



HOMEOWNER APPLICATION

448 Tolland Street
Manchester, CT 06042
Ph. (860) 647-3167
<http://rebuildingtogether1.townofmanchester.org>

About Us

Rebuilding Together Manchester is a registered nonprofit organization that assists low-income Manchester homeowners, specifically the elderly, disabled, and families with children, with critical home maintenance and repairs that they are unable to manage on their own due to physical and/or financial limitations. RTM's goal is to ensure these homeowners continue to live in comfort, warmth and safety in their own homes.

Our Programs

We operate our services year-round through programs that match individual volunteers, small teams, or large groups to address as many repairs and home improvements as we have the technical expertise and financial resources to complete. We are able to consider most repair requests, however, Rebuilding Together Manchester does not offer emergency repair services, 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 must meet the following criteria:

- ✓ You must be the legal property owner and the home must be located in Manchester
- ✓ You must currently live in the home and plan to remain living in the home for at least the next 3 years
- ✓ You must be low-income and reasonably unable to complete the work on your own

Required Documents: Please attach copies of the following verification documents to your application.

- ✓ Income Verification—Acceptable verification includes your most recent tax return and copies of benefits or other income statements (Ex. Social Security, pay stubs, unemployment, pension, etc.)
- ✓ Asset Verification—Acceptable verification includes balances of checking and savings accounts, annuity amounts, and proof of other real estate if applicable. (Ex. Bank statements, annuity documents, deeds, etc.)

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

Please mail your completed application and materials to:

Rebuilding Together Manchester, 448 Tolland Street, Manchester, CT 06042

Application Submission and Processing

- Once your application is received, we will review it to ensure you meet our basic criteria for service.
- We will contact you if we have any questions or require additional documentation.
- Please note: incomplete applications, including missing supporting documentation **will** delay processing.



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HOMEOWNER CONTACT INFORMATION
 (PLEASE NOTE MULTIPLE HOMEOWNERS IN HOUSEHOLD MEMBER SECTION BELOW)

MISSION: Together we transform the lives of low-income Manchester homeowners by improving the safety and health of their homes and revitalizing our community.

First Name		Last Name	
Address		City, Zip	
Primary Phone		Secondary Phone	
Email Address		How did you hear about us?	
Alternate Contact Name/Relationship		Alternate Contact Phone	

HOMEOWNER BACKGROUND AND HISTORY

Name		Date of Birth		Age	
Has anyone in the home served in the military?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Dates of Service		Branch
Is anyone in the home disabled?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Who in the household?		
Please describe any disabilities or limitations					
Do you intend to live in your home the next 3 years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	If not, please explain		
Have you ever applied to Rebuilding Together Manchester or <i>Christmas in April</i> (our former name)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	When?		
Has our organization ever done work on your home?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	When?		

HOUSEHOLD MEMBERS
 (PLEASE NOTE ANY ADDITIONAL HOMEOWNERS)

Please list everyone who lives in the house, including children, temporary residents, and renters

Name	Relationship	Age

♦ Please continue on additional sheet, as needed, in order to include all individuals who reside or stay in the home



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HOUSEHOLD INCOME INFORMATION

We require a copy of all income and assets: tax returns, benefits letters, bank statements, etc.

Name	Monthly Wages/Salary	Monthly Benefits*	Other Monthly Income**	Annual 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

Please list total balances of all accounts:	Checking	\$	Savings	\$
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Please list any other assets (real estate, etc.):

Are there any special circumstances regarding income or expenses within your household? e.g. temporary or seasonal employment, healthcare expenses, etc. that we should be aware of? Please explain below.

♦ Please attach additional sheets, as needed, in order to include all income earners

PROPERTY INFORMATION

Do you have current homeowner's insurance?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Year Home was Purchased	
Do you have a mortgage?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Monthly Mortgage Payment	
Are you behind on any mortgage, tax, or water payments?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Do you receive any utility assistance/reductions?	<input type="checkbox"/> YES <input type="checkbox"/> NO
What type of heating system does the home have? (gas, electric, oil)			

REPAIRS AND ASSISTANCE NEEDED

Many non-structural repairs can be considered based on available resources.

