

omeowner Name: Co-owner Name:							
Property Address:							
Primary Phone Number:I	Email:						
Number of residents in home: Age(s) of reside	nts (check all that apply): 0-17 yrs 18-64 yrs 65+						
Is applicant the owner and a primary resident at property?	YesNo Is applicant a renter? YesNo						
If applicant does not reside at the property, what is your re	lationship to the resident?:						
Is any household member a US Veteran? Yes No	If Yes, please provide form DD214 with your application.						
Does any household member have accessibility issues? Ye	esNoIf Yes, we will evaluate the home for ramp installation.						
What year was your home built? Do you	u have current homeowners insurance? Yes No						
Mobile Home? Yes No Duplex? Yes No	HOA? Yes No Reverse Mortgage? Yes No						
Do you own any other property? Yes No Has H	abitat previously worked on the property? Yes No						
What type of repairs are you interested in?							
Landscaping/Yard Cleanup Fencing E	xternal Paint Dry Rot Gutter Cleaning						
HVAC Roof Replacement Pest Abateme	ent Windows Water Heater Replacement						
Energy Efficiency Repairs Other (please specif	y)						
Please tell us about the condition of your home and about	the needed repairs:						
Tell us about your family, and how these repairs would imp	pact you and your family:						
Please also submit the following REQUIRED documents witl	n your application:						
a. Proof of ownership of property (most recent mortgage statem	,						
 Proof of current homeowners insurance (current homeowners Most recent year tax return for anyone over 18 in the househouse 	insurance policy declaration page). bld; if you do not file taxes, please email repair@habitatgreatersac.org to						
discuss other options for confirming financial qualification for							
d. CA driver's license or other identification for anyone over 18 i	the household.						
If my property is selected as a project	t site, I agree to the following (initial on each line):						
	hose who are not physically able to help with repairs or have conflicts can						
participate in other volunteer opportunities I understand that I may need to provide additional financial in	formation and a complete loan application depending on the scope of the						
· · · · · · · · · · · · · · · · · · ·	nity of Greater Sacramento to take any actions reasonably necessary to						
substantiate the information I have provided or otherwise esta consumer report and background check, and Habitat may reju	ablish my suitability as an applicant, including but not limited to a complete ect this application based upon the results of these inquiries.						

I understand that a member of the Habitat for Humanity of Greater Sacramento team will schedule an appointment with me to review

the work to be done on my home and to complete a formal Homeowner Partner Agreement prior to the project.

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information or based on whether or not you choose to provide it. If you choose not to provide the information, we will note it by visual observation or surname.

☐ I do not wish to furnish this	Intormation	Ethnicity:			
Race/National Origin (applicant may select more than one		☐ Hispanic or Latino			
racial designation):	1.00	☐ Cuban ☐ Mexican ☐ Puerto Rican			
☐ American Indian or Alaska I	Native	☐ Other:			
□ Asian		☐ Non-Hispanic or Latino			
☐ Asian Indian ☐ Ch	•	Gender:			
☐ Japanese ☐ Ko	rean Vietnamese	☐ Female ☐ Male ☐ Non-binary			
☐ Other:		☐ Other ☐ Prefer not to Respond			
☐ Black or African American		Other	□ Preier not to	Respond	
☐ Native Hawaiian or other Pa	cific Islander	Birthdate:	/		
☐ Guamanian or Char	norro	Marital statu	IS:		
☐ Native Hawaiian	☐ Samoan	☐ Married	☐ Separated	☐ Unmarried	
☐ Other:			·		
☐ White		Do any of the following apply to any household member?			
☐ Other:		☐ Disabled			
		☐ Veteran	☐ LQBTQIA+		
Habitat for Humanity of Great	ter Sacramento Experience a	ind Feedback:			
How long have you lived	How would you describe	How would yo	ou describe	In general, my	
in your home?	the appearance of your neighborhood (e.g.	your relationship with your neighbors?		neighborhood is a good place to live.	
☐ Less than 1 year	roads, houses, yards)?	□ Excellent		☐ Strongly Agree	
☐ 1-5 years	☐ Excellent	□ Good		☐ Agree	
☐ 6-10 years	□ Good				
☐ Over 10 years	☐ Average	☐ Average		□ Disagree	
	□ Poor	☐ Poor		☐ Strongly Disagree	
What is your preferred language	Vhat is your preferred language?		hear about our pr	ogram?	
-		☐ Habitat W	vebsite □ So	ocial Media	
If English is not your primary language, is there an English speaker who can help with the application process? \(\subseteq \text{Yes} \subseteq \text{No} \) Our organization uses a live translation service for phone calls. Would you like us to use that when we call you?		☐ Postcard	□ Fly	/er	
		☐ Other media (type):			
		☐ Organization (name):			
		☐ Word of Mouth (who):			
☐ Yes ☐ No		☐ Other (please specify):			
		Other (prease specify).			
Applicant Signature(s)			Dat	te	

