

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) | | | | | | |
|--|----------|----------|----------|----------|-----------------|----------|
| County | 1 person | 2 person | 3 person | 4 person | <u>5 person</u> | 6 person |
| Chatham | \$46,050 | \$52,600 | \$59,200 | \$65,750 | \$71,050 | \$76,300 |
| Durham | \$46,050 | \$52,600 | \$59,200 | \$65,750 | \$71,050 | \$76,300 |
| Orange | \$46,050 | \$52,600 | \$59,200 | \$65,750 | \$71,050 | \$76,300 |
| Wake | \$51,600 | \$58,950 | \$66,300 | \$73,650 | \$79,550 | \$85,450 |

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

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Homeowner Application

| Last Name: | | First Name: | | | Middle Initial: | | |
|---|---|-------------------|-----------|--------------|-------------------|------------------|--|
| Address: | | | | | | | |
| City: | State: | State: ZIP code: | | County: | | | |
| Number of years at this add | dress: | Pho | one Numb | oer: | | | |
| Email: | | Cel | · | | | | |
| Emergency contact or pe | rson to call if we | e can't reach yo | ou: | | | | |
| Name: | P | hone: | | Relat | ionship: | | |
| Provide information belo | w for everyone v | who lives in this | s home, i | includina vo | urself: | | |
| Name | Birthdate | Relationship | | Employed | Disabled (Y/N) | Veteran (Y/N) | |
| | 1 1 | Self | | | | | |
| | 1 1 | | | | | | |
| | 1 1 | | | | | | |
| | 1 1 | | | | | | |
| | 1 1 | | | | | | |
| , | ican American/Bl | | | America | | Asian | |
| اما E thnicity : Hispanic or Lati | tive Hawaiian/Pa no Yes □ | | White | e Oth | er | | |
| What are the four most in | nportant repairs | or modification | ns neede | d on your ho | ome? | | |
| Repair | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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

| Employment Income | \$ | | | | | | | |
|-------------------|----|---|--|--|--|--|--|--|
| Pension | \$ | 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: - Social Security statements for current year | | | | | | |
| Social Security | \$ | | | | | | | |
| Disability | \$ | | | | | | | |
| VA Benefits | \$ | - Social Security Disability statements for current year | | | | | | |
| Child Support | \$ | - Copy of the most recent year's tax returns, W2 and/or 1099 | | | | | | |
| Other | \$ | | | | | | | |

| Total Monthly | \$ Total Annually \$ | 5 |
|---------------|-------------------------|----------|
| | | |

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 | er circumstances affecting | your current living | environment (health | , disability, job loss |
| family hardship, etc.) | | | | |
| | | | | |
| | | | | |
| Where did you hear about | : Rebuilding Together? | | | |
| Have you received assista | ance from other services o | r organizations to h | nelp you repair or ma | intain this home? |
| If yes, please list the organ | nizations and help provide | d: | | |

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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: 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. (I/We) grants RTT permission to take still photographs and video recordings or utilize images available in the public domain of the house, property, and occupants. I/we consent and authorize RTT, its partners, and any other persons interested in RTT and its works, to use and reproduce the photographs/videos and to circulate and publicize the same through outlets such as newspapers, television media, brochures, pamphlets, instructional materials, books, social media, and other marketing materials. 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.

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Date

Signature(s) Date