Habitat for Humanity®
Powhatan

Critical Repairs Program 2026 Application

Submitting an application does not mean automatic approval.

To be eligible for this program, you must meet the following criteria:

1. Be a Powhatan County resident.
2. Own your home and have homeowner's insurance.
3. Be current on Powhatan real estate taxes.
4. Submit your complete packet during the Application Period from Aug. 1 - Sept. 4.
5. Once the application period closes, all applications will be reviewed.
6. Ensure that all sections are completed for processing.
7. You must meet the 2026 household income guidelines below:

Household Size	Maximum Monthly Gross Income	Maximum Gross Yearly Income
1	$2,660.00	$31,920
2	$3,606.67	$43,280
3	$4,553.33	$54,640
4	$5,500.00	$66,000
5	$6,446.67	$77,360
6	$7,393.33	$88,720
7	$8,340.00	$100,080
8	$9,286.67	$111,440

Please also submit the following documents with your application:

1. **A copy of your current mortgage statement.** *(if still making monthly payments)*
2. **Proof of gross household income:** *social security statement, tax return, paystubs, bank statement with payroll, or social security deposit.*
3. **A copy of your homeowner's insurance.**

Please note:

1. Applications are only accepted via locked mailbox at 1922 Urbine Rd.
2. Do not include your SSN or bank account numbers. They are not needed.
3. Do not email applications.

Habitat for Humanity® Powhatan Critical Repairs Program 2026 Application

Name of Homeowner: _____ Date of Birth: _____

Address: _____ Telepone Number: _____

City/State: _____ ZIP Code: _____

Highest Education Level : _____ Age of home: _____

Email: _____ Marital Status: _____ Race: _____

Please fill out the following information:

Do you own the home?	Yes	No	N/A not applicable
If no, do you have lifetime rights?	Yes	No	N/A not applicable
Do you have a mortgage	Yes	No	N/A not applicable
If yes, are your payments current?	Yes	No	N/A not applicable
If no, how far are you behind?	1-3 mos.	3-6 mos.	6 months or more
Do you pay Powhatan County Real Estate Taxes?	Yes	No	N/A not applicable
Do any other individuals live in your home?	Yes	No	
How many would you say are:	_____Ages 17 & under _____Ages 18 to 64		_____ Age 65 or over
Total monthly household expenses/bills:			
Homeowner/s combined bank and savings accounts total:			

Name of other person(s) in household:	Date of birth:	Veteran?	Disabled?	Race:
		Yes **No**	**Yes** **No**	White Black Asian American Indian Alaska Native
		Yes **No**	**Yes** **No**	White Black Asian American Indian Alaska Native
		Yes **No**	**Yes** **No**	White Black Asian American Indian Alaska Native
		Yes **No**	**Yes** **No**	White Black Asian American Indian Alaska Native
		Yes **No**	**Yes** **No**	White Black Asian American Indian Alaska Native

REQUESTED REPAIRS

Criteria for Repairs:
Requested repairs must be critical or be at risk of causing a safety hazard for those living in the home.

Describe the Requested Repair(s)	Is this urgent?
	Yes or No
	Yes or No
	Yes or No
	Yes or No
	Yes or No
	Yes or No
	Yes or No
	Yes or No

HOMEOWNER RESPONSIBILITIES

Please read and acknowledge the following statements by circling your answer on the left:

I agree	I disagree	Provide a reliable contact phone number.
I agree	I disagree	Maintaining timely communication with Habitat-Powhatan, the contractors, and/or volunteers is vital to the Home Repair Process. If there is no response within one (1) week of outreach attempts, your application will be removed from the active list, and you will have to restart the application process.
I agree	I disagree	Be at home when Habitat-Powhatan staff, contractors, or volunteers come for scheduled appointments. This includes the home inspection conducted by the Critical Home Repair Coordinator and/or volunteer, any contractor estimates, and/or work being completed. I understand that not being home may result in the delay of the home repair process or the possible denial of the application.
I agree	I disagree	Delays or inconveniences may occur due to factors such as scheduling conflicts, weather conditions, or unforeseen circumstances.
I agree	I disagree	Take reasonable steps to ensure the work area is clear of household obstructions, including securing pets to maintain a safe and accessible environment for staff, volunteers, and/or contractors.
I agree	I disagree	Remove or protect household items in areas where they may be subject to dust, vibrations, or damage.
I agree	I disagree	Failure to comply with the above responsibilities may result in the denial of the application.
I agree	I disagree	Agrees to participate in a brief outcome survey upon completion of the home repairs, and again 90 days after the project is completed.
I agree	I disagree	I authorize Habitat-Powhatan to make repairs and improvements to my property.

