

About Us:

Rebuilding Together Spokane is an all-volunteer registered non-profit organization that provides entirely free home repair services for low-income homeowners and non-profit facilities. We are part of the Rebuilding Together national affiliate network. Our work is made possible by volunteers and charitable donations.

Our Programs:

We accept applications year-round, but we only do one day of rebuilding on the National Rebuilding Day – the last Saturday in April. We are able to consider most minor to moderate repair requests, however, Rebuilding Together Spokane <u>does not offer</u> emergency repair services, roof replacements, foundation stabilization, and certain major plumbing (such as a new side sewer system) or major electrical (such as panel upgrades or whole house rewiring) work.

Basic Criteria:

To be considered for our programs, homeowners <u>must</u> meet the following criteria:

- □ You must live in our coverage area that spans the greater Spokane area
- \Box You must be the <u>legal property owner</u>
- □ You must <u>currently live in the home</u> and plan to remain living in the home for at least the next 3 years
- \Box You must be <u>low-income</u> and reasonably unable to complete the work on your own
- □ If you are a senior citizen (65+), person with a disability, and/or a family with children under 18, income limits for a household of the following sizes are:

1 person	2 people	3 people	4 people	5 people	6 people
\$21,950	\$25,050	\$28,200	\$31,300	\$33,850	\$36,350

Common Repairs:

- Wheelchair ramps and other accessibility improvements
- Installation of grab bars to improve safety
- Light plumbing and electrical work
- Flooring repair or replacement
- Painting, interior and exterior
- Limited or partial window repair or replacement
- Clutter removal
- Yard clean-up
- Minor general repairs

Excluded Repairs:

- Major roof work, including replacements
- Major plumbing or sewer line repair
- Major electrical work, including rewiring
- Foundation repairs and major structural repairs
- Cosmetic repairs or non-mission-focused improvements
- Emergency repairs



How to Apply:

Complete and submit the application, along with copies of the following documents:

- □ Income Verification—Acceptable verification includes your most recent tax return and benefits or other income statements (Ex. Social Security, disability, unemployment, pension, etc.)
- □ Insurance Verification—Cover page listing coverage amounts of homeowner's insurance policy

<u>Please mail your completed application and materials to:</u> **Rebuilding Together Spokane: P.O. Box 3910 Spokane WA, 99220**

We know that asking for help can be difficult, so it is our goal to make the application process as easy as possible. Here is a step by step guide to what you can expect as a homeowner applying for help through Rebuilding Together Spokane.

- 1. Download and print an application. If you would like an application mailed to you or need assistance filling it out, please contact our office at 509-789-3714. Leave a message and someone will return your call.
- 2. Fill out the application completely, including all pages and providing all supporting documents.
 - a. Your most recent tax return and/or benefit statements or other income verification.
 - b. A copy of your homeowner's insurance policy cover page.
- 3. Initial and sign the last page of the application and mail it to the P.O. Box listed above.
- 4. Once we receive your application, our staff will contact you in 1-2 weeks to set up a time to preview the repairs you are requesting.
- 5. After the initial site preview is completed, you will receive a letter notifying you whether you have been approved for our program.
- 6. If you are approved, we will begin finding the volunteer group(s) and funding to complete your project.
 - a. This process can take some time depending on the number and type of repairs that are requesting.

If you have questions about the application process or aren't sure of your application status, please call our office at <u>509-789-3714</u>. Leave a voicemail and someone will return your call.



THE APPLICATION PROCESS AND TIMELINE





Homeowner Contact Information				
First Name		Last Name		
Address		City, Zip Code		
Primary Phone		Email		
Alternate		Alternate Contact		
Contact Name		Phone Number		
Relationship To		How did you hear		
Applicant		about us?		

Homeowner Background and History				
Ethnicity (optional)		Date Of Birth		Age
Has anyone in the home served in the military?	□Yes □ No	Date of Service		Branch
Is anyone the spouse of a living or deceased veteran?	□Yes □ No	Dates of Service		Branch
Is anyone in the home currently disabled?	□Yes □ No	Who in the household?		
Please describe any disabilities and/or limitations				
Does anyone in the home have a caseworker?	\Box Yes \Box No	Caseworker name and phone		
Has anyone in the home been convicted of a crime? (Checking "Yes" <u>will not</u> negatively impact your application)	□Yes □No	If "Yes", please explain how the conviction has impacted your ability to maintain a steady income?		
Do you intend to live in your \Box Yes \Box No home the next 3 years?		If not, please explain.		
Have you ever applied to Rebuild Spokane?	□Yes □ No	When?		
Has our organization ever done v home?	□Yes □ No	When?		



