Christmas In Action of Hamilton County
PO Box 996
Fishers, IN 46038

Christmas In Action (CIA) Owner-Occupied* Home Repair Application

Name of homeowner(s)

_____

Address _____ City_____

State _____ Zip _____ Home phone_____ Cell phone _____

Email _____Other Contact Person _____Phone_____

Is/Are the homeowner(s): Elderly? _____ Age _____ Disabled? _____ Low Income? _____

Total <u>monthly</u> income of all persons residing at the above address: $_____

Is this the only property owned by the homeowner(s)? Yes _____ No_____

Is/Are the homeowner(s) working? Yes _____ No _____ Retired _____

If yes, or retired, where are/were you employed? _____

Is/Are any person(s) residing in the home a US Military Veteran? ____ Explain Their Service:

_____

Is/Are the homeowner(s) a member or regular attendee of a local church? Yes _____ No _____

If yes, please list _____

Is/Are the homeowner(s) a member of any community organizations? Yes _____ No _____

If yes, please list _____

Please describe why the homeowner(s) need(s) Christmas In Action to assist with home repairs.

_____
_____
_____
_____
_____

Describe the work needed to be done at the homeowner's house. Please be as specific as possible and list work items in your order of priority:

1._____

2._____
3._____
4._____
5._____
6._____
7._____
8._____
9._____

Friends and family members of the homeowner(s) are encouraged to help with the repairs. List the names, address and phone numbers of family and friends that would be willing to participate.
1._____
2._____
3._____
4._____
5._____
6._____
7._____

Is/Are the homeowner(s) aware of this referral? YES_____NO_____

This is typically a one to three day program. The work is done by volunteers usually at no cost to the homeowner(s). Able bodied adult relatives living with the homeowner are requested to help work on the home on the Christmas In Action workday. We do not guarantee that all the work will be completed but will make our best efforts to have all the work completed.

How did you learn about Christmas In Action?
_____

Name of person submitting this referral:
_____
Agency: _____Phone: _____
Date: _____

*NOTE: In some cases, CIA will work on homes owned by extended family member(s) if other family members are living in the home. In this case, both the resident(s) and the property owner(s) must sign a Waiver and Release of Liability. CIA does not work on rental homes. CIA, typically, only works in Hamilton County, Indiana.