



HOMEOWNER APPLICATION

MUST RETURN WITH PROOF OF INCOME

Required proof of income documentation is included in this document on page 6.

PLEASE READ BEFORE COMPLETING THE APPLICATION

Rebuilding Together, Platte Valley East is a nonprofit agency that utilizes resources and funding from private individual and foundation donors and does not receive city, state, or federal funding. Rebuilding Together is engaged in making critical home repairs, as well as health and safety repairs and modifications to the homes of clients who can meet our income requirements. The purpose of these repairs and modifications is to allow homeowners to remain safely in their homes.

Please review the following program guidelines prior to completing the application process. Contact our main office if you would like to discuss any questions that you may have at 402 – 727 - 7047, or by email at info@rebuildingtogetherpve.org.

- Applicants must both own and reside in the home for which they are applying for assistance. Applications may be submitted by Power of Attorney if proper documentation is provided, however, the homeowner must be residing in the home to receive assistance.
- Rebuilding Together DOES NOT improve rental properties.
- Rebuilding Together DOES NOT improve homes intended for sale.
- Applicants *should* have purchased their home a minimum of 1 year prior to applying for assistance. Please contact us if this is not the case.
- Applicants *should* have maintained homeowner’s insurance for a minimum of 1 year prior to applying for assistance. Please contact us if this is not the case.
- Applicants must not have any judgments or liens, other than a mortgage, on the property for which they are applying for assistance.
- Applicants must be current with property tax payments for 1 year prior to application.
- Rebuilding Together DOES NOT *generally* aid with mobile homes. Please contact us to discuss your needs before completing the application process.
- Applicants must include income information from ALL persons listed on the home’s title and *ALL* other wage-earners residing permanently in the home who are 18+.

Homeowner #1 Signature _____ Date _____

Homeowner #2 Signature _____ Date _____

APPLICANT INFORMATION:

Today's Date: _____

Applicant Name: _____ Date of Birth: _____

Address: _____ City: _____, NE Zip: _____

Primary Phone: _____ 2nd Phone: _____

Email Address: _____

Marital Status: Married Single Separated Divorced Widowed/er

How did you hear about Rebuilding Together? _____

Emergency Contact Name: _____ Phone: _____



The following information is requested by the Federal Government to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to provide this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race, ethnicity, and sex of applicants based on visual observation or surname.

Ethnicity:

Hispanic/Latino; Not Hispanic or Latino.

Race:

American Indian or Alaskan Native; Asian; Black or African American;

Native Hawaiian or Other Pacific Islander; White.

Sex:

Female; Male.

I do not wish to provide this information.

MORE INFORMATION

Are you a veteran? Yes No Branch: _____ Years: _____

Spouse of a veteran? Yes No Branch: _____ Years: _____

Are you or anyone permanently residing in your home legally disabled? Yes No

Do you have a caseworker? Yes No Agency _____

Name _____ Phone or Email _____

*Please list medical conditions and/or disabilities for yourself as well as any other permanent resident in the home below: *(Please indicate if any person uses a cane, walker, wheelchair, or any other mobility device.)*

Please list all OTHER OCCUPANTS who reside in your home. Include all family members who reside in the home even if it is not full-time:

Name	Gender	Birth	Relationship	Ethnicity

HOME INFORMATION

* Is your home (check all that apply)

- 1 Story 2 Story Single Family Multi-Family Manufactured Home
- Mobile Home Condominium

* How many bedrooms? _____

* Do you own, or are you purchasing your home? I own; I am buying.

* Have you owned your home for more than 1 year? Yes No

* In whose name(s) is the home titled? _____

* Do you currently reside permanently in the home? Yes No

* Barring unforeseen circumstances, do you plan to stay in your home for more than 3 years? Yes No

* Are you current with your property taxes? Yes No

* Are you current with your mortgage payments? Yes No

* Are there any judgments or liens against your property? Yes No

If yes, explain why _____

*Have you had homeowner’s insurance for at least 1 year? Yes No

If no, please explain _____

Briefly describe the repairs and/or modifications for which you are applying:

INCOME / ASSETS:

Please read carefully and return ALL necessary income verification documentation with this application.

Missing information will delay the application process. Please contact us with any questions.

- You must include all forms of regular income for all wagger-earners age 18 and over that reside in your home.
- Anyone 18 and older residing permanently in the home that DOES NOT earn income must sign a Zero Income Certification Form.
- Income limits for our program are based on the current United States Department of Agriculture (USDA) Area Median Income (AMI) for your county. Limits are based on the availability of current grant funds and their requirements. We can only determine eligibility after we have received **ALL** income verification documentation. Please contact us if you have questions regarding verification documents as incorrect information hinders the processing of your application.

