

Home Sweet Home Community Redevelopment Corp



Greater Houston Disaster Recovery

Assistance Application

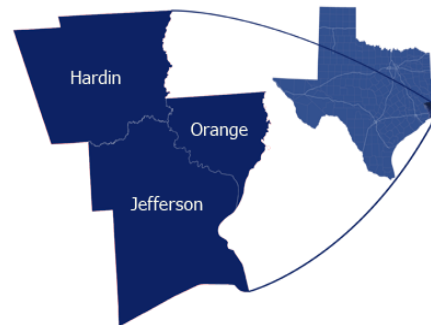
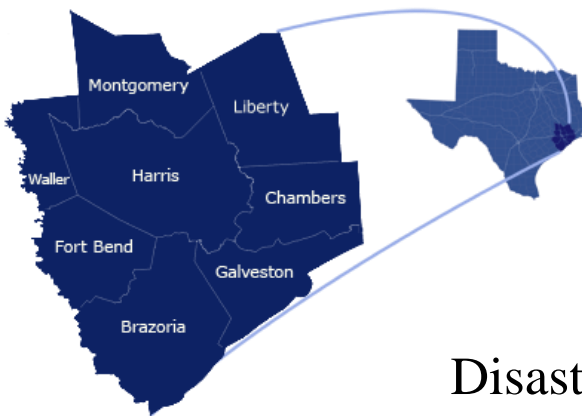
*For: Houston, Harris, Montgomery, Humble, Woodland, Jefferson and
Waller*

Food Program

Rehab or Rebuild Program

Disaster Assist

Foreclosure



Disaster Recovery Program - 2016
Attn: Case Management – Unmet Needs
9001 Airport Blvd Suite 703
HOUSTON, TEXAS 77061
713-941-4000 OFFICE

No Faxes will be allowed.

Office Hours: Monday – Friday 10am – 4pm
We only see clients by appointment only.



“Building better homes so that you will have quality living”

APPLICATION: For Assistance

Name of Owner's: _____

Spouse Name: _____

Applicant **Spouse**
Social Security Number: _____ **Social Security Number:** _____

Applicant **Spouse**
Date of Birth: _____ **Date of Birth:** _____

Why are you coming to us for assistance? Home Repair, Food, Utility, Mortgage, Foreclosure, Home Buying or Rental Programs (Please Circle)

Telephone Number(s)

Home Number _____

Office Number: _____

Alt Number: _____

Address of: _____

Nature of Disable: _____

Problem with home: _____

Has Home Sweet Home CRC repaired your home before? _____ **Yes** _____ **No**

If yes, explain? _____

Are you using the Reverse Mortgage Program, FEMA, Loan or etc.?

Yes _____ **No** _____

If yes, explain why you need our services: _____

Do you want a new home or rehab home? (Circle) Yes or No

Do you have a place to live, while your home is being built? Yes, or no

If yes, please explain where you will be living name address phone. _____

Are we able to walk thru your home? Yes, or no, if no explain _____

Do you own your property? Yes, or no

What is the address or description: _____?

What is the name of the subdivision: _____?

Have you received any income or assistance from any church or other non profit organization in the last 3 months? If yes, List: _____

Home Sweet Home only uses their plans and financial approved companies for new projects.

We do not use outside plans or lenders because you will have to pay for all extra cost.

Please list all of your asset and liabilities

Address type of property Value Mortgage/Rent Total

Income

Address	type of property	Value	Mortgage/Rent	Total

List any names under which credit has been received and indicate appropriate creditor name(s) and account(s) number(s)

Are you a U.S. citizen? Yes ___ No ____

Are you a Permanent resident alien? Yes _____ No _____

Do you intend to occupy the property as your primary residence? Yes ___ No _____

Have you had ownership interest in a property in the last three years? Yes _____ No _____

What type of property did you own-principal reside Nance _____ (PR), second home _____ (SH) _____ invested property (IP)?

Is there any outstanding judgment against you? Yes _____ No _____

Have you been discharged in bankruptcy within the past 7 years? Yes _____ No _____

Are you part of a Lawsuit? Yes _____ No _____

Please explain what kind of assistance you need from our organization? _____

Have you ever had a foreclosure in past 10 years? Yes _____ No _____

If yes, explain _____

Do you have a mortgage or Judgment against your property? Delinquent taxes are Judgments.

