

# APPLICATION: Home repair



Referral source:

## APPLICANT

Last name

First names

Ethnicity

Iwi / hapu

CSC/Supergold # (if applicable)

Age: 16-19 20-40 41-65 65+ (tick one)

Gender: Male Female Unspecified

## CO-APPLICANT

Last name

First names

Ethnicity

Iwi / hapu

CSC/Supergold # (if applicable)

Age: 16-19 20-40 41-65 65+ (tick one)

Gender: Male Female Unspecified

Home phone  Mobile

Email

Address

I/we have lived at this address for  years.

I/we/I own this house with mortgage without mortgage OR we rent this house (TICK).

## PERSONAL DETAILS

Couple Single person Widow/widower Extended family Other

## CHILDREN (who will be living with you)

(please list additional names on the back)

Child's name	Relationship to you	Age
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
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## OTHER ADULTS WHO LIVE WITH YOU

(please list additional names on the back)

Last name	First name	Relationship to you	Are you receiving board payments from this adult?
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>





## BANK ACCOUNTS

Please include copies of bank statements for the last three months.

Account 1: Bank name ..... Balance \$ .....

Account 1: Bank name ..... Balance \$ .....

Account 1: Bank name ..... Balance \$ .....

Other investments or major assets.....

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## HOUSEHOLD INCOME - WHAT DO YOU EARN?

How much money do you and your partner/spouse receive on a regular basis, per week?

	Applicant	Spouse	Others in household
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).....

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## MORTGAGE OR RENT PAYMENTS

MORTGAGE OR RENT	Weekly	Monthly	Balance
Mortgage or rent payment	\$	\$	\$

## OTHER OUTGOINGS - WHAT DO YOU OWE/PAY?

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

DEBT REPAYMENTS	Weekly	Balance	Notes
Student loan			
Other loan (eg bank)			
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			
<b>TOTAL DEBT REPAYMENTS</b>	<b>\$</b>	<b>\$</b>	

## WILLINGNESS TO PARTNER

To be considered for a Habitat programme, you and your family must be willing to complete some 'sweat equity' hours - helping with the work on your house. 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 work-shops:

Yes  No  Possibly (please comment) .....

.....

.....

## AUTHORISATION AND RELEASE

I understand that by filling in this application, I am authorising Habitat for Humanity (Central North Island) Ltd 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 1993, I consent to authorising Habitat for Humanity (Central North Island) Ltd to release my application information to its banking partners, if required, as part of the credit process. I also acknowledge that the information contained in this application may be retained by Habitat for Humanity (Central North Island). 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.

Applicant signature ..... Co-applicant signature.....

Date ..... Date .....

