



City of Rio Rancho Critical Home Repair Program

Thank you for your interest in the Greater Albuquerque Habitat for Humanity Repair Program.

- Please note, this is an emergency critical repair program, and that no repairs can be made until the homeowner has completed the application and met the qualifications for assistance. In addition, there is a waiting period for repairs, and all repairs are subject to the availability of funding.
- Once you submit a complete application, you will hear back from Habitat in 30 days.

Please include the following with your application

- Proof of income
- Proof of home ownership – Mortgage/Note
- Proof of residency – State ID or Utility Bill (Must reside in the City of Rio Rancho)
- Proof of home insurance- Declaration's page (Policy #'s and dates active)

If you have any questions regarding this application please contact:

Nathan Behrens
Email: nathan@habitatbq.org
Phone: (603) 722-8844



We are pledged to the letter and spirit of the U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin.

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date Received: _____ Date of Home Visit: _____
 More Information Requested? Yes No Accepted Denied

I. Program Overview

Greater Albuquerque Habitat for Humanity's (GAHH) Critical Home Repair Program, in partnership with the City of Rio Rancho CDBG program, will provide critical home repair/replacement of the following: Water Heater, Furnace, Swamp Cooler, Roof Repair, ADA Compliance, and other health related repair issues. Homes in need of repair, must be located within the City of Rio Rancho. Priority will be given to projects which require health and safety repairs.

II. Eligibility

- A. The owner must own the home requiring repairs.
- B. The owner must occupy the home as their primary residence.
- C. The property must be covered by homeowner's insurance.
- D. Total household income must be less than 80% of the area median income (AMI) as follows:

HUD Income Limits as of 10/09/2023**FY23 Income Limit Area - Albuquerque, NM MSA**

FY23 Income Limit Category	1	2	3	4	5	6	7	8
Very Low Income 50%	28,000	32,000	36,000	39,950	43,150	46,350	49,550	52,750
Extremely Low Income	16,800	19,720	24,860	30,000	35,140	40,280	45,420	50,560
Low Income 80%	44,750	51,150	57,550	63,900	69,050	74,150	79,250	84,350

III. Application & Approval

- A. Applications may be obtained after submitting an inquiry to the repair page
 - a) For more information: repair@habitatabq.org
- B. Applications can be dropped off or mailed to GAHH's home office at 4900 Menaul Blvd. NE, Albuquerque NM 87110.
- C. Applications submitted will first be reviewed for completeness and eligibility. Incomplete or ineligible applications will not be considered for approval and receipt of assistance. Such applications can be re-submitted but will automatically be placed on hold until funding becomes available.

IV. Process

- A. After successful evaluation of the application Habitat will conduct a home assessment to determine if the home is a good fit for the Critical Home Repair Program.
- B. If your home repair qualifies you will be asked to complete an application documenting your eligibility.
- C. Once all the paperwork is completed, homeowners will hear back within 30 days with a scheduled date.
- D. Upon completion of the approved scope of work, homeowners will be asked to complete a project survey evaluating our performance and communication.

Dear Applicant: We need you to complete this application to determine if you qualify for our 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	Co-Applicant (If applicable)												
Applicant's Full Legal Name:	Co-applicant's Full Legal Name:												
Present Address (street, city, state, ZIP code):	Present Address (street, city, state, ZIP code):												
Email Address:	Email Address:												
Phone Number:	Phone Number:												
Dependents: and others who will live with you <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name:</th> <th style="text-align: left;">Age</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	Name:	Age	_____	_____	_____	_____	Dependents: and others who will live with you <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name:</th> <th style="text-align: left;">Age</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	Name:	Age	_____	_____	_____	_____
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MONTHLY INCOME BENEFITS (include only if applicable)

Gross Monthly Income	Applicant	Co-Applicant	Other Applicants
Employment Income	\$	\$	\$
Unemployment	\$	\$	\$
Retirement or Pension	\$	\$	\$
Child Support	\$	\$	\$
Social Security	\$	\$	\$
Supplemental Security Income (SSI)	\$	\$	\$
Disability	\$	\$	\$
VA Benefits	\$	\$	\$
Tribal Per Capita Payments	\$	\$	\$
Alimony	\$	\$	\$

Annuities	\$	\$	\$
Other	\$	\$	\$
Subtotal Incomes	\$	\$	\$

PROPERTY INFORMATION

If you own your residence, what is your monthly mortgage payment? \$ _____

Unpaid Balance \$ _____ Years Left: _____ Do you own land? No Yes

Do you belong to a HOA - Home Owners Association? No Yes

Is there a mortgage on the land? No Yes **If yes:** Monthly Payment \$ _____

Unpaid Balance \$ _____

Do you have ACTIVE homeowner's insurance coverage on the home? No Yes

CURRENT EMPLOYMENT INFORMATION

Applicant's Name		Co-applicant's Name	
Name and Address of Current Employer:		Name and Address of Current Employer:	
Years on This Job	Monthly (Gross) Wages	Years on This Job	Monthly (Gross) Wages
Type of Business	Business Phone	Type of Business	Business Phone

____ I am currently retired and receive money from Social Security, personal savings, investments or another source.

____ I am currently disabled and receive disability or financial assistance from another source.

____ I am currently unemployed and receive unemployment or financial assistance from another source.

Please explain:

Acknowledgement & Agreements

(Please read and initial each item, then sign at the bottom.)

