



## Critical Home Repair Program

### Home Preservation & Aging-in-Place

Thank you for your interest in Two Rivers Habitat for Humanity's Critical Home Repair Program. Two Rivers Habitat's work through the Critical Home Repair Program will include handicap accessibility modifications (wheelchair ramps, grab bars, and handrails), roof, plumbing, electric, and weatherization repairs, and other health and safety home repairs. The Critical Home Repair Program is **NOT** an emergency repair program; there could be a months-long waiting period for repair work to be done.

#### **Eligibility Criteria for the Critical Home Repair Program are as follows:**

- You must own the home where the repairs are to be made.
- You must occupy the home as your primary residence.
- You (or a member of your household) must have a need that makes the requested repairs necessary.
- Your household income must fall between 20%-80% of A.M.F.I. (Area Median Family Income). *See income guidelines listed below on page 2.*
- Those receiving Critical Home Repair services must be present during the duration of the repair work. Any able-bodied household members must help during the project (where applicable). Other friends and family (not in the household) are also encouraged to participate.
- Applicant must demonstrate willingness and ability to pay for project cost based on a sliding scale. *(These criteria are subject to change.)*
- The home must be located in either Dodge, Olmsted, Wabasha, Steele, or Waseca County.

#### **Important to understand:**

- **Homeowners will have to pay for Critical Home Repair services based on a sliding scale based on household income**
- We may only be able to commit to part of what a house needs
- Cost for project will include materials and contracted labor
- Upon acceptance into the program, participants must agree to a payment plan, which will begin immediately. Applicant must be current with plan to remain eligible. All pre-payments will be held in escrow until project is begun. If applicant withdraws from the program or is disqualified for any reason prior to beginning the project, 100% of escrowed funds will be returned to the applicant.
- No interest will be charged
- Participants will be required to sign a promissory note for balance of payment not paid before project completion

**Two Rivers Habitat for Humanity**  
**Critical Home Repair Program**  
**1530 Greenview Dr. SW Ste. 107**  
**Rochester, MN 55902**  
**507.252.0849 ext.205 OFFICE**  
**507.292.0635 FAX**  
[www.tworivershabitat.org](http://www.tworivershabitat.org)  
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## Critical Home Repair Program – Income Guidelines

(20% - 80% of Area Median Family Income)

**Median Income**

\$69,308

	1-person	2-person	3-person	4-person	5-person	6-person	7-person	8-person	10-person
<b>80%</b>	38812	44357	49902	<b>55446.4</b>	59882	64318	68754	73189	95190
<b>75%</b>	36387	41585	46783	<b>51981</b>	56139	60298	64456	68615	89241
<b>70%</b>	33961	38812	43664	<b>48515.6</b>	52397	56278	60159	64041	83292
<b>65%</b>	31535	36040	40545	<b>45050.2</b>	48654	52258	55862	59466	77342
<b>60%</b>	29109	33268	37426	<b>41584.8</b>	44912	48238	51565	54892	71393
<b>55%</b>	26684	30496	34307	<b>38119.4</b>	41169	44219	47268	50318	65443
<b>50%</b>	24258	27723	31189	<b>34654</b>	37426	40199	42971	45743	59494
<b>45%</b>	21832	24951	28070	<b>31188.6</b>	33684	36179	38674	41169	53545
<b>40%</b>	19406	22179	24951	<b>27723.2</b>	29941	32159	34377	36595	47595
<b>35%</b>	16980	19406	21832	<b>24257.8</b>	26198	28139	30080	32020	41646
<b>30%</b>	\$14,554.68	\$16,633.92	\$18,713.16	<b>\$20,792</b>	\$22,455.79	\$24,119.18	\$25,782.58	\$27,445.97	35696.3923
<b>25%</b>	\$12,128.90	\$13,861.60	\$15,594.30	<b>\$17,327</b>	\$18,713.16	\$20,099.32	\$21,485.48	\$22,871.64	29746.9936
<b>20%</b>	\$9,703.12	\$11,089.28	\$12,475.44	<b>\$13,862</b>	\$14,970.53	\$16,079.46	\$17,188.38	\$18,297.31	23797.5949

<https://www.census.gov/quickfacts/fact/table/olmstedcountyminnesota/INC910216#viewtop>



EQUAL HOUSING  
OPPORTUNITY

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## Critical Home Repair Program Application

**Dear Applicant:** We need you to complete this application to help determine if you qualify for Two Rivers Habitat for Humanity's Critical Home Repair Program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential.

