



P. O. Box 4731  
Montgomery, Alabama 36103-4731  
334-625-9062  
info@rtbama.org  
www.rtbama.org

Dear Homeowner,

Rebuilding Together Central Alabama (RTCA) is a charitable nonprofit organization that has worked in Montgomery, Elmore and Autauga counties since 1993 to provide critical home repairs and modifications at no charge to homeowners in need—primarily seniors, those with disabilities, veterans and families with young children. Our mission is to enable homeowners to continue living in their homes in warmth and safety. This work is performed at the convenience and expense of volunteers, most of whom are not tradesmen.

We invite you to submit an application if you meet our eligibility requirements:

- You have owned and occupied your home for a minimum of five years (**no rentals or manufactured/mobile homes**).
- Your home is located within Montgomery, Autauga, or Elmore county.
- The total household income (for all residents living in the home) does not exceed the following (HUD Low Income) guidelines.

1 person	2 people	3 people	4 people	5 people	6 people
\$33,250	\$38,000	\$42,750	\$47,500	\$51,300	\$55,100

Applications may also be completed online at [www.rtbama.org](http://www.rtbama.org). If you choose to complete an online application, you are still responsible for mailing proofs of income and home ownership to our office for your application to be considered.

When submitting your application, please include (copies only) proof of income as either your most recent income tax return, a recent pay stub, an official document from the Social Security Administration. We will mail a card to you to confirm that we have received your application. Our staff may call you or visit your home to gather more information to determine whether RTCA can assist you. Homes will be selected by February 1. Work by volunteer groups is performed during the spring and summer. Our ability to help homeowners is dependent upon the skills of our volunteers and our financial resources. There is no guarantee that your home will be selected or, if selected, that RTCA will have volunteers or resources to perform the work. We will make every effort to assist you. Homeowners submitting applications for work on homes that are not selected are encouraged to apply the following October, November or December.

**Submitting an application does not guarantee that services will be provided but we will make every effort to assist you.**

If you have any questions about this process, please call us at 334-625-9062.

Dee Moody  
Executive Director



If you have any questions, please call 334-625-9062
Mail this application to:
RTCA, P. O. Box 4731, Montgomery, AL 36103-4731

First name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last name: \_\_\_\_\_
Mailing Address \_\_\_\_\_
Mailing Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Physical Address (if different) \_\_\_\_\_
Physical Address (if different) \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ ext. \_\_\_\_\_
Cell phone \_\_\_\_\_ E-mail address \_\_\_\_\_
County: \_\_\_\_\_ Montgomery, \_\_\_\_\_ Autauga, \_\_\_\_\_ Elmore
Ethnicity \_\_\_\_\_ Gender: M F Date of Birth \_\_\_\_\_

If you are NOT the homeowner filling out this application, enter your information here. Otherwise, enter emergency contact information.

Name \_\_\_\_\_ Relationship to homeowner \_\_\_\_\_
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_
Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Today's Date \_\_\_\_\_

General areas needing critical help: (check all that apply)

- \_\_\_ ADA \_\_\_ Appliances \_\_\_ Carpentry \_\_\_ Concrete \_\_\_ Doors \_\_\_ Electrical \_\_\_ Energy \_\_\_ Exterior paint
\_\_\_ Flooring \_\_\_ Furnace \_\_\_ Grab bars/Handrails \_\_\_ Gutters \_\_\_ Hot water heater \_\_\_ Locks \_\_\_ Other
\_\_\_ Plumbing \_\_\_ Roof \_\_\_ Ramp \_\_\_ Safety \_\_\_ Stairway/Porch \_\_\_ Trash Removal \_\_\_ Tub/Tile
\_\_\_ Wall Repair/Paint \_\_\_ Windows \_\_\_ Yard work

Comments:

Year house built \_\_\_\_\_ Previous Recipient Y N If yes, Year \_\_\_\_\_ Best time to call \_\_\_\_\_
Other Contact name \_\_\_\_\_ Relationship \_\_\_\_\_
Other contact phone \_\_\_\_\_ Other contact email \_\_\_\_\_
How did you hear about RTCA \_\_\_\_\_
Age \_\_\_\_\_ Employed Y N Is the Head of Household a Grandparent? Y N
Disabilities Y N
Please indicate any special needs \_\_\_\_\_
Household monthly gross income \_\_\_\_\_ Annual Income \_\_\_\_\_
Monthly mortgage payment \_\_\_\_\_ Head of Household? Y N
Assistance received: \_\_\_ SSI \_\_\_ SSDI \_\_\_ Food Stamps \_\_\_ VA Benefits \_\_\_ TANF
\_\_\_ Medicare \_\_\_ Medicaid \_\_\_ Home and Community based services
Caseworker name \_\_\_\_\_ Caseworker phone \_\_\_\_\_
Other Governmental Assistance: \_\_\_\_\_
Ckg/Savings Account balance \_\_\_\_\_ IRA,401(k) or similar acct. balance \_\_\_\_\_
CD balance \_\_\_\_\_ Stock/bond value \_\_\_\_\_
Own other property (besides home you live in? Y N Receive rent on other property? Y N

