

Homeowner Application

Dear Homeowner: This application is for work that may be done during the 2025-2027 years, when volunteers will work to provide improvements to homes of qualifying residents who are unable to do the work themselves. Rebuilding Together is a non-profit organization supported entirely through financial contributions from the community and the support of volunteers.

Home safety is the first priority of Rebuilding Together. If your home is selected, volunteers will provide improvements that enhance the safety of your home. Because it is a one-day project, major structural repairs are not possible. Please understand that time may prevent the volunteers from accomplishing everything that you would like to have done.

Eligibility Guidelines

You are a low-income homeowner; either over the age of 60; an individual of any age with physical disabilities; a family with children; a veteran.

- You have lived in your home for over three years and your name is on the deed of the property. ٠
- You are current with taxes and there are no liens or judgments against the property.
- You qualify under Federal guidelines as low-income and have exhausted your financial means. •
- You make your home available to Rebuilding Together volunteers to determine eligibility, work scope and materials needed.

Homeowner(s) name (please print)		
Address		
Home Phone	Work Phone	Cell
Date of Birth of Homeov	vner(s):	
Name of Mobile Home I	Park	
Mobile Home Park Man	ager and phone number	
How did you hear about	Rebuilding Together:	
Name other agencies th	at have helped you with home re	pair services in the past two years:
Physical Disabilities? Y	es No If yes, please e	explain
01/2025	www.rtah.ora	-Over-

Have you or your spouse served in the military?	Yes	No	Branch
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Utility Information			
Gas Company:	Electric Company:	Oil	
Company:	Water Company:		

List all residents and income, if any:

Name	Age	Relationship	Monthly Income

Total Household Monthly Income: _____ Total Number of persons living in home: _____

List the three repairs you consider most important:

1.	
2.	
3.	

Note: Due to the high volume of applications received, selection of participants is limited. Submission of an application does not guarantee approval, participation or completion of all requests. Major structural, environmental and foundation problems will not be considered.

Please provide copies of the following supporting documents for each person living at this address, as applicable:

- Most recent federal tax return
- Latest paycheck stub
- Latest Social Security and/or pension benefit statement
- "Certificate of Title for a Vehicle" for your mobile home (if applicable)

I certify that the above information is true and correct to the best of my knowledge. I authorize RTGH to verify income and assets as necessary to process this application. I understand that any information provided to RTGH will remain confidential and will only be used to determine my eligibility for RTGH's services.

□ By checking this box, I am giving RTGH permission to release my information to other agencies in the event that they may also be able to serve me.

Homeowner Signature	Date
Question	ns: 717-232-2557
PLEASE SEND COMPLETED AF	PPLICATION WITH ATTACHMENTS TO:
Su	le Gebhart
Rebuil	ding Together
251 V	erbeke Street
Harrisb	ourg, PA 17102