

Office Use Only
Received: _____
Qualified: _____
Brush Up: _____



BRUSH UP

2316 S 24th Street • Omaha NE 68108

Phone: 402-965-9201 • **Fax:** 402-763-9308 • **Email:** info@projecthouseworks.org

Please call if you have any questions about this application or our services.

Office Visits by appointment only.

INSTRUCTIONS FOR HOMEOWNER APPLICATION

****ALL documents must be sent with your application.**

If we do not receive ALL necessary documents with your application, the review and approval of your application will be delayed significantly.

****Please send all that apply to your household. ****


- APPLICATION filled out completely.**

- BANK STATEMENTS (2 months) for ALL accounts (checking, savings, CD, etc.) for ALL adults age 18+ in the home.**

- INCOME DOCUMENTATION for ALL adults age 18+ in the home.** Send all documents that apply to your household:
 - ◆ Social security income: Explanation of Benefit Letter for current year.
 - ◆ Wages/Child Support: Two months' pay stubs
 - ◆ Pension/Annuity/Retirement income: Current statement showing the amount and payment schedule (ie: monthly, biweekly etc.)
 - ◆ ANY other source of income (rental, self-employment, etc.): a statement verifying the amount of income.

- FINANCIAL DOCUMENTATION for the applicant/applicant's spouse.**
For stocks, bonds, retirement accounts (IRA, 401K, etc.) or any other assets with cash value, send a statement dated within the past two months showing the current value

- MORTGAGE / REVERSE MORTGAGE -- if applicable send most current statement**

-  I am interested in free home repairs and modifications.
(Roofs, Electrical, Plumbing, flooring, tub to shower conversions, grab bars)

Other documentation may be requested for clarification at a later date.

HOUSEHOLD INFORMATION

Applicant Name: First _____ Middle _____ Last _____

Spouse Name: First _____ Middle _____ Last _____

Address: _____

City: _____, State _____ Zip Code: _____

Phone (HOME): _____ Phone (CELL): _____

EMAIL: _____

What is the best way to reach you? Home phone Cell phone Email

Date of Birth: (mm/day/year) _____ AGE: _____

Gender: Male Female

Marital Status: Please Circle

Married Unmarried Separated Divorced Widowed

Alternate Contact (Friend or Relative living in the area that we can contact if needed)

Name: _____ Relation _____ Phone # _____

**The information below is used for statistical reporting
and is not used for qualifying purposes.**

Are you a Veteran? Yes No Branch: _____ Years Served _____

Spouse of a Veteran? Yes No Branch: _____ Years Served _____

Physical Disabilities

Do you or your spouse have a physical disability that limits your mobility in your home? (Please list below)

Ethnic Categories	Select One:
Hispanic or Latino	<input type="checkbox"/>
Not Hispanic or Latino	<input type="checkbox"/>
Racial Categories	Select all that apply
American Indian or Alaska Native	<input type="checkbox"/>
Asian	<input type="checkbox"/>
Black or African American	<input type="checkbox"/>
Native Hawaiian or Other Pacific Islander	<input type="checkbox"/>
White	<input type="checkbox"/>
Other	<input type="checkbox"/>

Please see instructions

INCOME AND ASSETS

APPLICANT INCOME AND ASSETS

**List all income and assets for the Applicant. **Provide all supporting documents.

Applicant Income	Monthly Gross Amount
Social Security	\$
Pension/Annuities	\$
Salary/Wages	\$
Other Income	\$
TOTAL MONTHLY INCOME	\$

Applicant Assets	Current Value
401K / IRA	\$
Stocks or Bonds	\$
Savings	\$
Other	\$
TOTAL CURRENT VALUE	\$

HOUSEHOLD OCCUPANTS

List all others living in the home.

**If 18 or older include income and supporting documents.

** If more space is needed please contact our office for a second form.

Name	Relation	Birthdate	Type of Income	Monthly Amount

PLEASE CIRCLE ANSWERS BELOW:

Is the house titled in your name? Yes No

Are there others listed on the deed/title of the property? Yes No

If yes—list names of those on deed/title _____

Are there any legal proceedings over the ownership of your home? Yes No

Do you have a Mortgage / Reverse Mortgage? Yes No

If yes—send current monthly statement

Do you reside in the home? Yes No

Do you plan to stay in your home? Yes No

Is the home a mobile or pre-manufactured home? Yes No

The house is a: One Story One and one-half story Two Story Three Story

Do you own property (land or homes) other than the home you live in? Yes No

Do you have homeowners insurance? Yes No

What is the name of the insurance company: _____

How many years have you owned the home? _____

How many bedrooms are in the home? _____

What is the name of your neighborhood? _____

Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

A. General Instructions:

This form is to be completed by the head of household for those wishing to be served (applicants) and those that are currently served (tenants/owner-occupants) in housing assisted by the Department of Housing and Urban Development.

If the assisted property is a rental unit, the owner or agent is required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed, it need not be completed again unless the head of household changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. Completed documents should be placed in the household's file.

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs.

1. The two ethnic categories you should from are defined below. You should check one of the two categories.
 - A. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race. The term of "Spanish origin" can be used in addition to "Hispanic" or "Latino".
 - B. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
2. The five racial categories to choose from are defined below: You should check as many as apply to you.
 - A. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
 - B. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
 - C. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Hatian" or "Negro" can be used in addition to "Black" or "African American".
 - D. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 - E. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

