



# Ramp Up RI Application

**Dear Applicant:** Complete this application as accurately as possible to help us determine your eligibility for the South County Habitat for Humanity (SCHH) Ramp Up RI program. If you have any questions regarding this application, please contact the SCHH office at 401.213.6711 ext. 305.

## Applicant Information

Applicant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home address: \_\_\_\_\_

Do you need approval to install a ramp? (i.e. from a landlord, property manager, homeowner association, etc.) Yes or No

If approval is required, please provide contact information for the approving entity OR submit a letter of permission: \_\_\_\_\_

\_\_\_\_\_

Are any household members Veterans? Yes or No

## Contact Information - *Who should we contact regarding this application?*

Contact Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

*Please complete the following income chart for all household members 18+, including yourself:*

Household member name	Age	Total gross monthly income	Source of income (if applicable)

## Applicant Agreements

**Applicant authorization:** I understand that by submitting this application, I am authorizing South County Habitat for Humanity to evaluate my need for a ramp.

I understand that the evaluation will include a home assessment and income verification. I have answered all the questions on this application truthfully.

\_\_\_\_\_  
**Applicant Name** (*print*)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Willingness to partner:** By partnering with SCHH, you choose to share photos, videos, or stories about how a ramp impacts your family to support fundraising and advocacy for the RampUp Program. Participation is optional, and your decision will not impact your application.

\_\_\_\_\_  
**Applicant Name** (*print*)

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

## Required documents

- Current driver's license or equivalent
- Proof of current homeowners insurance (if applicable)
- Proof of income for all household members 18 or older. (As applicable please provide current award letters or 2 months of pay stubs).

***Please submit your completed application with the required documents to:***

Office: 1555 Shannock Road, Charlestown, RI 02813 - *open Monday – Friday 9-4*

Mail: South County Habitat, PO Box 68, Shannock, RI 02875

E-mail: [Aliyya@southcountyhabitat.org](mailto:Aliyya@southcountyhabitat.org)



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