Yes, or No If yes, please give us an exact amount or round figure. We maybe able to help individuals with delinquent taxes. _____

Please list all Home Repair organization please all that you have ask for assistance. If you were referred by an organization, please list that organization.

If you have a decline of service letter for assistance, please attach letter.

Employment History / Income Verification

Company Name: _____

Address, City, State, Zip: _____

Supervisor Name: _____ Phone: _____

Year at company: From _____ to: _____ Position: _____

Salary: _____ Bi-weekly, Monthly, Weekly Temporary _____ or Permanent

Bonus Check during the year _____

Company Name: _____

Address, City, State, Zip: _____

Supervisor Name: _____ Phone: _____

Year at company: From _____ to: _____ Position: _____

Salary: _____ Bi-weekly, Monthly, Weekly Temporary _____ or Permanent

Bonus Check during the year _____

MONTHLY BILLS
(Please attach all copies)

***Proof of homeownership** _____ **Harris County Tax Receipt**

***Mortgage Receipt** _____ **Bring a copy of the bill**

***RENT** _____ **Rental Agreement**

***LIGHT** _____ **Copy of updated bill**

***PHONE** _____ **Copy of updated bill**

DAYCARE	_____	_____	_____	_____
	AMOUNT	CHILD	AMOUNT	ADULT PLACE

***FOODSTAMPS/TANF** _____ **(Award Letter)**

***Social Security** _____ **(Award Letter)**

***Payroll Checks** _____

***Other Benefit or Payment checks:** _____ **Bring Copies**

***CAR NOTE** _____

***CAR INSURANCE** _____

LUNCH MONEY FOR CHILDREN _____

LUNCH MONEY FOR THE FAMILY _____

***CABLE** _____

***WATER** _____

***GAS** _____

HEALTH INSURANCE	_____	_____	_____
	CHILD		ADULT

MONTHLY MEDICAL _____

MONTHLY DOCTOR OFFICE VISIT's _____

CLOTHING	_____	_____	_____
	CHILD		ADULTS

Other Income	_____	_____	_____
	CHILD		ADULTS

PLEASE BRING COPIES OF ALL BILLS

Have you had FEMA, City of Houston, or any other home emergency repair program to help you with the repair of your home? Yes, or No if yes, when and what did they do for you. Our office will contact FEMA and other programs before any assistance may begin. It may take 3 to 6 months before any home repairs will begin.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal government for certain types of reporting related to certain procurement procedure in order to monitor Home Sweet Home Community Redevelopment Corporation. compliance with Executive Order 11246 equal employment Laws. You are not required to furnish this information, but are encouraged to do so. The law provides that Home Sweet Home Community Redevelopment Corporation. may not either discriminate on this basis of this information, nor on whether you chose to furnish it. However, if you choose not to furnish it Home Sweet Home Community Redevelopment Corporation. is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.

Applicant Race/ National Origin:

I do not wish to furnish this information _____
American Indian or Alaskan Native _____
Asian or Pacific Islander _____
Black, not of Hispanic Origin _____
White, not of Hispanic Origin _____
Hispanic _____
Other _____
Sex: Male _____ Female _____

Co-Applicant 1 Race/ National Origin:

I do not wish to furnish this information _____
American Indian or Alaskan Native _____
Asian or Pacific Islander _____
Black, not of Hispanic Origin _____
White, not of Hispanic Origin _____
Hispanic _____
Other _____
Sex: Male _____ Female _____

Do not write on this line:

TO BE COMPLETED BY INTERVIEWER
FACE-TO-FACE _____ BY MAIL _____ BY TELEPHONE _____

INTERVIEW'S NAME (PRINT)

DATE

INTERVIEW'S SIGNATURE

Interview's Phone Number (Including area code)
Only fill out this form if you are receiving home repairs with us.

SUPPLEMENTAL SIDE AGREEMENTS POLICY

Homeowner must be made aware of SUPPLEMENTAL SIDE AGREEMENTS as made during the course of their relationship with the Builders and the Home Repair Program. A side deal is an agreement written or verbal between a Builder and property Owner made prior to or during the course of rehabilitation contract funded through the program that is not within the scope of the agreed upon specification.

