



A Mission, A Ministry, A Miracle



APPLICATION REPAIR CARE PROGRAM

***Please note that application submission does not guarantee work will be performed. Eligibility requirements have to be met and requested home repairs have to be assessed.**

Date: _____ (married couples must apply as co-applicants)

Name: _____ Co Applicant Name: _____

Address: _____ Phone: _____

City, State, Zip: _____

Monthly Income (add all sources from all family members in household) : _____

Family Size: _____ Referred By: _____

Length of time in home: _____ Do you own your home? _____

Is your home insured? _____ Is your home a mobile home? _____

Veteran? Yes No

Sea Island Habitat for Humanity
2545 Bohicket Road Johns Island • South Carolina • 29455
843.768.0998 • F: 843.768.9968
www.seaislandhabitat.org
FED ID #57-0840667

Town of James Island
PO Box 12240 • James Island, SC 29422
843.795.4141 • F: 843.795.4878
www.jamesislandsc.us



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Type of Repairs (check all that apply)

WEATHERIZATION	CRITICAL REPAIR
<input type="radio"/> Exterior Door repair or replacement	<input type="radio"/> Accessibility (Wheelchair ramp, rails)
<input type="radio"/> Window repair	<input type="radio"/> Siding
<input type="radio"/> Caulking/foaming cracks and gaps	<input type="radio"/> Roofing
<input type="radio"/> Minor HVAC Repair	<input type="radio"/> Replacing dangerous kitchen appliances

FOR OFFICE USE ONLY – OWNERSHIP VERIFICATION UPON APPROVAL

- Proof of Ownership _____
- Proof of Income _____
- Proof of Residency _____

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