



Habitat for Humanity Greater San Francisco's Home Preservation Program

Major Rehab Program for San Francisco's Southeast Neighborhoods 2022-2023

Habitat for Humanity Greater San Francisco's (HGSF) Home Preservation Program provides critical, major repairs to support low-income, long-term homeowners living in 94124, 94134, and 94112 zip codes, including but not limited to the Bayview/Hunter's Point, Excelsior, and Visitacion Valley neighborhoods.

HGSF's Home Preservation Program focuses on repairs that address safety, accessibility, and deferred maintenance issues that affect homeowners. HGSF provides the repairs and offers a 0% interest loan – with all payments deferred for 30 years or until the home is sold. Loan amounts between \$25,000 to \$75,000 are available for home repair needs.

How this Program Works

- HGSF acts as both the lender and the contractor.
- Habitat construction staff perform the repair work and manage subcontractors.
- Qualified applicants receive a 0% interest loan with all payments deferred for 30 years or until you sell your home and/or your home ceases to be owner-occupied.
- HGSF staff will help you from start to finish.
- Selected applicants must also agree to 8 hours of "Sweat Equity".
 - Sweat Equity can include volunteering on your home repair, volunteering in the community, and attending educational opportunities.

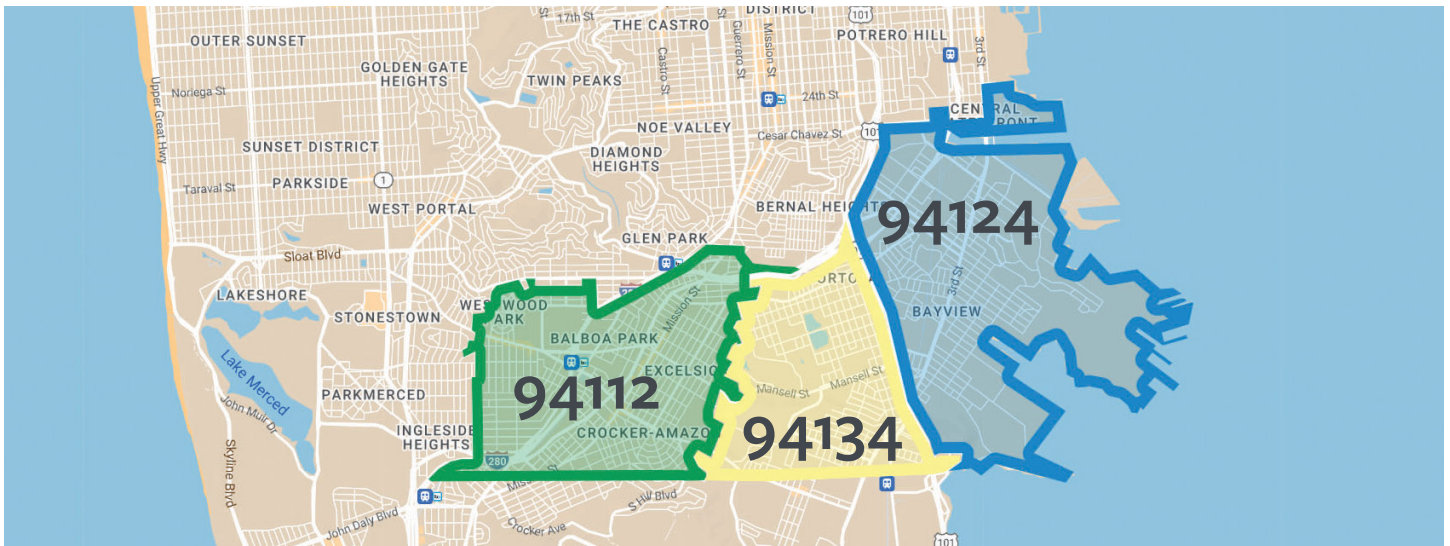
What is the Process Once I Apply?

1. Submit your application as soon as possible, applications are process on a first-come, first-served basis.
2. Applicants who are found to be financially qualified will then have their homes assessed to determine if they have eligible repairs. Applicants must be financially qualified and have eligible repairs.
3. If you are eligible, we will offer you a 0% interest loan with all payments deferred for 30 years in order to fund your repairs.
4. HGSF construction staff will manage every aspect of the home repair.

This program is made possible with support from the California Department of Housing and Community Development

Do I Qualify for this Program?

To qualify you must live in one of the following San Francisco zip codes: 94124, 94134, or 94112.



