

*due December 31*



*Dear Homeowner:*

This is your application for Rebuilding Together-Duneland's Annual Work Day. Every year, volunteers from the community come together to help individuals and families maintain a safe, healthy and independent life. Every year we have received record-breaking donations, volunteers and gifts-in-kind which enable us to help many homeowners, **at no cost to them**. On the last Saturday in April, we plan to work again and with continued support from the community, we are hopeful to have an increased number of projects to complete.

While April seems far away, to adequately plan for supplies and assign volunteers to this large number of houses, we need several months to carefully prepare for our one-day blitz.

Our eligibility criteria includes the requirements that the applicant live in the Duneland School District, own their own home, have a household income of 80% of median or less, have no outstanding real estate taxes, are unable to do the work themselves, and are willing to cooperate and work with us. The home to be repaired must be owner-occupied. No doubles are considered. Rebuilding Together previews the houses, selects those best serving our commitment to homeowner safety, warmth and dignity, and carefully devises a scope of work for each house. A House Captain is assigned to each home to guide a crew of volunteers from 8:00 a.m. to 5:00 p.m. on Rebuilding Day.

Some volunteers are skilled trades people, but many are unskilled. **All able-bodied homeowners and family members are required to join in the work**. Selected homeowners are also required to attend a homeowner orientation in early April.

The **deadline for applications is December 31**. We will begin previewing houses in November. By early February, projects will be selected by the Board of Directors and all applicants will be notified. Every year we receive many applications. Please realize that we accept as many houses as we can, but we cannot assist all. **Please complete both sides of the application fully, incomplete applications will not be considered.**

Thank you for your interest in our program. If you have any questions, please feel free to give us a call at 219.926.3233.

*Sincerely,*

*RT-Duneland President*

*In order to uphold the mission of Rebuilding Together, preference is given to homeowners who are **low-income, elderly and/or disabled and/or have young children** living in the home, and who have **lived in their homes for many years as vital members of our community.***

# Application due December 31

Make sure to complete **both** sides

## Homeowner Information

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Number of years homeowner has lived in home \_\_\_\_\_ Home Phone \_\_\_\_\_

### HOMEOWNER 1

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN# \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Sex:  Male  Female Marital Status:  Single  Married

Currently Employed:  Yes  No  Retired  Disabled-nature of disability \_\_\_\_\_

Name of Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Number of years with employer \_\_\_\_\_

### HOMEOWNER 2

Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN# \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Sex:  Male  Female Marital Status:  Single  Married

Currently Employed:  Yes  No  Retired  Disabled-nature of disability \_\_\_\_\_

Name of Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Number of years with employer \_\_\_\_\_

Relationship of Homeowners  Spouses  Parent-child  Other \_\_\_\_\_

Are property taxes current?  Yes  No - Amount Owed \$ \_\_\_\_\_

Number of people living in home: \_\_\_\_\_ Adults \_\_\_\_\_ Children - ages \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Number of adults employed or receiving income \_\_\_\_\_

Do you have home owners insurance?  No  Yes-Company \_\_\_\_\_

Do you own other property?  No  Yes-Use of property \_\_\_\_\_

Other Assets: Bank Accounts:  No  Yes-Amount \$ \_\_\_\_\_ Stocks:  No  Yes-Amount \$ \_\_\_\_\_

Bonds:  No  Yes-Amount \$ \_\_\_\_\_ Annuities:  No  Yes-Amount \$ \_\_\_\_\_

### FINANCIAL REFERRAL (Someone we can verify above information with)

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

## Property Information

Owner Occupied?  No  Yes (**Doubles, rentals and land contract properties will not be considered.**)

Owned home for how long? \_\_\_\_\_ Property taxes current?  Yes  No-Amount \$ \_\_\_\_\_

Purchase amount of property \$ \_\_\_\_\_ Balance Owed \$ \_\_\_\_\_

Nature of problems to be repaired:  Electrical  Exterior painting  Interior painting  Plumbing

Wall repairs  Roof repairs  Yard work  Floor repairs  Door repair  Other-specify below \_\_\_\_\_

Were you referred by a person or organization?  No  Yes-Name \_\_\_\_\_

Have you received help from Rebuilding Together (Christmas in-April) before?  No  Yes-When \_\_\_\_\_

**Monthly Income Information**

Include ANY income from all persons living in home

**Monthly Expense Information**

List all monthly household expenses

Salary \$ \_\_\_\_\_  
 Social Security/Disability \$ \_\_\_\_\_  
 Child Support/Alimony \$ \_\_\_\_\_  
 Rental Income \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
**Total Monthly Income \$ \_\_\_\_\_**

Mortgage Payment \$ \_\_\_\_\_  
 Property Taxes and Insurance \$ \_\_\_\_\_  
 Pension/Retirement \$ \_\_\_\_\_  
 Health Insurance \$ \_\_\_\_\_  
 Uninsured Medical Expenses \$ \_\_\_\_\_  
 Gas & Electric \$ \_\_\_\_\_  
 Water Bill \$ \_\_\_\_\_  
 Telephone \$ \_\_\_\_\_  
 Cellular Phone \$ \_\_\_\_\_  
 Cable TV/Satellite TV \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Total of Loans and Creditors \$ \_\_\_\_\_

**Total Monthly Expenses \$ \_\_\_\_\_**

**!! Warning !!**

It is a Federal crime punishable by fine and/or imprisonment, to knowingly make false statements concerning any of the above (monthly income and monthly expenses) facts as applicable under the provisions of Title 18, US Code, Section 1014.

*Loans and Creditors*

Company Name and Address	Loan Amount	Monthly Payment	Balance	Delinquent account? Explain

*Applicant's Statement*

I certify that the above statements are true, accurate and complete to the best of my knowledge. This application shall remain the property of Rebuilding Together-Duneland, to which it is submitted for the purpose of obtaining assistance.

I hereby consent to and authorize Rebuilding Together-Duneland, after giving reasonable notice, to enter the property for the purpose of determining the need and scope of the repair(s) specified.

I authorize the disclosure of the above information to only those persons or agencies as necessary to secure the assistance for which this application is submitted.

\_\_\_\_\_  
Home Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Home Owner Signature

\_\_\_\_\_  
Date

**IMPORTANT - READ CAREFULLY BEFORE SIGNING AND SUBMITTING**  
 You will need to include last year's tax forms, a pay stub from this year and/or other verification of income.

# Homeowner Application



**Application Deadline is December 31**

P.O. Box 644 • Chesterton, Indiana 46304 • 219.926.3233 • [www.rtduneland.org](http://www.rtduneland.org)