



## **NEIGHBORHOOD INITIATIVE PROGRAM**

*People Helping People for Over 10 Years!*

### **WHAT IS THE NEIGHBORHOOD INITIATIVE PROGRAM?**

The Neighborhood Initiative Program (NIP) was created to help pair volunteers with North Richland Hills homeowners who are unable to complete necessary repairs to their homes because of difficulties or circumstances beyond their control.

### **AM I ELIGIBLE FOR NIP?**

NIP is designed to assist those homeowners who are in the greatest need of assistance and are unable to perform the necessary work themselves. Certain guidelines must be met before a homeowner will be considered eligible for assistance through the NIP program. These include but are not limited to income restrictions and length of time at current residence. Additional consideration is given to homeowners who are disabled, chronically ill, elderly, a single head of household with dependents living with them and veterans. To determine if you are eligible for this program, please fill out and submit the attached application and a representative from the City of North Richland Hills will contact you within 1-2 weeks from the date the application is submitted to discuss your situation.

### **HOW LONG DOES IT TAKE FOR MY HOME TO BE REPAIRED?**

Once it is determined that a homeowner is eligible for NIP, their address will be added to a list of homes currently needing assistance. This list is shared with volunteer organizations who have partnered with the City of North Richland Hills to assist with NIP. Volunteers include churches, businesses, civic organizations and individuals who have a desire to help. These are the organizations that will ultimately select your specific home and complete the necessary repairs. Since this is a volunteer based program, we cannot guarantee a time frame of when or if your home will be chosen from this list. It is also a possibility that only a portion of the items you requested will be completed due to the limitations of the volunteer organizations.

### **HOW DO I APPLY TO THE NIP PROGRAM?**

To apply for assistance through NIP, please complete this entire application and return it to:

North Richland Hills City Hall  
Attn: Kristin James  
4301 City Point Drive  
North Richland Hills, Texas 76180

A representative from the City of North Richland Hills will contact you within 1-2 weeks from the date the application is submitted to discuss your situation, schedule an inspection of your property, and answer any questions you might have about the program.

**If you should have questions or need help filling out the application, please contact  
817-427-6651 or [NIP@nrhtx.com](mailto:NIP@nrhtx.com).**



Application Number \_\_\_\_\_

Date Received \_\_\_\_\_

**NEIGHBORHOOD INITIATIVE PROGRAM APPLICATION FORM**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Best time to call? \_\_\_\_\_

Email: \_\_\_\_\_

Alternate Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

How long have you lived at your residence? Years \_\_\_\_\_ Months \_\_\_\_\_

Do you plan on selling your home in the next 2 years?  Yes  No

Are you behind on your mortgage?  Yes  No If so, how many months behind are you? \_\_\_\_\_

Do you owe back taxes on the property?  Yes  No If so, how much do you owe? \$ \_\_\_\_\_

Is your home:  Electric Only  Gas and Electric

Are you financially able to assist in purchasing necessary supplies for repairs?  Yes  No

**Must meet one of the following criteria to receive assistance (check all the following that apply):**

- Handicapped  Disabled  62 years of age or older  Veteran
- Single head of household (single parent) with a dependent child living at home

How many people currently live in your home? \_\_\_\_\_ Of those, how many are under 18? \_\_\_\_\_

Please provide the total household income. This includes ALL income from ALL persons living at the property: \$ \_\_\_\_\_

Do you have documentation to support your answers?  Yes  No

Are you willing to provide copies of this documentation for verification?  Yes  No

Do you receive assistance from other organizations (i.e. Meals on Wheels,  Yes  No

Mid-Cities Care Corp, etc.)? If so, please provide the names of those organizations:

\_\_\_\_\_  
\_\_\_\_\_

How did you hear about the Neighborhood Initiative Program: \_\_\_\_\_

Name: \_\_\_\_\_

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

**NARRATIVE SECTION**

Please use the space below to describe what repairs you feel are necessary at your home. You may attach additional sheets of paper if needed.

---

---

---

---

---

---

---

---

Please use this section to explain your current situation. What circumstances led you to need assistance with home repairs? Why should your home be considered for this program instead of another one in your neighborhood? You may attach additional sheets of paper if needed. Once you are finished please sign and date the bottom of the form.

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

By signing this form, I understand that submission of this application does not guarantee that I will qualify for or receive assistance from the City of North Richland Hills Neighborhood Initiative Program or any of its' affiliated volunteer organizations. I further understand that more documentation may be required to verify portions of this application.

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

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

<i>Office Use Only</i>	
<input type="checkbox"/> Ownership Verification	: ___ / ___ / ___ _____
<input type="checkbox"/> TAD Value	: ___ / ___ / ___ _____
<input type="checkbox"/> Past Taxes Due	: ___ / ___ / ___ _____
<input type="checkbox"/> Outstanding Liens	: ___ / ___ / ___ _____
<input type="checkbox"/> Open Code Violations	: ___ / ___ / ___ _____
<input type="checkbox"/> NITF	: ___ / ___ / ___ _____