



Application for Assistance

Please fill-out digitally, save and submit to info@hammerandheartwnc.org
OR print, fill-out manually and mail to the address listed at the end of the application.

General Information

Date: _____
Name of Applicant: _____
Street Address: _____
City: _____ ZIP Code: _____
Mailing Address (if different): _____
Email Address: _____
Home Phone: _____ Cell Phone: _____
Alternate Contact Name: _____ Relationship: _____
Alternate Contact Phone: _____

Home Information

Type of dwelling: ☐ Frame House ☐ Mobile Home ☐ Brick house ☐ Other
Do you own or are you buying your dwelling?* ☐ Own ☐ Own with Mortgage
If you own a mobile home, how much is the lease for your land? _____
If you have a mortgage, what is your monthly housing payment? _____
Does the applicant currently reside in the home that is in need of repair? ☐ Yes ☐ No
If you own land, how many acres of property do you own? _____
What year was your home built? _____


*Please provide proof of home ownership with your application.

Briefly describe the problems that need repairing:

What actions have been taken to fix the problems?

Household Information

List the names of all those living permanently in the household:

Relationship to Applicant	Name (First, MI, Last)	Birthdate (mm/dd/yyyy)	Last 4 digits of Social Security Number
1 <i>Self</i>			
2			
3			
4			
5			

If needed, add other names to an attached sheet.

Describe disabilities of any members of the household (use attached sheet if needed):

First Name _____ Disability _____

First Name _____ Disability _____

Are you or any member of the household a Veteran? ☐ Yes ☐ No

Gross Income/Medical Expense Information

Dollars earned by each household member (as listed above*) per month.

Sources of Income*	No.1 (Self)	No. 2	No. 3	No. 4	No. 5
Wages					
Retirement/Pension					
Social Security					
Social Security Disability Ins.					
Supplemental Security Income					
Public Assistance/Food Stamps					
Child Support					
Bank or Stock Interest					
Other (Including Property, etc.)					
Savings					

*Please provide proof of income (social security statement, pay stub, etc.).

Total amount of monthly household income that is spent on recurring medical treatment and/or maintenance medications: _____

Explain:

Applicant Certifications

I hereby certify that...

1. I own and occupy the home described above and have provided proof of ownership.
2. The gross income/medical expense information described above is complete and true to the best of my knowledge. I have provided proof of this income.
3. I understand this information is provided to qualify Swannanoa Valley residents for assistance through *Hammer and Heart*. The program is intended to assist low-income homeowners with special needs in correcting substandard housing conditions which pose an imminent threat to their life or safety; or in performing accessibility modifications or other repairs necessary to allow a homeowner facing displacement to remain in his or her own home safely.
4. I understand that H&H is unable to meet the needs of every person applying and that applicant eligibility is based on home ownership, income, health, disability status, age, number in household, veteran status and available funding.
5. I give permission for H&H personnel to access my personal information to verify the contents of this application and to facilitate the repair of my home.
6. I understand that H&H is not required to correct all deficiencies in my home nor make the home conform to any local, state, or housing quality standards.
7. I have read and understood the Hammer and Heart Assistance Policy (found at hammerandheartwnc.org).

Applicant Signature: _____ Date: ____/____/____

Submit this form to:

Hammer & Heart • P.O. Box 577 • Black Mountain. • NC • 28711

Important Note: Any applicant or recipient who exhibits aggressive, demanding, or threatening behavior towards Hammer & Heart staff, contractors, or volunteers will be automatically disqualified for assistance. This type of conduct will not be tolerated. You are expected to treat everyone associated with H&H with respect and common courtesy.