

Home Owner
Application Protocol:

Contact homeowner
and assist them in
filling out this
application. Some
people do not want
help, so be sensitive
to this.



Please return completed
application to an ER
Ministry team member by
February 15, 2008 for
consideration in the ER
ministries summer
mission project. Thank
you!

Application for Home Repair Assistance -2008

† Applicant name and age:

† Address of home: _____

† Daytime phone number: _____

† List owner's name as recorded on house title:

† If you have a church you attend, what is the name and how long have you attended?

† Briefly describe your home repair needs:

† List the name, age, and relationship to the homeowner of each person living in the home (attach extra sheet if necessary):

Best time of day to
call or visit:

**ER Ministries – A Christ-centered
ministry that uses volunteers to
repair the homes of those in
need!!!!**

Please attach directions to the home.

Submitted by:

Date: _____