The policy of Home Sweet Home Community Redevelopment Corporation is that under no circumstances should a contractor consummate a side deal. An agreement of this nature can place the contractor in a situation resulting in temporary or permanent debarment from participation in the program.

Under no circumstances should the Homeowner agree with the Builder to perform work outside the scope of approved work specifications. The Homeowner is to notify the program staff of any side deal request by a Builder.

I _____ and _____ will respect the contractors at all times, if any problems shall arise, client will report it to the office immediately.

I _____ and _____ will not offer any food, money, place to live or any other services to the contractor and their staff.

I _____ and _____ will remove all valuable from my home while my home is being rehab or rebuilt. I understand that Home Sweet Home Community Redevelopment Corporation will not be responsible for any of my valuable that are stolen or removed from my home.

I certify that on behalf of _____
And having carefully read the statement on side deals, we are aware of it and will refrain from participation and will notify the program should there be a request from the Builder of the nature describe above.

Signature

Date

Signature

Date

Sworn to and subscribed before me this _____ day of _____, 20_____

Notary Public, Harris County, Texas

Please list everyone that lives in the household with you. This information will be check through the Texas Department of Public Information for everyone living with you or use this address. If you are living along and some is using your address, please note that they are using address only and have them show proof of their residents.

Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
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Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship
Full Name (First Middle Last)	Birthday Date	Relationship

If spouse is not in the home, where are they located? If this person has passed, please list Date of Death. (Show proof)

Full Name (First Middle Last)	Date of Death	Relationship
Address: (Street, City, State Zip Code)		Reason

This form is for our Senior Assist Living Program only.
HOME SWEET HOME COMMUNITY REDEVELOPMENT
Guidelines to a new home for senior citizens

In order to be eligible for our new home purchase program, you will have to qualify under these guidelines.

1. You must be 62 or older to use the Reverse Mortgage Loan program.
2. You must follow all of the HUD approve guideline to seeking a counselor for a certificate. We have a list of counselors in the Houston Area but you may choose any counselor that is certificated by HUD approve list. www.hud.gov or www.aarp.gov click or type Reverse Mortgage.
3. If you are not using a Reverse Mortgage to purchase your home, we have a lending that will qualify you for a loan that you will be responsible for paying back on a monthly payment.
4. We also will be in house financing some of our homes. Rental is available in the subdivision property only.
5. If you are a first time homebuyer you must go through a certificated First time homebuyer class. Classes will be held every other Saturday at our office. You may choose a company this is listed on the HUD website as a Housing Counselor.
6. You will see one of our counselors to choose a property or home for you.
7. Once you have chosen a home and we have placed the home on your property you are responsible for that home. (No cancellation will be allowed)
8. If you cancel you will be place at the bottom of the list. (Unless due to illness).
9. No one that is seriously ill will be able to place an application. Disability letter must be submitted to qualify as a disability client.
10. If a spouse is not disable or 52 or older they will not be allowed to have their name on the Deed of the home until they reach 62 or become disable.
11. All homes will take up to 45 days to be completed.
12. All homes are place on a slab foundation.
13. A garage or wooden carport is available on all homes.
14. All homes are under warranty as long as 10 years. You my not break into a wall or your warranty will be cancelled.
15. No children will be allowed in the subdivision without courts approval **15 and under only**

Please bring the following items with you to your meeting, or mail these items in with your Application.



1. Driver License or ID
2. Birth Certificate of everyone in the Household
3. Social Security Cards for everyone in the Household
4. Copy of Mortgage or Lease
5. 3 bills (Light, Water, Gas, Telephone, Cable,)
6. Copy of Insurance Rental, Homeowner and/or Flood
7. Copy of the damages to your property
8. Estimated Repairs amount (if you have a contractor that would like to work on your property they must fill out our contractor application). Estimate will still be accepted.
9. If you taking a small loan out on your property, please bring 6 month of bank statements: Front and back copies. If not original, it must have banking seal.
10. Appraisal District Report (www.hcad.org or etc.)
11. Copy of Car Note/Payments or Copy of Title
12. Last 2-year Tax return if you have not file for 2015, please bring 2014, 2013, 2012
13. Copy of Hotel Bill
14. If you would like for us to file for your FEMA funds, please bring your Award letter.
You must apply for FEMA or 311 before we will assist you with home repairs.