Household Members

Please list <u>everyone</u> who lives in the house, including children, temporary residents, and renters.

Full Name	Relationship	Age

• Please attach additional sheets, as needed, in order to include all individuals who reside or stay in the home.

Household Income Information

We require a copy of all income statements: tax returns, benefits statements, rental income, etc.

Monthly	Monthly	Other Monthly	Annual
Wages/Salary	Benefits*	Income**	Income
\$	\$	\$	\$
\$	\$	\$	\$
\$	\$	\$	\$
	Wages/Salary \$ \$ \$	Wages/Salary Benefits* \$ \$ \$ \$	Wages/SalaryBenefits*Income**\$\$\$\$\$\$\$\$\$

*Benefits include pensions, Social Security, SSI/other disability benefits, unemployment, etc. **Please include any rental income within the last 12 months and any other sources of income.

Are there any special circumstances regarding income or expenses within your household? (ex: temporary or seasonal unemployment, healthcare expenses, etc. that we should be aware of?) Please explain below.

• Please attach additional sheet, as needed, in order to include all income earners.



Property Information						
We require a copy	We require a copy of your current homeowner's insurance policy face/cover sheet.					
Do you have current	\Box Yes \Box No	Year Built				
homeowner's insurance?						
Do you have a mortgage?	\Box Yes \Box No	Year Purchased				
If so, are you behind in any	\Box Yes \Box No	Purchase Price				
payments?						
What is your Monthly	\$	Do you receive any utility	\Box Yes \Box No			
Mortgage Payment?		assistance/reductions?				

Repairs and Assistance Needed We are not able to replace roofs, re-pipe or do major sewer repairs, fix foundations, or rewire houses.				
Area to be addressed:	Brief description of the work needed			
Gutters/Soffits				
Exterior Siding				
Porch/Steps/Ramp/Grab				
Bars/Handrails/Other Accessibility Issues				
Windows/Doors				
Walls/Ceilings				
Flooring				
Electrical				
Plumbing				
Clutter Removal/Cleaning/Yard Work				
Painting				
(Interior and/or Exterior)				
Weatherization				
Other Repair Needs				



Homeowner Disclo	sure Agreement	
Directions: Please <u>initial</u> (on the lines provided) all s required to complete your application. Please call our Leave a message and someo	office at 509-789-3714 if you have any questions.	
My signature below indicates that all the above inf	ormation provided are accurate and complete.	
I have read the application instructions and underst	and the application process	
I understand that Rebuilding Together Spokane (R	TS) is a free service to homeowners in need and I	
certify that I do <u>not</u> have the financial means to pay	y for the repairs for which I am applying.	
I understand that if RTS accepts my application it	does not guarantee that all the requested work will	
be done because the services are subject to availab	le funding and volunteers.	
I understand that I may be asked to provide addition	nal documentation. I authorize RTS to verify any	
information, including conducting a personal or cr	minal background check, for any applicant or other	
adult living in the home.		
I understand that RTS retains the right to decline n	by application or end their services in the event that	
any illegal activities at my residence are detected of	r suspected.	
I certify that any alcohol, drugs, and firearms or we	eapons are securely put away and will remain so	
during any visits or work performed by RTS repres	sentatives and/or volunteers.	
I give permission for trusted RTS representatives to inspect my home for purposes of selection and/or		
repair, and look at all rooms/spaces in my home. I also give permission to trusted RTS volunteers to		
complete the work at my home, if my home is sele	cted.	
I give permission for trusted RTS representatives to take and use photos of me, my family, my home		
and repair needs.		
Applicant's Signature	Date	
If this form has been prepared by someone other that	n the homeowner, please complete the following:	
Name of Preparer: R	elationship to homeowner:	
Agency/Employer: P	hone number:	