Return completed application to Habitat for Humanity of Greater Sacramento via either:

- Mail to 819 N. 10th Street, Sacramento, CA 95811 OR
- Email to Repair@habitatgreatersac.org

For more information, email Repair@habitatgreatersac.org or call (916) 440-1215 ext. 1118



Disclosure and Authorization for Consumer Reports

In connection with my application for employment or promotion or other job change and/or in connection with my desire to provide volunteer services, and/or to become a home owner/family partner with Habitat for Humanity of Greater Sacramento (the Company), I understand the Company may obtain an INVESTIGATIVE CONSUMER REPORT that will include information as to my character, general reputation, personal characteristics and mode of living. This report may reveal information about work habits, including oral assessments of my job performance, experiences and abilities, along with reasons for termination of past employment. Such a report may be requested by the Company or on behalf of the Company. Further, I understand and agree that, subject to any legal restrictions imposed by any federal, state or local law, the Company may request information from various federal, state, and other agencies, including public and private sources which maintain records concerning my past activities relating to my driving record, criminal record, civil matters, previous employment, educational background and professional licensing if any.

Credit report will be ordered from: Factual Data Consumer Reporting Agency Name 5100 Hahns Peak Drive Loveland CO 80538 Address City State Zip (800) 929-3400 Telephone www.factualdata.com Consumer Reporting Agency Internet Address Criminal Background report will be ordered from: **Backgrounds Online** Consumer Reporting Agency Name 1915 21st Street Sacramento CA 95811 Address City State Zip (800) 838-4804 Telephone www.backgroundsonline.com

You have the right, upon written request made within a reasonable period of time (not to exceed 30 days) after receipt of this notice to receive a written disclosure of the nature and scope of any investigation.

Consumer Reporting Agency Internet Address

If a consumer investigative report is obtained and an adverse decision is made affecting your employment, volunteer status, or homeownership the Company will provide to you, before making the adverse decision, a copy of the investigative consumer report and a description in writing of your rights under the Fair Credit Reporting Act.

NOTICE TO CALIFORNIA APPLICANTS

You have a right to obtain a copy of any investigative consumer report obtained by Habitat for Humanity of Greater Sacramento by checking the box provided below. The report will be provided to you within three business days after the report is provided to Habitat for Humanity of Greater Sacramento.

I request to receive a free copy of this report by checking this box.

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by the consumer reporting agency named above during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at the Consumer Reporting Agency identified above in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

I acknowledge that a fax or copy of this Disclosure and Authorization bearing my signature shall be as valid as the original. This release is valid for all federal, state, county and local agencies and authorities. I acknowledge that I have received a copy of the Summary of Rights pursuant to the Fair Credit Reporting Act (FCRA).

First Name	Middle Name	Last Name		
Address	City	State	Zip	
() Home Telephone	SSN	Email Add	lress	
Date of Birth	Driver's License #			
Applicant Signature		 Da	te	

^{*}This form must be completed and submitted for anyone 18 or over in the household.