Other qualifications are as follows:

- Be current on property taxes
- Be current on your mortgage, if applicable
- Have no open judgements against your credit or be delinquent on any federal debt
- Have not filed Chapter 7 or Chapter 13 bankruptcies in the last 7 years
- Have current homeowner's insurance
- Have feasible repair needs
- Have owned and lived in your home for 10 or more years
- Have a total household income less than the requirements listed in the chart below

Maximum Household Income Requirements

Number of Persons in Household*	1	2	3	4	5	6	7	8
Household Max. Income**	\$104,400	\$119,300	\$134,200	\$149,100	\$161,050	\$173,000	\$184,900	\$196,850

*Household size is determined by the number of people (children and adults) who have been living in the home for at least a full year, and plan on continuing to live in the home fulltime, for at least another year.

**Total household income is determined by the combined income of all fulltime household members, over 18 years old.

After we receive and review your completed application a member of our team will be in touch with you regarding next steps. If you need help filling out this application, please call or email us at (415) 625-1036 or homerepairs@habitatgsf.org.

Documents Required

In addition to filling out this application please provide the following:

- A copy of a valid photo ID for the title holder(s)
- The most recent copy of your property taxes with the name(s) of homeowner(s)
- If you have a mortgage, please attach your most recent mortgage statement
- A copy of your homeowner's insurance statement that shows the dates through which the policy is valid
- Four months of utility bills within last twelve months of any one of the following utilities: cable / Internet, PG&E, water, or garbage.

Income Verification

Provide all of the following documents to verify income for each person over the age of 18 living in the home 50% or more of the time. Documentation could include copies of:

- Paystubs for the last 90 days for anyone employed
- W-2s for the last two years for anyone employed
- Federal tax returns for the last two years for all adults
 - PLEASE NOTE: If you are over the age of 60 and only receive social security benefits and are not required to file taxes, please provide your social security award letters for the last two years.
- If employed, a verification of employment letter from your employer(s)
- 3 months of bank statements for everyone in the household
- Social Security Card or Permanent Resident Card for everyone in the household

Proof of Residency

Please provide proof of residency documentation verifying the current physical address for each household member. The acceptable forms of Proof of Residency documentation include any of the following with a household member's name and current address:

- School documentation
- Healthcare plan or healthcare bills
- Utility bills, bank statements, or DMV communications
- Voter registration
- Tax returns claiming dependents



Home Preservation Application

Applicant Information

Full Legal Name _____ Primary Phone Number _____

E-mail _____

How did you hear about Habitat for Humanity Greater San Francisco's Home Preservation Program?

- | | |
|--|--|
| <input type="checkbox"/> Habitat Website | <input type="checkbox"/> Social Media (for example, Facebook or Twitter) |
| <input type="checkbox"/> Community-based organization
(ex: YMCA or Senior Center) | <input type="checkbox"/> Other Habitat Home Repair Client or Applicant |
| <input type="checkbox"/> Faith-based organization or house of worship | <input type="checkbox"/> Word of Mouth (ex: friends, family, colleagues) |
| <input type="checkbox"/> Postcard, letter, or flyer | <input type="checkbox"/> Other, please specify:
_____ |

Home Information

Home Address _____

What year was the home purchased (by you or a family member if you inherited the home)? _____

Please provide the year you inherited your home (if applicable) _____

What type of structure is your home? Single family Mobile home Townhome Condo

How many bedrooms are there in the house? _____

How many bathrooms are there in the house? _____

How tall is your house? 1-story 2-story 3-story

Loans

Are there any outstanding loans on this home? Yes No

If yes, please answer the following regarding the outstanding loan or loans on your home:

How much is the outstanding loan for? _____

What is the purpose of the outstanding loan? _____

Is this loan deferred? Yes No

If you are currently paying this loan, how much do you pay per month? _____

Language and Accessibility

What is your preferred language? _____

If English is not your primary language, is there someone in the house that can translate for you? Yes No

Is someone else filling out this application for you? Yes No

If you answered yes, please include the name, phone number and your relationship to the person filling out this application on your behalf. Name _____ Relationship to applicant _____

Phone number _____ E-mail _____

Future Plans

Do you plan to sell your home in the next 5 years? Yes No Not sure

Do you have a will established that includes this home? Yes No Not sure

Do you have a revocable or irrevocable trust established that includes this home? Yes No Not sure

Have you applied for other home repair programs or sought out additional support/resources? Yes No

If you answered yes above, please share what other programs or organizations you've reached out to or applied for:

Household Composition

Is there a person with a disability in the household? Yes No If yes, how many? _____

Is there a military service member in the household? Yes No

If yes, how many? _____

Are they active duty or veterans? Active Duty Veteran Both Active Duty and Veterans in household

Housing Situation

Do you rent out any part of your home? If yes, please attach the most recent lease agreement signed by both parties.

