



Summit
Habitat
for Humanity®

Building Strength, Stability, and Self Reliance through Shelter.

A Brush with Kindness

Summit Habitat or Humanity's A Brush with Kindness (BWK) program works with local homeowners who are struggling to maintain safe, decent, housing by supporting basic home repairs and/or ADA modifications:

- exterior painting
- landscaping
- minor exterior or interior repairs
- critical roof repair
- weatherization
- HVAC
- ADA accessibility
- exterior clean-up

A Brush with Kindness is part of Habitat's Neighborhood Revitalization Initiative (NRI). This initiative is a holistic approach, assisting communities as well as families. It is designed to revitalize the appearance of a neighborhood, encouraging connections with the community and most importantly helping to preserve a homes affordability.

To Qualify:

Applicants Must:

- Live in an owner-occupied home within Summit County.
- Have Homeowner's Insurance
- Be willing to partner with Habitat for Humanity and contribute 15 sweat equity hours
- Be in need of critical home repairs
- Home owner is responsible for a portion of the project costs and be able to repay a no interest loan.
- Must provide proof of income qualifications as requested.

Return completed application to:

ATTN: Brush with Kindness
Summit Habitat for Humanity
PO Box 4330
Breckenridge, CO 80424

Questions: ExecutiveDirector@SummitHabitat.org





We are pledged to the letter and spirit of 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.



Summit Habitat for Humanity A Brush with Kindness Program Application

1) Applicant Information

Name: _____

Physical Address: _____

Mailing Address: _____

Social Security Number: _____ - _____ - _____

Date of Birth: _____ / _____ / _____

Circle One: Single Married Partnership Separated Widowed

Phone: _____ Phone: _____

Email: _____

Dependents (people who live with you)

Name / Relationship	Age
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you own your home? (circle one)	YES	NO
Will translation be needed for an interview? (circle one)	YES	NO
Are you able to provide a translator?	YES	NO

2) Employment Information

Employer: _____
Physical Address: _____
Mailing Address: _____
Phone: _____
Type of Business: _____
Years at this job: _____
Gross Monthly Wages: \$ _____

3) Income and Expenses

Monthly Income:		Monthly Expenses	
Wages	\$ _____	Mortgage	\$ _____
Food Stamps	\$ _____	Utilities	\$ _____
Social Security	\$ _____	Phone/Internet/TV	\$ _____
SSI	\$ _____	Car Payment	\$ _____
Disability	\$ _____	Car Insurance	\$ _____
Alimony	\$ _____	Child Care	\$ _____
Child Support	\$ _____	Food	\$ _____
OTHER	\$ _____	Student Loans	\$ _____
		Medical/Insurance	\$ _____
		Alimony/Child Support	\$ _____
		Average Credit Card	\$ _____
		OTHER	\$ _____
Total Monthly Income	\$ _____	Total Monthly Expenses	\$ _____

4) ASSETS

Name of Bank/Savings and Loan/Credit Union:

Physical Address: _____
Mailing Address: _____
Account # _____
Balance \$ _____

4) ASSETS Continued:

Name of Bank/Savings and Loan/Credit Union:

Physical Address: _____

Mailing Address: _____

Account # _____

Balance \$ _____

5) WILLINGNESS TO PARTNER

To be considered for this program you and your immediate family must be willing to complete a minimum of 15 hours of 'sweat equity'. The total number of hours will depend on the cost of the improvements to your home. If selected, your help working on your home and other projects is called 'sweat equity' and may include helping on the construction site, working in the ReStore, or other approved activities. The number of sweat equity hours will be determined prior to the project commencement.

Applicant is willing to complete sweat equity hours (circle one): YES NO

6) REPAIRS REQUESTED

Describe the repairs/project you are requesting:

7) AUTHORIZATION AND RELEASE

I understand that by gilling this applications, I am authorizing Summit Habitat for Humanity to evaluate my actual need for the A Brush with Kindness program, my ability to repay the no-interest loan and other expenses of homeownership and my willingness to partner.

I understand that the evaluation process may include and is not limited to: personal visits, a home visit, a credit check, a criminal history check, verification of employment, verification of social security number, clarification of income and expenses.

I declare that I have answered all questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied. If I have already been selected to receive A Brush with Kindness services, and it is determined that I have not been truthful on the application, I may be disqualified from the program, and expected to repay all construction costs that had occurred to date.

I understand that the original or a copy of this application will be retained by Summit Habitat for Humanity even if the application is not approved.

I hereby grant and convey unto Summit Habitat for Humanity all ownership, right, title, and interest in any and all photographic images, video, or audio recording made by Summit Habitat for Humanity in the fulfillment of this program.

All information provided and obtained will remain confidential and only used for purposes of establishing program eligibility.

****Proof of information provided on application might be requested upon application review.***

Printed Name of Applicant

Signature of Applicant

Date

