



## Application For Vehicle Work

Please fill out the attached application in its entirety. This application is in place to get to know you, understand your needs, and help us determine how we can best serve you. ***Please understand this application does not guarantee services.*** We have had a large influx of applications and while we would love to serve every single person, know that that may not be possible. Please do not call the church office to check on your "status".

### Personal Information

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address		
Birthdate	Gender	Best Time to reach you by phone		
Who referred you to Ignition?		What is your Home Church?		

### Family Information

Marital Status	Spouse's Name & Birthdate	Number of children living with you	
Name and Age of Children			

Why are you unable to afford the Necessary Work on your vehicle?

### License and Insurance Information

Driver's License Number (copy required)	State	Expiration Date
Auto Insurance Company	Policy #	

### Vehicle Information

Vehicle Registration County and State (copy required prior to work)	Vehicle Year	Make & Model	Miles
Issue #1 with vehicle	Issue #2 with vehicle	Issue #3 with vehicle	Motor (size, liters, etc)

## Additional Sources of Assistance

Because many government-funded assistance organizations exist as well as other not-for-profit assistance organizations, please list below other sources that are willing to help with this need (including family/friends)

Name	Phone	Amount
Name	Phone	Amount
Name	Phone	Amount

## Requested Assistance

What type of additional assistance would you need (such as financial, classes on budgets or car maintenance, guidance, prayer, etc...)?

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What steps are you taking to improve your current financial situation?

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How long will any assistance solve the problem? Do you expect to need financial or vehicle support in the future?

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Have you approached any other organization for help within the past 12 months? If yes, how much?

## Income Information

I am employed by and hours/week (if not employed write "not employed")

Address	City	State	Zip
Phone Number	Supervisor		Net weekly income

My Spouse is employed by and hours/week (if not employed write "not employed")

Address	City	State	Zip
Phone Number	Supervisor		Net weekly income

Monthly Unemployment (if applicable)

Monthly Child support	Disability	TANFF
Food Stamps/SNAP	Other Assistance	

## Acknowledgments

### Please read and initial each of the statements below

I understand that IGNITION is a part of Ignite Wesleyan Church as a non-profit organization and therefore relies on the generosity of volunteers and donations and is under no obligation to perform any work on my vehicle.

I understand that the work done by IGNITION is NOT under warranty, though parts put on my vehicle may be warrantied through the manufacturer.

I understand that there is no cost for labor, but I may be responsible to pay for the full cost of parts/fluids/lubricants/etc prior to work.

I understand that I may not have use of my vehicle for as long as it takes to complete the work and that a 'loaner' vehicle is not provided by IGNITION or Ignite Wesleyan Church.

I understand that if IGNITION crew members find something during work that is a safety issue not found during vehicle review, I will be contacted and given options.

I certify that I am the legal owner of this vehicle and I hereby release all volunteers, employees, Ignite Wesleyan Church, and the IGNITION garage from any and all liability in the work performed on my vehicle.

I understand that my signature is legally binding, and I will be held to the information agreed upon within the application.

I give permission for IGNITION garage to use photos or videos of me and/or my vehicle for purposes of promoting IGNITION and its programs.

I understand that the work done by IGNITION may require myself and/or my spouse to attend a budget class and/or vehicle maintenance class depending on a person's situation.

## Signature Disclaimer

I hereby authorize the release of information to IGNITION garage. I certify the information I have stated is true and correct. I understand that any deliberate misrepresentation of information may subject me to denial of assistance.

I permit IGNITION garage to discuss my case with other agencies, businesses, churches, attorneys, individuals and others deemed necessary to verify the application information and/or identify additional sources of assistance. I understand that all information will remain confidential within these entities.

Name (Please Print)	Signature
Date	

*(Once your application is complete, please email it back to Ignition@ignitewesleyan.org or bring it to the church office at 404 W Brundage Ln. Once we've received your application, I will be back in touch if we need any additional information.)*