



NAPERVILLE RESPONDS FOR OUR VETERANS APPLICATION

THERE IS NO APPLICATION FEE REQUIRED TO SUBMIT THIS APPLICATION FOR ASSISTANCE FROM NAPERVILLE RESPONDS FOR OUR VETERANS.

Please call (630) 276-7567 if you need help completing this form. Incomplete applications will not be considered. Return completed applications to: Naperville Responds for Our Veterans, 1111 S. Washington Street, Naperville, Illinois 60540.

1. TYPE OF ASSISTANCE

- A. New Home
- B. Repair(s)/Modification(s) to Existing Home

2. APPLICANT

Name of Applicant (Veteran)		Date of Birth
Address		
City/State/Zip		
Email Address	Home Phone ()	Cell Phone ()
If Married, Name of Spouse		
Name(s) of Child(ren) Living with You		

Briefly Describe Your Current Housing Situation

3. MILITARY BACKGROUND

Branch of Service		Rank	Service Number
Disabled (yes/no)	Date of Injury	VA Disability Rating	

4. PLEASE PROVIDE AT LEAST TWO (2) REFERENCES:

Name	Phone ()
Address	



Email Address
Relationship to you

Name	Phone ()
Address	
Email Address	
Relationship to you	

5. NEEDED REPAIRS

Please list in detail your top-priority repair needs. Naperville Responds for Our Veterans does not guarantee that all requested items can or will be addressed if your home is selected. Our goal is to make homes safer and more accessible.
1.
2.
3.
4.

6. The following must be provided when submitting this signed application:

Please complete and attach VA Form 10-5345 *Request For and Authorization to Release Medical records of Health information* with this Application.

7. By signing my name on this application, I believe that I am eligible to receive this assistance and understand that additional information may be required as my application is further evaluated. I understand that acceptance to receive assistance from *Naperville Responds For Our Veterans* is solely at the discretion of the organization.

A. I understand that as the review process continues I may be asked to provide additional information, including but not limited to:

- Copy of DD Form 214
- Copy of DoD official rating
- Copy of VA official rating
- Photos of you and your family
- Income Verification: Most recent 2 years of Federal and State income tax returns for all adults in household. If you did not file a tax return in the past year, please submit a copy of your bank statement displaying public assistance received.
- Letter of recommendation from commanding officer, or equivalent, if separated from active duty within the last 2 years.



- Proof of ownership by Title/Warranty Deed (ONLY if requesting repair/modification)
- Homeowners Insurance Declaration Page (ONLY if requesting repair/modification)

B. I understand that additional reviews of all of the adults that occupy, or will occupy, the home. These reviews will be kept confidential and may include the use of criminal background checks, the procurement of consumer reports, and the consultation with the local police department as to police reports at the residence. You have the right to inquire whether a consumer report was requested, as well as the name and address of the agency furnishing the report. The information being obtained will not be used in violation of any federal or state equal opportunity law or regulation.

C. I certify all the information contained in this document is true to the best of my ability. I submit this information under my own free will to be used by *Naperville Responds for Our Veterans* in deciding to extend assistance to me.

Signature of Applicant

Date