If a lease agreement does not exist, please write a letter verifying the agreement and have both parties sign it.

Yes No

Are there any known code enforcement issues? This will not be held against you, and our program is experienced at working with local government for approval and inspection. Yes No

If yes, have you been cited? This will not be held against you, and our program is experienced at working with local government for approval and inspection. Yes No

Please use the following pages to better prepare our team to assess your home in person.

Roof

Please check all boxes that apply.

Roof Type

- Sloped with Shingles
- Sloped with Tiles
- Flat with PVC or other membrane type material
- Flat with Tar and Gravel
- Unknown

Roof Condition

- Leaking
- Holes
- Mold present near leaks
- Leaks are causing parts of the ceiling to fall down
- Old (over 20 years)
- Shingles coming off
- Sagging roof structure
- Previous repairs completed
- Other – please describe _____

Gutters and Downspouts

Please check all boxes that apply.

- Gutters are clogged
- Gutters are rusted and/or have holes
- Gutters are falling away from roof
- Gutters are missing

- Downspouts are clogged
- Downspouts are disconnected or not complete
- Downspouts are rusted and/or have holes
- Downspouts do not drain away from the foundation

Siding

Please check all boxes that apply.

Siding Type

- Stucco
- Wood
- Vinyl
- Other _____

Siding Condition

- Stucco is cracked or crumbling
- Siding is falling off
- Siding looks rotted
- Siding is in poor condition
- Window trim is rotted or falling off
- Paint is peeling

Deck or Porch

Please check all the boxes that apply and circle to indicate location where applicable:

Location

- Front of my house
- Back of my house

Type *specify location*

- Wood (front / back)
- Concrete (front / back)

Deck or Porch Condition

- My deck or porch is unstable
- My deck or porch connects to stairs
- Boards on my deck or porch have dry rot, are broken or missing
- Railings on my deck or porch have dry rot, are broken or missing
- My deck or porch is the only way of exiting the back of my home
- My deck or porch is the only way of exiting the front of my home

Fence

Please check all the boxes that apply and circle to indicate location where applicable:

Fence Location(s)

- Front fence
- Back fence
- Side fence

Fence Type *specify location*

- Wood fence (front / back / side)
- Metal or security fence (front / back / side)
- Other (front / back / side)

Fence Condition *specify location*

- Fence is leaning or sagging (front / back / side)
- Fence boards are missing (front / back / side)
- Fence has fallen over (front / back / side)
- It looks like there is dry rot (front / back / side)
- Gate is hard to open (front / back / side)
- Gate is inoperable (front / back / side)

Floors

Please check all the boxes that apply:

Flooring Type

- Hardwood
- Linoleum
- Carpet
- Vinyl
- Other

Flooring Issues

- My floor has holes in it
- My floor has water damage
- My carpet appears moldy
- My carpet is loose or is a trip hazard
- My floor is warped and/or buckling



Home Preservation Application

Property Status cont.

Doors

Number of exterior doors that need maintenance _____

Number of interior doors that need maintenance _____

For each door, describe the location, type, and issue:

Windows

Total number of windows that need maintenance _____

For each of the following issues, indicate how many windows are affected:

	Location <i>front/side/back</i>	Type <i>wood, metal, vinyl or plastic</i>	Issue <i>inoperable, hard to open, cracked glass, leaking air or water, security bars, ripped screen, single pane, etc</i>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Stairs

Please check all the boxes that apply and circle inside or outside to indicate where the issue is located:

- | | | |
|----------------------------------|--|--------------------|
| <input type="checkbox"/> Inside | Stair Issues <i>specify location</i> | |
| <input type="checkbox"/> Outside | <input type="checkbox"/> Stair treads have dry rot, are loose or missing | (Inside / Outside) |
| | <input type="checkbox"/> Stair structure/stringers have dry rot | (Inside / Outside) |
| | <input type="checkbox"/> Railings have dry rot, are loose, or missing | (Inside / Outside) |
| | <input type="checkbox"/> Handrail has dry rot, is loose or missing | (Inside / Outside) |
| | <input type="checkbox"/> Stairs are generally unsafe to use | (Inside / Outside) |
| | <input type="checkbox"/> Someone injured as a result of the condition of stairs or handrails | (Inside / Outside) |

