



# DISASTER RESPONSE

## INTAKE FORM

Kaua'i Habitat for Humanity's focus is on long-term recovery efforts for those affected by the 2018 flood. Household income must be 100% and below Kauai Median Income. Assistance available for income qualified Owner/Occupants; some resources also available for renters. Depending upon your situation and resources available, Kaua'i Habitat for Humanity may be able to assist you with help with rebuilding, help with making repairs, providing materials, home clean up, yard clean up.

### **AN INTAKE FORM MUST BE COMPLETED AND SUBMITTED, ALONG WITH THE FOLLOWING DOCUMENTS:**

1. Most recent two consecutive months of pay stubs. (For each household member 18 years and older)
2. Completed tax return for Tax Year 2017. If not available, provide W-2 forms instead. (For each household member 18 years and older)
3. As applicable: Most recent Social Security Benefits Letter, Retirement Statement, Financial Assistance Statement, Unemployment Benefits Statement or Disability Statement. (For each household member 18 years and older)
4. Copy of Mortgage or Deed to the house.
5. Copy of Homeowner's Insurance Declarations page
6. Insurance award letter or denial letter
7. Award letters or denial letters from other funding sources for rebuilding

### **CONTACT INFORMATION:**

**Mailing Address:** Kaua'i Habitat for Humanity  
P.O. Box 28, Eleele, HI 96705

**Office Location:** 1-3410 Kaumualii Hwy. in Hanapepe  
(green building, across from Salt Pond Country Store)

**Milani Pimental**  
Deputy Director  
(808) 335-0296 ext. 113  
milani@kauaihabitat.org

## INTAKE FORM

**INSTRUCTIONS:**  
**Complete the following questions as best you can.**  
**Resources will be explored and made available to you based on the information you share with us.**

**FOR OFFICE USE ONLY**  
 Received By: \_\_\_\_\_ on \_\_\_\_\_  
 Location received: \_\_\_\_\_  
 Reviewed By: \_\_\_\_\_ on \_\_\_\_\_  
 INTAKE REFERENCE NUMBER: \_\_\_\_\_

### PERSONAL INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Number in your household including yourself: \_\_\_\_\_  
 Are you the head of household?  Yes  No

The following information is strongly requested to assist us with obtaining future grant funding for our homebuilding programs. It is not required and will not be counted for or against you in determining your eligibility for assistance through the Habitat program.

Are you a single parent?  I am a single mother  I am a single father

Military status:  Active duty  Veteran  Reserves  Spouse of service member

Ethnic Background (check the one you most identify with):  
 African American  Caucasian  Filipino  Hawaiian  Latino  
 Native American  Polynesian/Pacific Islander  Other \_\_\_\_\_

### CONTACT INFORMATION

Do you have access to a phone?  Yes  No If yes, list number here: \_\_\_\_\_  
 Cell Phone  Land Line

Do you have access to email?  Yes  No Email: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
 \_\_\_\_\_



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### INCOME INFORMATION

List all household member names, date of birth, relationship and indicate their Gross Household Income (income before taxes) on the lines below.

First and Last Name	Birthdate	Relationship to you	Gross Income (before taxes)	Source of Income (Employment, Social Security, SSI, Child Support, Veteran Benefits, etc)
Write your name here:		<i>SELF</i>		



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### SUBMIT COPIES OF ALL DOCUMENTS LISTED BELOW:

1. Most recent two consecutive months of pay stubs. (For each household member 18 years and older)
2. Completed tax return for Tax Year 2017. If not available, provide W-2 forms instead. (For each household member 18 years and older)
3. As applicable: Most recent Social Security Benefits Letter, Retirement Statement, Financial Assistance Statement, Unemployment Benefits Statement or Disability Statement. (For each household member 18 years and older)
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### PROPERTY INFORMATION

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Address of property affected by the disaster: \_\_\_\_\_ Are you living at this address?  Yes  No  
 \_\_\_\_\_ If No, list address of where you are now living:  
 \_\_\_\_\_  
 \_\_\_\_\_

Do you own and occupy this residence or do you rent?  Own & Occupy  Rent  
 I own it but don't live there

Do you own the land the residence is on?  Yes  No  
 If you answer no, indicate name of land owner here: \_\_\_\_\_

Have you registered with Federal Emergency Management Agency (FEMA)?  Yes  No

Do you have: Homeowner's insurance?  Yes  No Renter insurance?  Yes  No  
 Flood insurance?  Yes  No Coverage for water damage?  Yes  No



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### REQUESTED REPAIRS

Please check (✓) the types of assistance you are requesting for your home.

- |  |   |
|--|---|
| <input type="checkbox"/> Mold damage             | <input type="checkbox"/> Yard clean up            |
| <input type="checkbox"/> Drywall repair          | <input type="checkbox"/> Tools                    |
| <input type="checkbox"/> Flooring                | <input type="checkbox"/> Building materials       |
| <input type="checkbox"/> Plumbing                | <input type="checkbox"/> Exterior repair          |
| <input type="checkbox"/> Electrical              | <input type="checkbox"/> Other (please describe): |
| <input type="checkbox"/> Interior Doors and Trim | _____   |
| <input type="checkbox"/> Appliances              | _____   |
| <input type="checkbox"/> Cabinets                | _____   |
| <input type="checkbox"/> Countertops             |   |
| <input type="checkbox"/> Home clean up           |   |

What assistance or help have you already received?

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