Type of Income	Applicant	Spouse or 2nd occupant	Total (RT Use)
SSI			
SSD (disability)			
Salaries / Wages			
Alimony			
Child Support			
Investment Income			
Other Income			

Please list all income and type, using the list below, for ALL other adults (18+) living in the home. List each type of income separately.

Use another sheet of paper if you require additional space.

Name	Type of income	Amount

Do you or any permanent resident of your home:

* Own multiple houses or property for personal use or rental? Yes No

* Own any stocks or bonds? Yes No

* Have more than \$20,000 in any type of savings? Yes No

If you answer yes to any of the questions before, please explain below:

Please list any other sources of income or assets not listed above:

Before we begin any work on your home, please take a few minutes to complete our homeowner survey regarding your current housing situation and to explain how Rebuilding Together can work with you to make it better. This information will help us more clearly understand your needs and expectations and to assess the effectiveness of our work.

1. Please briefly describe the problem area(s) of your home that you feel need to be addressed by Rebuilding Together:

2. Do you feel that any of these problem areas are affecting your health or the health of others living in your home? Yes No If yes, please describe:

3. Do you feel that any of these problem areas are affecting your safety or the safety of others living in your home? Yes No If yes, please describe:

4. Do you feel that any of these problem areas are making it difficult for you to continue living in your home? Are you concerned that you will have to move if they are not addressed? Yes No If yes, please describe:

AUTHORIZATION AND RELEASE STATEMENTS

The undersigned applicant(s) (“Applicant”) declares that he/she has read and understands Rebuilding Together, Platte Valley East’s Homeowner Application (“Application”) and that the information that he/she has provided in the Application is true and correct to the best of his/her knowledge. The Applicant acknowledges and agrees that any information provided in the Application that is false, inaccurate, or misleading will void the application entirely and disqualify the applicant from Rebuilding Together, Platte Valley East’s Application selection process. Further, the Applicant agrees and authorizes Rebuilding Together, Platte Valley East, as well as its agents, employees, and representatives, to (a) distribute, share, and use any and all information that the Applicant provides in the Application to verify and/or confirm the truth of such information, (b) to assist and/or enable Rebuilding Together, Platte Valley East to evaluate whether to approve or select the Applicant’s Application and (c) to distribute and share any and all information that the Applicant provides with other community service organizations whose service may benefit the homeowner. The original copy of this application may be retained even if the application is not approved.

I understand that by filing this application, I am authorizing Rebuilding Together, Platte Valley East to evaluate my actual need for the repair program.

I understand that the evaluation may include home visits, employment verification, and title search.

* All persons listed on the title must sign this application unless deceased.

<input checked="" type="checkbox"/> _____	<input checked="" type="checkbox"/> _____	<input checked="" type="checkbox"/> _____	<input checked="" type="checkbox"/> _____
Applicant Signature	Date	Co-Applicant Signature	Date

<input checked="" type="checkbox"/> _____	<input checked="" type="checkbox"/> _____
Printed name of Applicant	Printed Name of Co-Applicant

THE FOLLOWING ITEMS MUST BE INCLUDED WITH THIS APPLICATION FOR INCOME VERIFICATION PURPOSES. Failing to include the required documentation or withholding information will result in the delay or termination of the application process. PLEASE READ CAREFULLY to ensure you provide all information.

Required documentation for ALL APPLICANTS:

- Current checking account statements for the ***MOST CURRENT 2 MONTHS***. You may black out all account numbers. We must be able to see the total of all deposits to verify income. Balance only information is insufficient.
- A copy of the most current federal income tax return for each adult wage-earner in the home. Summary sheets only with social security number blacked out.
- A copy of your most current mortgage statement showing current payment status.
- Proof of current homeowner insurance policy.
- Most current 3 pay stubs for each adult wage-earner that resides in the home **OR** most current Social Security statement for each individual that resides in the home.

Documentation required ONLY IF APPLICABLE:

- Your most current savings account statement. You may black out all account numbers. Balance information only is acceptable for savings accounts.
- Most current SSD (disability) statements for applicable individuals that resides in the home.
- Alimony or Child Support payment information.
- Most current pension or retirement income statements.
- Earning statements from any and all other investment income.
- If you are seeking assistance with roof replacement**, you must provide proof that your insurance company has not and will not provide coverage for the project.

* Please indicate any reason(s) you are unable to provide any of the above-required documentation: _____

Mail this document and all Proof of Income documentation listed on page 6 to:

Rebuilding Together

445 E 1st St

Fremont, NE 68025

Email: info@RebuildingTogetherPVE.org

Applications may be dropped off in person and we are happy to assist you with completion if needed. The office is not always staffed, please call for an appointment.

For more information call 402-727-7047 between 9:00 a.m. and 4:00 p.m. Monday – Friday



“This is an equal opportunity program. Discrimination is prohibited by Federal Law.”