



200 Trans Air Dr. #200
 Morrisville, NC 27560
 Office: 919.341.5980
 Fax: 919.651.0034
 www.rtriangle.org

Dear Applicant,

Thank you for inquiring about home repair services from Rebuilding Together of the Triangle (RTT). RTT seeks to make a sustainable impact, ensuring vulnerable homeowners – including seniors, individuals with disabilities, and families with children – live in safe, healthy homes.

We coordinate these services when the disrepair of a home imposes discomfort, the environment of a home is unsafe or presents a health hazard to its occupants, and the homeowners are unable to make repairs themselves.

In order to be considered for the program, the following criteria must be met:

- You must own and have lived in your home for at least 2 years,
- You must be a resident in Chatham, Durham, Orange or Wake County,
- Your property taxes must be current,
- Your household income must fall at or below 65% of the Median Income, per the table below. Proof of income must also be submitted with application, and
- You must plan to stay in your home for at least 3 years after work has been completed.

Annual Maximum Household Income (65% of Median Income)						
<u>County</u>	<u>1 person</u>	<u>2 person</u>	<u>3 person</u>	<u>4 person</u>	<u>5 person</u>	<u>6 person</u>
Chatham	\$38,610	\$44,135	\$49,660	\$55,120	\$59,540	\$63,960
Durham	\$38,610	\$44,135	\$49,660	\$55,120	\$59,540	\$63,960
Orange	\$38,610	\$44,135	\$49,660	\$55,120	\$59,540	\$63,960
Wake	\$42,185	\$48,230	\$54,275	\$60,255	\$65,130	\$69,940

Once your application and income documentation has been received, RTT will verify your eligibility. We will contact you by telephone to set up a home visit to assess the requested repairs listed and evaluate whether or not your project is a fit for our program. Please be advised that we are not an emergency organization and do not have the capacity for immediate response. If you are accepted into the program, your home repairs will be completed as soon as the funding and other resources are available to help you.

Sincerely,

Rebuilding Together of the Triangle

Repairing Homes. Revitalizing Communities. Rebuilding Lives.



200 Trans Air Dr. #200
 Morrisville, NC 27560
 Office: 919.341.5980
 Fax: 919.651.0034
 www.rtriangle.org

Homeowner Application

Please complete all sections of this application to prevent delays during the review process.

Last Name: _____ **First Name:** _____ **Middle Initial:** _____

Address: _____

City: _____ **State:** _____ **ZIP code:** _____ **County:** _____

Number of years at this address: _____ **Phone Number:** _____

Email: _____ **Cell Number:** _____

Emergency contact or person to call if we can't reach you:

Name: _____ **Phone:** _____ **Relationship:** _____

Provide information below for everyone who lives in this home, including yourself:

Name	Birthdate	Relationship	Employed (Y/N)	Disabled (Y/N)	Veteran (Y/N)
	/ /	Self			
	/ /				
	/ /				
	/ /				
	/ /				

Race (please circle): African American/Black Alaska Native American Indian Asian
 Native Hawaiian/Pacific Islander White Other _____

Ethnicity: Hispanic or Latino Yes No

What are the four most important repairs or modifications needed on your home?

Repair	Explanation

Repairing Homes. Revitalizing Communities. Rebuilding Lives.

Rebuilding Together of the Triangle does not discriminate on the basis of race, creed, color, ethnicity, national origin, religion, marital status, sex, sexual orientation, disabilities, or military status.



200 Trans Air Dr. #200
 Morrisville, NC 27560
 Office: 919.341.5980
 Fax: 919.651.0034
 www.rtriangle.org

Please list total monthly income including all members within the household.

Employment Income	\$	<p>You must also submit proof of income for all household members with your application. You may mark through social security or account numbers. Names and dates must be visible. Acceptable forms of proof of income can be any one of the following:</p> <ul style="list-style-type: none"> - Social Security statements - Social Security Disability statements - Copies of your 3 most recent months of bank statements. - Copies of your 3 most recent months of pay stubs - Copy of the most recent year's tax returns, W2 and/or 1099
Pension	\$	
Social Security	\$	
Disability	\$	
VA Benefits	\$	
Child Support	\$	
Other	\$	

Total Monthly \$ _____ Total Annually \$ _____

Total assets for all household members

Checking	\$
Savings	\$
Other	\$

Monthly utility costs

Water	\$
Electricity	\$
Gas	\$

Which company do you pay for electricity? (circle one)

Duke Energy Carolinas, Duke Energy Progress, Central Electric, Piedmont Electric, Randolph Electric, Wake Electric, Other _____

Please describe any other circumstances affecting your current living environment (health, disability, job loss, family hardship, etc.) _____

Where did you hear about Rebuilding Together? _____

Have you received assistance from other services or organizations to help you repair or maintain this home?

If yes, please list the organizations and help provided: _____

Repairing Homes. Revitalizing Communities. Rebuilding Lives.



200 Trans Air Dr. #200
Morrisville, NC 27560
Office: 919.341.5980
Fax: 919.651.0034
www.rtriangle.org

Homeowner Agreement:

(I/We) understand that Rebuilding Together of the Triangle (RTT) is funded by charitable donations and grants to provide assistance to low-income homeowners who have no other means to afford home repairs. By signing this statement, (I/We) guarantee that (I/We) are eligible to receive assistance.

Initial:

_____ (I/We)_____ attest that the above list of (my/our) total household income and assets is accurate and complete to the best of (my/our) knowledge.

_____ (I/We) authorize Rebuilding Together of the Triangle, Inc. to keep copies of financial documents provided by (me/us) for purposes of income and asset verification in determining eligibility for this program.

_____ All able-bodied family members/visitors will assist RTT volunteers and staff on repairs to a home.

_____ (I/We) own my property at the address listed in this application and this property is my/our full-time residence for at least 2 years.

_____ (I/We) have no present intention to move or offer my home for sale over the next three years.

_____ (I/We) certify that all information provided on this application is complete and correct.

_____ (I/We) understand (I/we) might be asked to provide more information depending on individual program requirements.

With permission, RTT may provide other programs with your contact information if we feel that a program may benefit you. This may include your name, address, phone number and annual income.

____ I am willing ____ I am not willing for Rebuilding Together of the Triangle to provide other agencies with my contact information.

Signature(s) _____ Date _____
_____ Date _____

Repairing Homes. Revitalizing Communities. Rebuilding Lives.