The Carpenter's Apprentice

- Client Application Form -

ELIGIBILITY CRITERIA:

- House must be located within Irwin area.
- House must be owner-occupied.
- Owner must be low-income.
- The requested repairs must correct a potential health or safety hazard.
- The homeowners must be physically/financially unable to do the repairs.

HOMEOWNER INFORMATION

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Application Date:	
Name (please print)	· · · · · · · · · · · · · · · · · · ·
Address	
Zip	
Phone: () Is the appli	icant the homeowner? Yes No
Physical Disabilities? Yes No If yes, please ex	plain:
Total number of persons living in household: Adults:	Children under 18:
Total Monthly Income:	
Emergency Contact Person	Phone
How did you hear about The Carpenter's Apprentice?	
Name other agencies that have helped you with home re	epair services in the past year:
Are you current on your property taxes?	
Utility Information:	
Gas Company:	
Electric Company:	x

Please complete reverse side of application!

	DESCRIBE F	REPAIRS OR MO	DIFICATIONS T	O BE CONSIDE	RED IN ORDER	OF IMPORT	ANCE
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ןכ	ease submit	proof of income f	or <u>all adults and</u>	<u>children</u> in the ho	ome with this appl	ication.	
		A copy of your	most recent Fed	eral Tax return			
			and				
		A copy of payo	heck al Security Stater	ment			
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r	audulent info	v stated income a rmation, I may be e cost of the repa	responsible for i	reimbursing The	ate, and I underst Carpenter's Appr	entice and Cl	hurch
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	Homo	owner Signature	**************************************			Date	t
	Home						
		Mail Comple	ted Application a	nd Proof of Incor	me and Insurance	to:	

The Carpenter's Apprentice P.O. Box 125 Irwin, PA 15642 Or fax: 724-863-8911

Thank you for your application!