The undersigned do hereby acknowledge and agree as follows:

_____ All information provided herein or attached herewith is true and accurate to the best of Applicant's knowledge. Applicant will provide additional information and documentation necessary to determine eligibility and secure assistance from GAHH's partner agencies, and authorizes GAHH and partner agencies to share any and all information provided by Applicant for such purposes.

_____ Submission of this application does not guarantee participation in the program and receipt of home repair assistance. Participation and assistance are determined by GAHH and its partner agencies, at their sole discretion, based on program guidelines, eligibility criteria, regulatory requirements, and funding availability.

_____ The scope of repairs & improvements to be carried out cannot be finalized until the Applicant's eligibility for assistance is determined and approved by GAHH and its partner agencies.

_____ GAHH's, its partner agencies, contractors, and other parties involved in the program will be provided with reasonable access to the property, to carry out repairs. Please note noise and debris will occur as part of the repair/replacement process.

_____ Applicant will hold harmless Greater Albuquerque Habitat for Humanity and any other agency, organization, and volunteers providing home repair assistance in any way as part of this program, from any liability resulting from services rendered.

_____ Homeowner grants and conveys in perpetuity to GAHH all right, title, and interest in any and all photographic images, printed interviews or statements, and video or audio recordings made by GAHH and/or its agents, contractors, directors, employees, officers, volunteers and other representatives in the course of performing the Scope of Work, including, but not limited to, any royalties, proceeds or other benefits derived from such photographs, printed materials or recordings.

_____ Homeowner understands they do not qualify for additional repairs through the Greater Albuquerque Habitat for Humanity Critical Repair Program or the City of Rio Rancho CDBG Program for at least 12 months from the from competition of project.

_____ Homeowner understands they must reapply for assistance every calendar year and will not be guaranteed assistance in the future just because they received assistance in the past.

_____ Homeowner understands that a forgivable, interest free mortgage/note on the affected property will be filed for a period of five (5) years. Mortgage will be released at the end of the 5-year period, or upon the sale or transfer of the property, if sold prior to the 5-year period. If sold or transferred, the mortgage must be paid from the proceeds of the sale.

Applicant Signature

Date

Co-Applicant Signature

Date

Demographic Survey

Please note that the information collected in this survey will not influence our decision for assistance. Our team collects this information for grants and other reporting purposes to provide funding for future programs.

Applicant:

Do you have a disability: Yes No

Sex: Female Male Non-Specified

LGBTQ+ Yes No

Race and Ethnicity (Select one or more)

- American Indian or Alaska Native
 Asian
 Black or African American
 Hispanic or Latino
 Native Hawaiian/ Other Pacific Islander
 White
 Other

US Military Status

- No military Service
 Veteran/ Past/ or Current Experience
 Branch: _____
 Years of Service: _____

Highest Level of Education Completed

- Less than High School
 Some High School
 High School Graduate/ GED
 Some College
 College Graduate
 Post Graduate Degree

Are you a single parent: Yes No

Are you a senior citizen (65+): Yes No

I prefer not to provide this information

Co- Applicant (If Applicable):

Do you have a disability: Yes No

Sex: Female Male Non-Specified

LGBTQ+ Yes No

Race and Ethnicity (Select one or more)

- American Indian or Alaska Native
 Asian
 Black or African American
 Hispanic or Latino
 Native Hawaiian/ Other Pacific Islander
 White
 Other

US Military Status

- No military Service
 Veteran/ Past/ or Current Experience
 Branch: _____
 Years of Service: _____

Highest Level of Education Completed

- Less than High School
 Some High School
 High School Graduate/ GED
 Some College
 College Graduate
 Post Graduate Degree

Are you a Female Head of HH: Yes No

Are you a senior citizen (65+): Yes N

I prefer not to provide this information

Repair Program Media and Promotions Agreement

We would like to use your story to tell our story.

It's our Habitat homeowners who are the true story of our success and in order to communicate these accomplishments to the public, GAHH would like to include stories in public communications endeavors. Below is a partial list of some of the methods we use to communicate to our supporters and where your photo, video or story could appear.

- Press Release to the Media
- TV and Radio interviews
- Community Presentations
- Donor thank you letters
- Website & Blog
- Newsletter
- Twitter
- Facebook
- Instagram
- Videos

There are many opportunities throughout the year to help Habitat raise awareness and build support.

One way is by sharing your story with the community. Would you be interested in speaking with our marketing team for the purpose of sharing your story? No Yes

We are happy to make accommodations so that you are comfortable with how we publicly use your story and images. Please let us know if you would like the following adaptations made:

I would like to hide my identify, please change my name

I would like to read anything with my story being used before it is made public

Other Requests:

Homeowners Printed Name

Date

Homeowners Signature