Number of residents living in household (including head of household) \_\_\_\_\_

Name	Relation	Age	Employed	Disabled	Gender	Ethnicity	Veteran

Residents Pay Rent? Y N If yes, how much? \_\_\_\_\_ Any Residents have disabilities? Y N

Please indicate any special needs: \_\_\_\_\_

You or any other residents been convicted of a felony? Y N

If yes, explain \_\_\_\_\_

Number of pets \_\_\_\_\_ What kind? \_\_\_\_\_

Do you own your home? Y N Years in home \_\_\_\_\_ Plan to sell your home in the next year? Y N

Homeowner's Insurance Y N If no, please explain. If yes, include insurance company & policy number: \_\_\_\_\_

Number of bedrooms \_\_\_\_\_ Number of bathrooms \_\_\_\_\_ Number of living rooms \_\_\_\_\_

Number of Other rooms \_\_\_\_\_ Tax or other liens on home? Y N

Current taxes paid? Y N Recent repairs/modifications \_\_\_\_\_

If selected, how will these repairs/modifications be important to you or help you or your care giver? \_\_\_\_\_

Personal caregiver? Y N Tell us something about yourself \_\_\_\_\_

Any family members help with repairs? Y N If no, why not? \_\_\_\_\_

In and out of shower with ease? Y N Get to bathroom easily? Y N

On and off toilet with ease? Y N Veteran Y N Single/widowed? Y N

Home type: \_\_\_\_\_ One story \_\_\_\_\_ Two story \_\_\_\_\_ Mobile/manufactured

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

**IMPORTANT – READ CAREFULLY BEFORE SIGNING** Applicant's Statement:

I certify that **I do not** have the financial means (savings, investments, etc.) to perform the repairs for which I am applying. I certify that the above statements are true, accurate, and complete to the best of my knowledge and belief. This application shall remain the property of Rebuilding Together Central Alabama, to which it is submitted for the purpose of obtaining assistance. I hereby consent to and authorize Rebuilding Together Central Alabama, after giving reasonable notice, to enter the property for the purpose of determining the need and scope of the repair(s) specified above. 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.

\_\_\_\_\_  
Homeowner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Homeowner PRINTED NAME

\_\_\_\_\_  
Date

# HOMEOWNER AGREEMENT

## REBUILDING TOGETHER CENTRAL ALABAMA

In the event that my application is accepted, approved, and selected by Rebuilding Together:  
**INITIAL EACH PART OF THIS AGREEMENT TO AFFIRM YOUR ACCEPTANCE.**

\_\_\_\_\_ I give permission for Rebuilding Together Central Alabama, its volunteers and/or participating trades workers to perform repairs on my home located at (enter your address):

\_\_\_\_\_.

\_\_\_\_\_ I understand that Rebuilding Together Central Alabama is a volunteer initiative and that promises cannot be made as to the quality of and the specific work that will be done.

\_\_\_\_\_ I understand that the general plan for the repair(s) will be explained to me. I further give Rebuilding Together Central Alabama, its volunteers and participating trade workers full authority to determine the extent of the repair(s) to be performed even if they should fail to notify me of any change from the original plan.

\_\_\_\_\_ I understand that modifications(s) will be performed free of charge by volunteers and/or participating trades workers, and Rebuilding Together Central Alabama, its volunteers and participating trades workers disclaim all warranties, expressed or implied concerning the repair(s).

\_\_\_\_\_ I agree that I will cooperate with the Program Director, Project Manager and repair team.

\_\_\_\_\_ In consideration of the modification(s), I further hold Rebuilding Together Central Alabama, its officers, directors, employees, agents, donors, volunteers, participating trades workers and other affiliates, collectively and individually, harmless from any claims and liabilities arising at any time as a result of the repairs, including, without limitation, any rights or causes of action resulting from personal injury or death, or damage to my property, directly or indirectly arising from any improperly performed modifications(s) or defects in material or workmanship.

\_\_\_\_\_ I also grant Rebuilding Together Central Alabama permission to take or have taken, still and moving photographs and films, including television pictures of my home. I consent and authorize Rebuilding Together Central Alabama, its advertising agencies, news media and other persons interested in Rebuilding Together Central Alabama and its works, to use and reproduce the photographs, films and pictures and to circulate and publicize the same by all means including, without limiting the generality of the foregoing, newspapers, television media, brochures, pamphlets, instructional materials, books and clinical material.

\_\_\_\_\_ No inducements or promises have been made to me to secure my signature to this release other than the intention of Rebuilding Together Central Alabama to perform the repairs and improvements and to use such photographs, films and pictures for the primary purpose of promoting and aiding its program and its works. **If you have any question, call our office at 334-625-9062.**

Signed this \_\_\_\_\_ of \_\_\_\_\_, 2016

\_\_\_\_\_  
HOMEOWNER 1 *Print Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
HOMEOWNER 2 *Print Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
WITNESS *Print Name*

\_\_\_\_\_  
*Signature*