

MOUNTAIN HOUSING OPPORTUNITIES, INC

64 Clingman Ave. Suite 101, Asheville, NC 28801

(828) 254-4030

For Office Use Only
Date Rec'd
% of Median

EMERGENCY HOME REPAIR, ACCESSIBILITY, AND RURAL HOUSING REHABILITATION APPLICATION

HOMEOWNER INFORMATION

Owner _____ Home Phone _____
 Co-owner _____ Work Phone _____
 Address _____ Cell Phone _____
 P.O. Box _____ Armed Forces Veteran Yes _____ No _____

Contact Person _____ Relation _____ Phone _____
 Is anyone in the home disabled, handicapped, or severely ill? Yes _____ No _____
 If yes, describe the disability, handicap, or illness:

HOUSEHOLD INFORMATION

Beginning with yourself, list every person living in your household and the information requested.

First and Last Name	Relation to Homeowner	Gender	Race/Ethnicity	Birth Date	Social Security Number	Gross Monthly Income*	Source of Income**
Total:							

*Gross income is total income before taxes, Medicare or other items are deducted.

**Sources include employment, retirement/pensions, Social Security, SSI, VA Benefits, Work First, annuities, alimony, child support, regular contributions from family, rental income, or other regular payments.

REFERRAL INFORMATION

How did you learn about Mountain Housing Opportunities? (Please check all that apply)

_____ United Way 211 _____ Newspaper, Radio, Brochure
 _____ Visiting Health Professionals _____ Community Action Opportunities
 _____ Veterans Administration _____ Other
 _____ Council on Aging _____ Mission Hospital

Rev. 03/10

AUTHORIZATION TO RELEASE INFORMATION

I give my permission for general information volunteered by me and to be used in the Mountain Housing Opportunities Newsletter and other solicitations. This newsletter is used for information and public relations regarding MHO's services. I also authorize the use of photographs taken during this program to be used for purposes of public relations and solicitations regarding Mountain Housing Opportunities' services.

SIGNED _____ **DATE.** _____

FAMILY ASSETS

Bank Accounts	Checking	_____	\$	_____
		Bank Name		Balance
	Savings	_____	\$	_____
		Bank Name		Balance

Stocks/Securities - If you own any stocks or securities, list their value. \$ _____

Home/Land - List the tax value of your . . .

Home (without land)	\$	_____
Land your house is on	\$	_____
Number of Acres		_____

Other Real Property	\$	_____
Number of Acres		_____

If you currently hold a mortgage, list your . . .

Monthly Payment	\$	_____
Balance Owed	\$	_____

HOUSING INFORMATION

Do you own your home? Yes _____ No _____
If yes, how many years have you owned your home? _____

Where is your home located? City of Asheville _____ Buncombe County _____

What type of residence do you own? House _____ Mobile Home _____
If your home is a Mobile Home, do you own or rent your land? Own _____ Rent _____

How many people live in your household? _____

What type of repairs are needed on your home? _____

How long have you needed these repairs? _____

What other agencies have you asked for help? _____

CERTIFICATION

I hereby certify that I own and occupy the home described above as my primary residence, that the above information is complete and true to the best of my knowledge, and I give Mountain Housing Opportunities permission to verify the contents of this application and to facilitate the repair of my home.

Applicant Signature	Date	_____	Co-Applicant Signature	Date	_____
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