



NORTHLAND NEIGHBORHOODS, INC.
GENERAL APPLICATION FOR HOME REPAIR

This is an application for home repair services to be provided through programs administered by Northland Neighborhoods, Inc. (NNI). NNI will use the information you provide on this application to help match your repair request with available funding. There is typically a waiting list and more information will be requested when your application comes up in the wait list. Final eligibility cannot be determined until such time.

Homeowner(s): _____

Address: _____ City: _____ ZIP: _____

Neighborhood: _____ County: _____

Phone: _____ Cell # _____ Name _____
Cell # _____ Name _____

Email Address: _____

List all individuals, including yourself, living in the home (attach additional page if necessary):

NAME	DATE OF BIRTH	AGE	ANNUAL INCOME	Race	Latino or Hispanic?

Race (include all that apply): 1- American Indian or Alaskan Native; 2- Asian; 3- Black or African American;
4- Native Hawaiian or Pacific Islander; 5 - White; 6 - Other: _____

Emergency Contact Person: _____
Phone: Home: _____ Work: _____ Cell: _____

Have you received NNI Home Repair Services within the last five (5) years? Yes: _____ No: _____

If yes, please provide approximate date and type(s) of repairs: _____

How did you hear about NNI?: _____

Indicate the home repairs that are most needed:

<u> </u> Air Conditioning	<u> </u> Plumbing	<u> </u> Windows
<u> </u> Furnace	<u> </u> Roof	<u> </u> Foundation
<u> </u> Water line	<u> </u> Siding	<u> </u> Electrical Work
<u> </u> Sanitary Sewer	<u> </u> Soffit/fascia or gutters	

Other work not listed: _____

Please describe why you are in need of this grant: _____

Current or Last Employer: _____

Retired: Yes No Retired from what employer: _____

Veteran: Yes No Combat Veteran: Yes No

Have you ever been homeless: Yes No

There is a waiting list for home repairs. We go through applications on a first come, first served basis. When your application comes up, you will be contacted and information will be requested to process your application. If you feel your home is unsafe, please contact NNI.

I confirm that the information in this application is correct and complete. All individuals residing in the home are listed on this application.

Homeowner

Homeowner

Date

Date

Return Completed Application to Northland Neighborhoods, Inc.; 5340 NE Chouteau Trafficway; KCMO 64119
If you have any questions, please call 816-454-2000 and ask for a Housing Associate.