AUTHORIZATION AND RELEASE

Please read and acknowledge the following statements by circling your answer on the left:

I understand	I do not understand & need clarification before work begins	I understand that a Habitat-Powhatan staff member and/or volunteer will visit my home to inspect the areas needing repair before any work begins, and I agree to provide reasonable access to my property for Habitat-Powhatan staff, volunteers, and professionals so they can complete the necessary work.
I understand	I do not understand & need clarification before work begins	Only repairs requested at the time of this application will be considered. Additional repairs identified by volunteers or professionals may be added with the approval of the Home Repair Coordinator.
I understand	I do not understand & need clarification before work begins	I will not be eligible to apply for additional home repairs through Habitat-Powhatan for a period of two (2) years following the completion of these approved repairs if the Habitat-set repair cap has been reached.
I understand	I do not understand & need clarification before work begins	Habitat-Powhatan is not able to guarantee or provide a warranty for the materials used or the quality of workmanship performed.
I understand	I do not understand & need clarification before work begins	Habitat-Powhatan will communicate with me, prior to the work being started, providing me with a detailed list of approved and denied repair tasks.
I understand	I do not understand & need clarification before work begins	I acknowledge that, if applicable, I will be required to apply for other relevant funding sources to help cover the expenses associated with my home repairs.
I understand	I do not understand & need clarification before work begins	Habitat-Powhatan will take before and after pictures of areas being repaired. Before and after pictures will be taken during home inspections, pre and post.
I understand	I do not understand & need clarification before work begins	Signing this application gives Habitat-Powhatan the right to use before and after photographs of the home repairs for promotional, educational, and/or outreach purposes. Any identifying information, such as faces, addresses, or personal items, will be blurred or excluded from any publicly shared images to protect your privacy. If I do not wish to provide consent, I will let the Critical Home Repair Coordinator know. Your decision will not affect your eligibility for services.

Acknowledgement and Understanding:

The undersigned applicant(s), _____, (print your name) hereby certify to the best of his/her knowledge that the information provided in this application is correct. By signing below, I authorize Habitat-Powhatan and its designated agents to verify any or all information, including this application for home repair services. I understand that Habitat-Powhatan may collaborate with other non-profit agencies, organizations, and companies to complete the necessary repairs. I give permission for Habitat-Powhatan to share relevant information and coordinate with these partners on my behalf to facilitate the repair process, and will insert this data into the county's empowOR database. I also understand that Habitat for Humanity-Powhatan screens potential applicant families on the sex offender registry, and that by completing this application, I am submitting myself and all persons listed to that check.

Signature of Homeowner: _____ Date: _____

Home Repair Coordinator Signature: _____ Date: _____

AUTHORIZED REPRESENTATIVE

Would you like to name anyone as an Authorized Representative?

☐ Yes, please fill out the information below ☐ No, please skip this section

Please fill out the information below if you would like to name someone who is authorized to discuss or make decisions regarding your home repairs. Due to our confidentiality policy, Habitat-Powhatan cannot communicate with any individual(s) who is not listed as an authorized contact. Written consent is required to share information with anyone other than the applicant.

Name of Authorized Contact _____

Relationship to Client _____

Phone Number _____

By initializing, _____(initials), I authorize the person above to discuss or approve/deny my request for home repairs with the program.

Remember:

- **To include a copy of your current mortgage statement.** *(if still making monthly payments)*
- **To provide proof of your gross household income:** *social security statement, tax return, paystubs, bank statement with payroll, or social security deposit.*
- **To provide proof of income of everyone living in your household.**
- **To include acopy of your homeowner's insurance.**
- **Submit your application at 1922 Urbine Rd** via locked mailbox *(to the right of the ReStore door)*
- **Do not email your application.**

Questions?

Please contact Tammie Woodson, Repair Client and Volunteer Coordinator
Phone: 804-594-7009, ext. 2
Email: tammiew@habitatpowhatan.org

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