### Applicant Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Years at Address: \_\_\_\_\_

Do you own the home where work is to be done? YES or NO

Do you live in the home where work is to be done? YES or NO

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Marital Status:  Married  Separated  Unmarried (Single, Divorced, Widowed)

Has anyone living in your household **served in the military**?  Yes  No

Name: \_\_\_\_\_

Is anyone in your household disabled?  Yes  No Name: \_\_\_\_\_

Have you ever applied to Two Rivers Habitat for Humanity before? \_\_\_\_\_

If yes, when? \_\_\_\_\_

Do you have pets? \_\_\_\_\_ If yes, what kind and how many? \_\_\_\_\_

Number of persons living in your home (including applicant): \_\_\_\_\_

## Household Income and Mortgage Information

The **total, combined** income **before taxes** for **ALL** persons in the household is:  
\$\_\_\_\_\_ per **year**.

Are you making loan payments on your home? YES or NO

If yes, what is your monthly payment? \$\_\_\_\_\_/month.

Are your loan payments current? YES or NO

Do you currently have homeowner's insurance? YES or NO

### Home Information

Year Built: \_\_\_\_\_ Year Purchased: \_\_\_\_\_

**Circle One:** Mobile Home   1 Story   1.5 Story   2 Story   2.5 Story

## Requested Repairs:

Please check (✓) the types of repairs or modifications you are requesting for your home.

### Ramps, Rails, Accessibility

\_\_\_\_\_ Ramp access to primary entrance

\_\_\_\_\_ Hand Rail to primary entrance

\_\_\_\_\_ Grab bars in bathroom

\_\_\_\_\_ Lever handles to doors and faucets

\_\_\_\_\_ Rocker panel light switches

\_\_\_\_\_ D-shaped cabinet handles

\_\_\_\_\_ Non-slip floor strips

### Critical Home Repair

\_\_\_\_\_ Roof Replacement/Repair

\_\_\_\_\_ Plumbing repair

\_\_\_\_\_ Electrical repair

\_\_\_\_\_ Floor repair

### Weatherization

\_\_\_\_\_ Insulating & sealing walls and attics

\_\_\_\_\_ Installation of new ductless heat pump HVAC system

### Seasonal/Other

\_\_\_\_\_ Pruning

\_\_\_\_\_ Gutter clean-out

\_\_\_\_\_ Leaf raking

\_\_\_\_\_ Window washing

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_

## Personal Statement

Please write a *brief* explanation of why you are in need of Home Preservation services.

### Willingness to Pay

The applicant must demonstrate a willingness and ability to pay for project cost based on a sliding scale. The total project cost will include materials and labor. The percentage of the total project cost that the applicant must repay is based on his or her income level. Before beginning the repairs, the applicant would sign a payback agreement stating the total cost to the applicant and outlining a payment plan.

Are you, the applicant, willing to pay project costs as to be outlined in the payback agreement? (*check one*)

YES

NO

### Anticipated Gross Annual Income

List ALL names, relationship to applicant, ages, and annual gross income of ALL people living in the home.

If no income received by household member, please list reason. ALL INCOME must be listed and documented.

**You must provide proof of all household income.**

Name	Relationship	Age	Gross Annual Income (before taxes) N/A if not applicable	Income Source (Employment Income, Social Security, SSI, Child Support, Veteran's Benefits, ect...)
	Self			

**I certify that the income reported above represents 100 percent of the total annual income for my household:**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



**Complete the following if you are not the Applicant but are assisting the Applicant in completing the application:**

<b>Name</b>	<b>Date</b>	<b>Contact Number</b>	<b>Organization</b>
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## **Paperwork Needed for Critical Home Repair Program Application**

You will need to provide proof of total household income by providing copies of the supporting documentation listed below. Your application will be considered incomplete if copies of supporting documentation are not provided with the application. You can bring supporting documentation to our office, located at 1530 Greenview Dr. SW. Ste 107 Rochester, MN 55902, and we will gladly make the copies for you.

If you need assistance in completing the application, call the Two Rivers Habitat Office at (507) 252-0849 ext. 205 to schedule an application appointment.

### **Provide the following documents when you return you application:**

- Copies of Driver's License and/o Minnesota I.D. for all adult family members (18 years and older)
- Divorce Decree (if applicable)
- Proof of Income (as applicable)
  - Copies of current Award Letters or most recent stubs for:
    - Social Security
    - SSI
    - Pension or Retirement
    - Disability (SSDI)
    - Child Support
  - Copies of Pay Stubs for the most recent two months
  - DD214 if Applying for Veteran Repair Program
  - Most recent Federal and State Tax Return

### **How to Submit the Application**

**Send completed application along with supporting documentation to:**

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