Please provide a brief description of the work needed including: <ul style="list-style-type: none"> • interior and exterior repairs • plumbing and electrical issues • safety improvements • security improvements including doors, windows, and locks • accessibility alterations including handrails and grab bars • yardwork • clutter removal • painting 	
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HOMEOWNER RELEASE AND AGREEMENT

Directions: Please **read and initial every line** next to all statements below. Your signature and date is required on the last page, to complete your application. **Please call our office if you have any questions about the program or this form.**

_____ I understand that Rebuilding Together Manchester (RTM) programs are a free service to homeowners in (initial) need and I certify that I do not have the financial means to pay for the repairs for which I am applying.

_____ I understand that acceptance into RTM programs is not guaranteed and subject to available funding and volunteers. Additionally, RTM cannot guarantee that all the requested work will be done.

_____ I understand that I may be asked to provide additional documentation. I authorize RTM to verify any information, including conducting a personal or criminal background check, for any applicant or other adult living in the home.

_____ I understand that RTM retains the right to decline my application or end the project at any point during the program process. I understand that my application may be terminated due to misrepresentation of facts at any point in the process, detection or suspicion of illegal activities at my residence, or failure to meet the requirements of the program at the time of application.

_____ I understand that any able-bodied member of my household age 12 and up will be expected to assist volunteers to the best of their ability during the project workday.

_____ I certify that any alcohol, drugs, and firearms or weapons are securely put away and will remain so during any visits or work performed by RTM representatives or volunteers.

_____ I understand that the goal of RTM is to provide quality work that is completed within a reasonable amount of time; however, services rendered are not guaranteed or warranted. In addition, I understand that RTM is only responsible to complete the repair intended, and is not required to address any unforeseen issues, unless damage is caused by blatant negligence of a RTM representative.

_____ I understand that it is my responsibility to secure any valuable or breakable items in my home, prior to volunteers visiting my home to perform repairs. If I choose not to secure my belongings, I cannot hold RTM responsible for any loss.

_____ I give permission for trusted RTM representatives to inspect my home for purposes of selection and/or repair, and look at all rooms/spaces in my home. If my home is selected, I also give permission to trusted RTM volunteers to complete the work at my home. I also understand that I, or my personally appointed representative, am required to stay on the premises while volunteers are working at my home.



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_____ I acknowledge that I have voluntarily applied to the Rebuilding Together Manchester, Inc.'s ("RTM") program in which primarily volunteers rehabilitate the homes of disadvantaged Manchester homeowners. I understand that, if selected, I will not be paid for any services provided. I also understand that I will not be covered by any health, medical, disability or liability insurance coverage provided by the Rebuilding Together network.

_____ In consideration of the opportunity afforded me, I hereby agree that I, my assignees, heirs, guardians, and legal or temporarily assigned representatives, will not make a claim against RTM, or any of its affiliated organizations, or either of their officers or directors collectively or individually, or the supplier of any materials or equipment that is used by the Program, or any of the volunteer workers, for the injury or death to me or damage to my property, however caused, arising from my participation in the Program. Without limiting the generality of the foregoing, I hereby waive, release and forever discharge any rights, actions, or causes of action resulting from personal injury or death to me, or damage to my property, sustained in connection with my relationship with Rebuilding Together Manchester.

_____ I hereby release and forever discharge Rebuilding Together Manchester, Inc. from any claim whatsoever which arises or may arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's activities with Rebuilding.

_____ I consent to unrestricted use by RTM and authorized persons of any photographs, interviews, audio, or video recordings of my home and household in connection with the project if my home is selected. I grant RTM all rights, title, and interest in any and all said interviews, photographs and recordings, including publication, royalties, or other benefits derived from such recordings.

_____ Reporters and/or photographers may come to my property during the time that RTM volunteers are working on my home to take photographs and/or interview volunteers and/or members of my household.
*Other options of this clause are available upon homeowner request.

My signature below indicates that all information provided in this entire application is accurate and complete, to the best of my knowledge. I understand that if there is a change in my noted residence, the ownership of my home, an increase in the number of my household members and/or in household income reported in this application, prior to receiving services, I must notify the RTM office immediately: failure to notify may result in an obligation to reimburse RTM for services rendered, at the RTM estimated value. I have read the application instructions and understand the application process. I understand all clauses in the disclosure above.

Applicant's/Homeowner's Signature

Date

Co-Applicant's/Homeowner's Signature if applicable

Date

NOTES: _____