Mobility and Accessibility

Please check all the boxes that apply:

- | | |
|---|--|
| <input type="checkbox"/> I have no grab bars and I feel I need them
How many do you think you need? _____
In what room/s would you like them? _____ | <input type="checkbox"/> I or someone living in the home has fallen as a result of not having grab bars. |
| <input type="checkbox"/> I could use additional grab bars
How many additional do you need? _____
In what room/s would you like them? _____ | <input type="checkbox"/> Someone in my house needs a ramp for accessibility |
| | <input type="checkbox"/> My toilet needs to be raised for accessibility |
| | <input type="checkbox"/> My bathtub is unsafe |
| | <input type="checkbox"/> My doors are too narrow |

Heater or Furnace

Please check all the boxes that apply:

- | | |
|---|--|
| <input type="checkbox"/> My current heating system does not keep my home at a comfortable temperature | <input type="checkbox"/> I think air flow/circulation might be a problem |
| <input type="checkbox"/> I only have heat in some rooms in my home | <input type="checkbox"/> Attempted to have a repair done, was told issue could not be resolved due to presence of asbestos |
| <input type="checkbox"/> My thermostat is not working | <input type="checkbox"/> I noticed a draft near a door |
| <input type="checkbox"/> I know or think that there is no insulation in my home | <input type="checkbox"/> I noticed a draft near a window |
| <input type="checkbox"/> My energy bill is too high and I cannot afford to run my heater | <input type="checkbox"/> I noticed a draft in a specific area of my home |

Ventilation

Please check all the boxes that apply:

- | | |
|---|--|
| <input type="checkbox"/> I do not have a working window or exhaust fan in my bathroom | <input type="checkbox"/> I do not have a working exhaust fan over my stove |
|---|--|

Plumbing

Please check all the boxes that apply:

- | | |
|--|--|
| <input type="checkbox"/> Lead pipes | <input type="checkbox"/> There is very low or no water flow out of my faucet |
| <input type="checkbox"/> My toilet runs | <input type="checkbox"/> Drains are leaking or disconnected under my sink |
| <input type="checkbox"/> My toilet does not flush | <input type="checkbox"/> My shower head leaks |
| <input type="checkbox"/> My toilet leaks when I flush it | <input type="checkbox"/> There are plumbing fixtures I don't use in my house because they are not working or leaking |
| <input type="checkbox"/> My faucet leaks | <input type="checkbox"/> Other – please describe: _____ |

Electricity

Please check all the boxes that apply:

- | | |
|---|--|
| <input type="checkbox"/> I have exposed wires coming out of the wall or ceiling | <input type="checkbox"/> When I plug something into an outlet there are sparks |
| <input type="checkbox"/> I have one or more outlets that don't work | <input type="checkbox"/> Other – please describe: _____ |
| <input type="checkbox"/> I have one or more light switches that don't work | |

Appliances

Please check all the boxes that apply:

Stove

- The oven doesn't work
- One or more burners do not work
- The hood/fan does not work

Refrigerator

- The fridge does not work
- The freezer does not work



Home Preservation Application

Other Concerns

Please check all the boxes that apply:

- I have or think I have lead paint
- I have holes or open cracks in the walls or ceilings
- More than 8 by 11 inches of peeling paint or broken plaster
- There are signs of pests (bugs, rodents, etc.) in the last 90 days
- Other, please specify _____

Please state the top 5 concerns about your home

1. _____
2. _____
3. _____
4. _____
5. _____

Please add any other comments you want, including how these repairs will help you. This is optional.

Will you be a willing partner?

Participants in Habitat’s home preservation services must contribute to their project’s success by being a good partner in the following ways. Please initial the following to show that you understand and are willing to do the following:

- _____ **Availability** – Answer and return phone calls, and return forms requiring your signature in a timely manner. Make a reasonable effort to be available for visits and repair work.
- _____ **Patience** – Habitat for Humanity is a nonprofit organization dedicated to helping those in need. Please exercise patience and show kindness when dealing with our staff and volunteers.
- _____ **Participation** – All able-bodied residents in your home are expected to work with Habitat’s staff and volunteers to complete repairs.

Applicant Signature _____ Date _____

I acknowledge that this application is completed accurately and to the best of my knowledge