



Greater Blessing Home Repair Application

Return completed application and all requested documents to:

Greenwood-Leflore Fuller Center for Housing Incomplete
PO Box 9306 Complete
Greenwood, MS 38930

Dear Applicant: We need you to complete this application to determine need for your repair project. Please fill out the application as completely as possible and attach any documents that are requested. Incomplete applications will not be considered until all requested documentation has been submitted to the address above. All information on this application will be kept strictly confidential.

1. APPLICANT/CO-APPLICANT INFORMATION

Applicant's Name		Co-Applicant's Name	
Date of Birth	Age	Date of Birth	Age
Home Phone	Best Time To Reach	Home Phone	Best Time To Reach
Work Phone	Best Time To Reach	Work Phone	Best Time To Reach
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (single, divorced, widowed)	
Dependents and Others that live with you (not listed by co-applicant)		Dependents and Others that live with you (not listed by applicant)	
Name	Age	Name	Age
Home Address (street, city, state, zip code)		Home Address (street, city, state, zip code)	
Number of Years:	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Number of Years:	<input type="checkbox"/> Own <input type="checkbox"/> Rent

Please describe the repairs requested in the box below

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

Date Application Received _____	More Information Requested: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Letter Sent _____
Date Application Completed _____	Date Sent to Committee _____	
Date of Home Visit _____	<input type="checkbox"/> Accepted <input type="checkbox"/> Denied	Date Letter Sent _____

Do you have homeowners insurance? Yes _____ No _____

If so, please list your homeowner's insurance company name _____

Please list your homeowner's insurance policy number _____

Do you own other land or property? No Yes

-If yes please list address of other land or property _____

2. MONTHLY INCOME AND COMBINED MONTHLY BILLS

Gross Monthly Income	Applicant	Co-Applicant	Others in Household	Monthly Bills	Monthly Amounts
Base Employment Income*	\$	\$	\$	Rent/Mortgage	\$
AFDC/TANF				Utilities	
Food Stamps				Car Payments	
Social Security				Insurance	
SSI				Child Care	
Disability				School Lunches	
Alimony				Credit Card Payment	
Child Support				Student Loans	
Other (specify)				Alimony/Child Support	
TOTAL	\$	\$	\$	TOTAL	\$

3. AUTHORIZATION, RELEASE & PRIVACY ACT AGREEMENT

I understand that by filing this application, I am authorizing the Greenwood-Leflore Fuller Center for Housing to evaluate my actual need for repairs to my home. I own my home and it is my intent to live in that home for at least the next 5 years and my willingness to be a partner family. I understand that the evaluation will include personal visits. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied. By signing you further agree to allow Greenwood-Leflore Fuller Center for Housing to use photographs, videos and other media taken of you, your family and your home to promote The Fuller Center mission. I have read this agreement and understand that my application and all the attached documentation will be maintained in the Greenwood-Leflore Fuller Center for Housing files whether I am approved for a Greater Blessing project or not. I understand that information contained in the application packet will be kept in utmost confidence and not shared with any other person or organization outside the Greenwood-Leflore Fuller Center for Housing.

This is to acknowledge that I have read and understand the details of the Authorization, Release and the Privacy Statement.

Applicant Signature _____ Date _____ Co-Applicant Signature _____ Date _____
 X _____ X _____