: The application process will assess the repairs necessary to your home, any health related issues, your income, and your debt. We will visit your home to view the necessary repairs and discuss the remainder of the process.
- **3. Application decision:** If your application is successful, we will present you with a quote including a scope of works and a suggested payment schedule.
- 4. **Project start:** If you choose to go ahead we will draw up a contract and begin work as soon as possible. Your repayments begin two weeks prior to work commencement and continues until the total loan is re-paid.
- **5. Project ends:** The partnership with Habitat comes to an end once all payments are complete. (Usually within 3-4 years as outlined in the contract.)

PHONE: 07 849 0284

CONTACT DETAILS: EMAIL: hrpcentral@habitat.org.nz

ADDRESS: Level 1, Habitat House, 422 Te Rapa Rd, Te Rapa, Hamilton

# **APPLICATION: Home Repair**



#### 1. APPLICANT INFORMATION

APPLICANT	CO-APPLICANT
Last name	Last name
First names	First names
Ethnicity	Ethnicity
lwi / hapu	lwi / hapu
DOB	DOB
CSC/Supergold # (if applicable)	CSC/Supergold # (if applicable)
Gender: Male Female Unspecified	Gender: Male Female Unspecified
Home phone Mobil	е
Email	
Address	
I / We have lived at this address for years.	
I / We own this house with mortgage without	mortgage OR we rent this house (TICK).
PERSONAL DETAILS  Do you have any other major assets, eg another home	?
HOW DID YOU HEAR ABOUT US?	
□ NEWSPAPER □ RESTORE	☐ RADIO / TV ☐ WORD OF MOUTH
AT AN EVENT FACEBOO	OK APP OTHER
☐ WINZ ☐ REFERRA	: (Please state organisation & contact.)
Would you like the use of an interpreter for the application	
YES NO If YES, which language	? [
2. HOUSEHOLD INFORMATION (WHO LIVES WITH YOU?)	
CHILDREN	(please list additional names on the back)
Child's name	Relationship to you Age

OTHER ADULTS WHO LIVE WITH YOU					
First name	Relationship to you	board payments from this adult?			
		l l			

#### 3. PRESENT HOUSING CONDITIONS

In your own words, please describe your current housing conditions and what help you want from Habitat. Please list your requirements in order of priority.

A scope of works will be completed by Habitat. Habitat may not be able to do all the work you require.

#### 4. FAMILY HEALTH

Please tick any that apply to you or your family.	
Asthma:  Flu & Colds:  Rheumatic Fever:  Bronchiolitis:  Eczema:  Pneumonia:  Strep A:  Tuberculosis:  Additional health information. (Optional)	Cancer: Disability: Heart Condition: Diabetes: Mobility: Dementia: Other:
F. EMPLOYMENT INFORMATION	
5. EMPLOYMENT INFORMATION (WHERE APPLICA	BLE)
CURRENT EMPLOYER - APPLICANT	CURRENT EMPLOYER - CO-APPLICANT
Company name	Company name
lours per week	Hours per week
ength of time at job	Length of time at job
nnual salary	Annual salary
Permanent? (Circle) YES / NO	Permanent? (Circle) YES / NO

#### 6. BANK ACCOUNTS

Please include copies of bank statements for the last three months for each account.					
Account 1: Bank name			Balance \$		
Account 2: Bank name			Balance \$		
Account 3: Bank name			Balance \$		
KiwiSaver			Balance \$		
Other Savings			Balance \$		
Other investments or major assets	ş				
7. HOUSEHOLD INCOME -	WHAT DO VOILEARNS				
How much money do you and you	r partner/spouse receive of Applicant	n a reg	ular basis, per week?  Co-Applicant	Joint Income	
Full time wages after tax	\$	\$		\$	
Basic benefit income	\$	\$		\$	
Part time/casual work	\$	\$		\$	
Accommodation supplement	\$	\$		\$	
Working for Families	\$	\$		\$	
Special Benefit	\$	\$		\$	
Disability Allowance	\$	\$		\$	
Superannuation/Pension	\$	\$		\$	
Interest/Dividend	\$	\$		\$	
Board paid to you	\$	\$		\$	
TOTAL	\$	\$		\$	
Notes about your household income (if explanation required)					
8. MORTGAGE OR RENT PAYMENTS					
MORTGAGE OR RENT Full time wages after tax	Weekly \$	\$	Monthly	Balance \$	

#### 9. OTHER EXPENSES

Who do you and your partner/spouse owe money to (as per attached bank statements)?

DEBT REPAYMENTS	WEEKLY	BALANCE	NOTES
Student loan	\$	\$	
Other loan	\$	\$	
Hire purchase - Car	\$	\$	
Hire purchase - Warehouse	\$	\$	
Hire purchase - Clothing truck	\$	\$	
Hire purchase - other	\$	\$	
Credit card - Visa / Mastercard	\$	\$	
Credit card - Q card	\$	\$	
Credit card - GE Money	\$	\$	
TOTAL DEBT REPAYMENTS	\$	\$	

#### 10. WILLINGNESS TO PARTNER

To be considered for a Habitat programme, if physically able you and your family must be willing to complete some 'sweat equity' hours - helping with the work on your home. Where possible, we will try to make work available to match your physical ability.

I / we and / or family members are willing to complete the required sweat equity hours and / or attend workshops:

O Yes O No	O Possibly (please comment)

#### 11. AUTHORISATION AND RELEASE

I understand that by filling in this application, I am authorising Habitat for Humanity to evaluate my actual need for home repair services. This may include personal visits, employment verification and a credit check.

By completing this application for credit, under the Privacy Act 2020, I consent to authorising Habitat for Humanity to pass on personal information relating to the application to its banking partner, BNZ, and the credit bureau who may use the information to update their databases and for providing information services to its subscribers and other lawful purposes.

If a copy of Drivers Licence has been given as photo identification, I consent to Habitat for Humanity accessing license verification from Waka Kotahi NZ Transport Agency. I also acknowledge that the information contained in this application may be retained by Habitat for Humanity. I have answered all the questions on this application truthfully and confirm no relevant information has been withheld. I have attached a copy of my/our bank statements for the past three months.

Habitat is unable to accept digital signatures, we need an original copy on file. Please print document and sign with a pen.

Applicant signature	Co-applicant signature
Date	Date

#### CHECKLIST

Please confirm you've completed the following information.	
1. Applicant Information 2. Household Information 3. Present Housing Conditions 4. Family Health 5. Employment Information 6. Bank Accounts 7. Household Income 8. Mortgage or Rent Payments 9. Other Expenses 10. Willingness to Partner 11. Authorisation and Release 12. Additional Information (Optional)  Please confirm you have provided the following additional documentation.	
Copies of all bank account statements from the past 3 months.  Proof of income from the past 3 months.  Statements for all credit cards and store cards from the past 3 months.  Proof of balance owed on mortgage. (Statements indicating names, address, transactions, and balance due from the past 3 months.)  Copy of photo identification for applicant and co-applicant.  Title Deed / Rates bill / Watercare bill (At least one of these is required. No older than 3 months).	

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## **HOME REPAIR PROGRAMME**



13. ADDITIONAL IN	NFORMATION (OPTIONAL)	
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