



**HOMEOWNER APPLICATION
FOR FREE HOME REPAIR WORK
2011
PART ONE**

*Application Deadline: **October 15, 2010***

For more information or questions call (505) 828-5258

PROGRAM INFORMATION

Rebuilding Together Albuquerque (RTA) is a non-profit, volunteer program designed to provide free home repair services to low-income homeowners who are seniors, people living with disabilities, and/or families with children in the City of Albuquerque. Help is available to homeowners who are physically or financially unable to repair their home. Services are related to safety, warmth, and independence.

- RTA services are FREE and completed primarily by volunteers, supported by public and private funding.
- Social Service benefits are NOT affected by receiving RTA's free repair services.
- RTA's Project Selection Committee determines which homes will be accepted into the program based on the following criteria/variables: work requested meets the mission; the number of applications received in a year; the need and resources available to the homeowner; resources available to RTA to complete the requested repairs; and the homeowner's willingness to fully participate in the program. Homeowner participation and involvement to the best of their physical ability is required, and family members (or nonprofit staff/clients) are also expected to participate.
- RTA is limited in the type of work that can be completed based on the funding and volunteers available. Approximately 25% of homeowners and 30% of community facilities that apply are accepted. Due to size and complexity of the work requested (either too much or too little), RTA may not be able to accept certain projects. RTA does not work on apartments, condos or townhouses. RTA does not usually do structural repairs, such as foundations or framing, etc.
- Sites will be selected in late February, and work will be completed to the best of RTA's ability by National Rebuilding Day on Saturday, April 30, 2011. Volunteers will do the bulk of the repairs on that single day.
- RTA is committed to providing equal opportunities for all applicants for the program's services. All selection decisions are made without regard to unlawful considerations of race, sex, religion, national origin, age, sexual orientation, disability, or any other legally protected status.

Date of Application: _____

Please keep this page for your records

**Rebuilding Together Albuquerque
HOMEOWNER APPLICATION**

Date of Application: _____

ELIGIBILITY REQUIREMENTS

- Home must be in the Albuquerque city limits
- Applicant must own the home, provide proof of ownership, live in home, and have homeowner's insurance
- Applicant must NOT own more than one home
- Home may NOT be an apartment, condo, townhouse, or be affiliated with a Homeowner's Association
- Total household income must not be greater than the following HUD guidelines:

Household size	1 person	2 people	3 people	4 people	5 people	6 people	7 people
Total monthly income*	\$2,775	\$3,175	\$3,570	\$3,970	\$4,285	\$4,600	\$4,920
Total annual income*	\$33,300	\$38,100	\$42,850	\$47,600	\$51,400	\$55,200	\$59,000

*Applicant shall, upon request, provide proof of **rental income** and the income of **all adults (over 18)** living in the home. The income above is considered **gross** income - **before taxes are taken out.**

ADDITIONAL CONTACT INFORMATION

Do you have a social worker, case worker, or conservator? If so, please list their information here:

Name _____ Phone Number _____

Is English your primary spoken language? Yes No

(If you checked "no", please check off one of the following boxes below:

I am comfortable speaking English.

I prefer to speak another language and have a translator to assist me with the application process.

Translator's Name _____

Translator's Phone Number _____

Preferred Spoken Language _____

I need a translator.

Preferred Spoken Language _____

If this form has been prepared by someone other than the homeowner, or if assistance has been given to the homeowner, please complete the following:

Name of person preparing or assisting with the application _____

Daytime phone _____ Relationship to the owner _____

Would you like to be present at the home visit? Yes No

Is the homeowner aware of this application? Yes No

HOMEOWNER INFORMATION

Name of Applicant (and Spouse, or Partner, if applicable) _____ Any Former Names _____

Address _____ City / State / Zip _____

Home Phone _____ Work Phone _____ Preferred phone number / best time to call _____

E-mail Address _____

List all persons living in the home, including applicant:

Name:	Relationship:	Age:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please note: The number of people living in the home does not affect acceptance into the program

Name of nearest relative living in the area: _____

Phone: _____ Relationship to homeowner: _____

Emergency contact (if different): _____

Phone: _____ Relationship to homeowner: _____

HOUSE INFORMATION (list your top priorities for repair)

