

# Mini-Repair Request Application

(Please print)

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Best time to call

Address: \_\_\_\_\_

Social Security Number \_\_\_\_\_

\_\_\_\_\_  
Date of Birth

Ages of Others in Household \_\_\_\_\_

Gender      Male  Female

Veteran      Yes  No

Born Outside the US  Yes  No

Household Income \_\_\_\_\_

Type of Home  1 family  Yes  No

Disabled  Yes  No

English  Yes  No

Mortgage Paid Off  Yes  No

Minority  Yes      No

Marital Status

Widow      Single

Divorced      Widower

Married      Separated

If so:

Black or African  
American

Asian

Black/African American  
and White

Asian and White

Native Hawaiian/Other  
Pacific Islander

American Indian/Alaskan  
Native and Black

American Indian/Alaskan  
Native and White

American Indian/Alaskan  
Native

Hispanic

Other

Education Completed

Below High School

bachelor's degree

master's degree

High School or Equal

2 yr. College

Above Master's Degree

Where did you hear about the program?

\_\_\_\_\_

Please return this form to:

Rensselaer County Housing Resources (RCHR)

409 River Street, Troy, NY 12180 (518) 272-8289

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## Program Disclosure

Troy Rehabilitation & Improvement Program, Inc. (TRIP) is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all personal information shared orally and/or in writing will be managed within ethical and legal considerations. Additionally, we want you to understand how we use the personal information we collect about you. Please carefully review this notice as it describes our policy regarding the collection and disclosure of your nonpublic, personal information.

### **What is nonpublic, personal information?**

- Information that identifies an individual personally and is not otherwise publically available information, such as your Social Security Number or demographic data such as your race and ethnicity will be needed to participate in program.
- Includes personal financial information such as credit history, income, employment history, financial assets, bank account information and financial debts

### **What personal information does TRIP collect about you?**

We collect personal information about you from the following sources:

- Information that you provide on applications, forms, email, or verbally.
- . We restrict access to your nonpublic personal information to TRIP employees who need to know that information in order to perform their housing counseling duties. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information; and we train our staff to safeguard client information and prevent unauthorized access, disclosure, or use.

**\*More information on the back. Please make sure to sign.\***

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## Program Disclosure

### **What categories of information do we disclose and to whom?**

Federal, State, and nonprofit partners for program review, monitoring, auditing, research, and/or oversight purposes, and/or any other pre-authorized individual and/or organization.

The types of information we disclose are as follows:

- Information you provide on applications/forms or other forms of communication. This information may include your name, address, Social Security Number, employer, occupation, account numbers, assets, expenses, and income.
- **We do not sell or rent your personal information to any outside entity.**
- We may share anonymous, aggregated case file information; but this information may not be disclosed in a manner that would personally identify you in any way. This is done in order to evaluate our program, gather valuable research information, and/or design future programs.
- We may also disclose personal information about you to third parties as permitted by law.

### **How is your personal information secured?**

All information is kept in compliance with HUD. All files are kept locked and secured.

\_\_\_\_\_  
Name/Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name/Signature

\_\_\_\_\_  
Date



**NeighborWorks**  
HOMEOWNERSHIP CENTER  
CHARTERED MEMBER