



Homeowner Application

Mail to: Rebuilding Together of Richmond- **406 W Franklin St. Suite B Richmond, VA 23220**

Email to: info@rebuildingtogetherrichmond.org Call us at **(804) 447-3841** with any questions.

Homeowner Information:

Name: _____ Age: _____ Date of Birth: _____

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Address: _____ City: _____ Zip: _____

Race (circle the most applicable):

1. White
2. Black/African American
3. Asian
4. American Indian or Alaska Native
5. Native Hawaiian/Other Pacific Islander
6. American Indian/Alaska Native & White
7. Asian & White
8. Black/African American & White
9. American Indian/Alaska Native & Black/African American
10. Other Multi Racial
11. Other _____

Ethnicity (circle the most applicable):

1. Hispanic
2. Non-Hispanic

Year home was built: _____ Number of years at this address: _____

Phone: _____ Alternate Phone: _____

Email address: _____ Do you regularly check this email? _____

Emergency/Secondary Contact: _____ Phone: _____

If someone other than the homeowner prepares this application, or helps the homeowner fill it out, please complete the following:

Name of person preparing/assisting with application: _____

Relationship to applicant: _____

Address: _____ Phone: _____

Desired Repairs:

Please check-off the kinds of repairs you feel are needed at your home. ***Rebuilding Together Richmond cannot guarantee that specific repairs will be addressed.***

Weatherization

- roofing
- weak/rotting flooring
- gutters/downspouts
- drainage improvements
- insulation
- doors/windows
- mold/moisture issues
- heating system

Safety/Security/Health

- outlets/switches
- plumbing/ hot water tank
- lighting improvements
- stairs/steps (unsafe)
- grab bars/handrails
- ramp
- clutter removal
- deadbolts/locks

General Repairs

- tree removal needed
- pests
- siding/trim repairs
- shed/basement cleanout
- ceiling/wall repairs
- bathroom/kitchen
- appliances (broken)
- other:

Statements of Ownership, Income and Residence:

Rebuilding Together will require verification of all information provided on this application.

1. Rebuilding Together services are available only to **full-time resident homeowners**.

The title to this home is held in the following name(s):

Please list everyone living in the home (include **name, age and relationship**):

Is the homeowner or anyone else living in the home disabled? If so, indicate special needs such as wheelchair, walker, hearing or sight impaired, etc.

Are there **any children age 6 and under** staying/visiting/living at this home on a regular basis (such as for daycare)? _____

Are there any **veterans** of the US Armed Forces currently residing here? _____

Name: _____

Branch: _____ Rank: _____

Do you **owe city taxes** on your home? _____

Did you have heat in your home last winter? _____

What type of heating source do you have in your home? Gas _____,
Oil _____, Electric _____, Cook Oven _____, Space Heater(s) _____.

3. **Income & Asset Disclosure** for all residents, including the homeowner, living in the home.

Name	Age/relationship to homeowner	Monthly income	Source (job, SSI, disability, etc.)
		\$	
		\$	
		\$	
		\$	

1. Do you have any cash held in savings accounts, checking accounts, safe deposit boxes, homes, etc. For savings accounts use the current balance. For checking accounts use the average 6-month balance: Yes _____ No _____ If yes, please list amount \$ _____

2. Do you have an individual retirement and Keogh accounts (even if withdrawal would result in penalty): Yes _____ No _____ If yes, please list amount \$ _____

3. Do you have a retirement and pension fund: Yes _____ No _____ If yes, please list amount \$ _____

4. Do you have stocks, bonds, Treasury bills, certificates of deposit and money market accounts: Yes _____ No _____ If yes, please list amount \$ _____

Total amount of all assets listed above (lines 1-4): \$ _____

Homeowner's Statement of Eligibility:

I, _____ have asked Rebuilding Together (RTR) to provide repairs to my home. I understand that year-round RTR services are funded by the City of Richmond Community Development Block Grants to provide assistance to low-income homeowners who have no other means to afford home repairs. In addition, I understand that to knowingly submit false information is considered fraud and punishable under law. By signing my name and initialing these statements, I guarantee that I am eligible to receive this assistance, as follows:

Please write your initials next to each statement below:

1. All the information submitted on my homeowner application is complete and correct. _____
2. I am the owner of the home at the above address, and this house is my full-time residence. _____
3. I understand that RTR and the City of Richmond will **not** require payment for these services nor place a lien on my property. _____
4. If it is determined that my residence may or will be involved with the regulations concerning lead based paint, it is my understanding that I will be informed of the process and outcome. I agree to sign all applicable forms related to lead testing, final reports, etc. and all access to my home for testing. _____
5. I will not sell, rent or transfer ownership of this house for 18 months after completion of repairs. _____
6. I, my spouse, partner and/or any other owners of my home have no other financial resources to afford the services that I have requested. _____
7. I authorize RTR and its representatives to complete paperwork required to obtain building permits necessary to repair my home. _____
8. I am aware that RTR cannot make promises as to the specific work that will be done. I understand it may not be possible for volunteers to return after the scheduled work day. _____
9. I authorize RTR to verify any information I have provided on this application, and I understand that the City of Richmond's Police Department may screen my address for history of illegal activity. _____
10. I authorize RTR to inquire with other service agencies regarding my eligibility for any services or assistance I've requested from RTR. _____
11. I will take full responsibility for securing valuables located in my house while work is being completed, and I understand RTR cannot be held responsible for misplaced or broken items. _____

Rebuilding Together is an **all-volunteer** effort that relies on community involvement. If your home is selected, friends and family are asked to **not** be present while work is being completed. If friends and family would like to be present, we expect that they work with us, including helping and thanking volunteers. Please initial to indicate your agreement: _____

Signed: _____
(Homeowner)

Date: _____

(Homeowner)

Date: _____