1. _____ 2. _____
3. _____ 4. _____

Does your roof need repair? Yes No If yes, are there active leaks? Yes No

Additional projects you would like to see completed: _____

Bedrooms: _____ Bathrooms: _____ Total number of rooms: _____ Sq. Ft: _____

Year Built: _____ Any additions? Yes No Mobile Home? Yes No

Do you have any pets in the home? Yes No

If so, what types of pets and how many? _____

Please note: Having pets does not disqualify you from our program

Please explain why you or your family are unable to complete these repairs: _____

Do you have homeowner's insurance? Yes No Policy number: _____

Contact person: _____ Phone: _____

STATISTICAL INFORMATION

None of this information will impact your acceptance. It is strictly used for grant reporting purposes.

- Is the head of the household* a female? Yes No
** "Head of the household" is the person responsible for more than half the cost of maintaining a home for the year*

- Are you disabled? Yes No If Yes, please explain what your disability is: _____

- Is anyone else in the house disabled? Yes No If Yes, please explain who and what the disability is: _____

- Is anyone in the house a veteran or a widow/widower of a veteran? Yes No
 Years of Service _____ Branch _____

- What is your racial/ethnic background?
(Please check one box as appropriate for each resident)

RACE	ETHNICITY	
	Not Hispanic	Hispanic
White		
Black/African American		
Asian		
American Indian/Alaska Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaska Native and White		
Asian and White		
Black/African American and White		
American Indian/Alaska Native and Black/African American		
Other Multi-Racial		

- What year did you move into your home? _____

- Are you the sole owner of the home? Yes No If not, please list all the names on the title:

- Have you participated in our program* in the past? Yes No If so, when? _____
** Priority will be given to first-time recipients.*

- How did you hear about the program? If by newspaper, which one? If by friend, please give name:

- Have you worked with another housing program*/organization? If so, when and which ones?

** Participation in these programs does not disqualify you from ours.*

REQUIRED DOCUMENTS UPON RTA REQUEST

Upon request of Rebuilding Together Albuquerque, your income and proof of ownership will need to be verified. **All income** from **all sources** must be documented for **all household members**, including unrelated persons. It is not necessary to provide social security or bank account numbers. This information is not required with your application at this time.

INCOME	OWNERSHIP
One copy of each item per resident	One copy of any one of the following
<ul style="list-style-type: none">• Most recent income tax return OR <ul style="list-style-type: none">• Each of the following:<ul style="list-style-type: none">○ Last two pay stubs○ W2, SSI, or SSDI statement○ Last three bank statements○ Social security award letter○ Rent check(s)	<ul style="list-style-type: none">• Deed to property OR <ul style="list-style-type: none">• Most recent property tax bill (must include name and address printed on the document)

AUTHORIZATION AND VERIFICATION

I am not presently planning, nor do I intend within the next two years, to sell my home. I understand and agree to have my home renovated by volunteers.

I am providing proof of residency with the enclosed billing statement (i.e. cable, phone, or utility).

I authorize Rebuilding Together Albuquerque to perform criminal and home ownership background checks on myself and members of my household.

I understand that Rebuilding Together Albuquerque will not share my information with any individual or agency that is not on the Board of Directors.

I understand that I will have to provide documentation to prove my income and ownership of my home upon request of Rebuilding Together Albuquerque.

I, the undersigned, certify subject to disqualification that this information is true and correct and that the provisions stated are accepted and agreed to:

Applicant Signature

Date

Please submit this completed application with proof of residency by October 15, 2010.

If your application is not received by this date, we cannot guarantee that your home will be accepted for our National Rebuilding Day in April 2011. However, all applications we receive are considered and may be eligible for another project day in 2011, date to be determined.

INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED

Mail to: Rebuilding Together Albuquerque
PO Box 27684
Albuquerque, NM 87125

There is no application fee required to make application to receive assistance from any Rebuilding Together affiliate, including Rebuilding Together Albuquerque. Rebuilding Together Albuquerque has not authorized any other person or entity to act as its agent for the purposes of this application and any fees or costs associated with this application paid by the applicant to any such person or entity are not fees or costs charged by Rebuilding Together Albuquerque.