

## Rebuilding Together® Howard County HOMEOWNER APPLICATION

### SECTION 1 HOMEOWNER INFORMATION

Name(s) of Homeowner: \_\_\_\_\_

Referred By: \_\_\_\_\_

Address  
City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Homeowner birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ age: \_\_\_\_

Primary Language: \_\_\_\_\_

Please check ethnicity:

White  African American  American Indian

Alaskan Native  Hispanic  Middle Eastern

Asian/Pacific Islander  Other: \_\_\_\_\_

### SECTION 2 PROPERTY INFORMATION

Type of Home: \_\_\_\_\_ No. of Bedrooms: \_\_\_\_\_ No. of Bathrooms \_\_\_\_\_

**If you live in a mobile home, please attach a copy of your title.**

**If you have homeowner's or covenant violations that need to be corrected, attach documentation.**

1) List the names and ages of all people living in the home (attach list if more space is needed) including renters: Total number of people living in the home \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ M or F Employed: Y or N Renter: Y or N

Name: \_\_\_\_\_ Age: \_\_\_\_\_ M or F Employed: Y or N Renter: Y or N

Name: \_\_\_\_\_ Age: \_\_\_\_\_ M or F Employed: Y or N Renter: Y or N

### SECTION 3 SPECIAL NEEDS/ DISABILITIES

Is anyone in the home receiving disability (SSI)?s  Yes  No If yes, Who: \_\_\_\_\_

Please indicate by checking below all that apply:  Hearing impaired  Sight impaired

Wheelchair bound  Uses a walker

Mentally challenged  Other: \_\_\_\_\_

Is anyone in the home a veteran?  Yes  No If yes, Who: \_\_\_\_\_

### SECTION 4 APPLICANT HISTORY

Have you ever applied to Rebuilding Together Howard County (formerly known as Christmas in April)?

Yes  No, When? \_\_\_\_\_

Has Rebuilding Together ever done work on your home?  Yes  No When? \_\_\_\_\_

### SECTION 5 TYPE OF REPAIRS TO BE CONSIDERED

Type of Repairs Needed	Brief Description	
Electrical	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Exposed wire
Plumbing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Leaking, where,
Exterior Painting	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Interior painting	<input type="checkbox"/> Yes <input type="checkbox"/> No	Number of rooms:
Carpentry Repairs	<input type="checkbox"/> Yes <input type="checkbox"/> No	Type:

Floor repairs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Holes present
Roof repairs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Leaking, where,
Wheelchair ramp, grab bars, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please list the repairs that you feel need immediate attention 1. _____ 2. _____ 3. _____		Please list the name and telephone number of a person to contact in case of an emergency: Name: _____ Phone: _____ Relationship to you: _____

Rebuilding Together® Howard County serves homeowners who live on a limited income **and own their own home**, with a special focus on the elderly and disabled. For this reason, we must ask you to certify the total household income for all the people who live within your home and we will verify property ownership.

**SECTION 6 VERIFICATION OF HOUSEHOLD INCOME – provide income for all household members**

Name	Wages/ Salary	Social Security Check	Disability	AFDC	Other (Eg. Pension)	Gross Annual Income
<b>Total</b>						

**Are there any special circumstances** regarding the amount of expenses within your household that we need to be made aware of such as home health care, hospital costs, medication expenses, etc. ?

Why do you feel your home should be selected for RTHC? How will the improvements help you? Please give us any information about yourself that will be important for us to consider in evaluating your application:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I learned about Rebuilding Together and our volunteer home repair program from...

- Poster   
 TV   
 Newspaper   
 Friend/Neighbor   
 Office on Aging   
 Meals on Wheels  
 FURN   
 Neighbor Ride   
 Community Action Council

Other (please specify) \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



RETURN APPLICATION TO:

Rebuilding Together® Howard County  
8775 Centre Park Dr. #519, Columbia, MD 21045

Questions? Call 410-381-3338 or email: [info@rebuildingtogetherhowardcounty.org](mailto:info@rebuildingtogetherhowardcounty.org)

FAX: 410-381-4412



**Consent For Services  
Authorization For Release of Information**

**Client Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

I understand that I am applying for, or may be receiving services from, Rebuilding Together® Howard County, Inc. In order to access additional services for which I may be eligible, I grant permission for Rebuilding Together® Howard County, Inc. to share referral information with the agencies listed below, unless stricken through. My confidentiality will be protected by these agencies while permitting the flow of appropriate information among the staff of agencies listed above. I understand that to the extent permitted by law, my records will be treated confidentially. I understand this consent may be revoked by me at any time.

Howard County Office on Aging

Howard County Disability Services

Howard County Dept of Social Services

Howard County Consumer Affairs

Howard County Health Department

Howard County Department of Housing

Howard County Office of Children's Services    Neighbor Ride

*Rebuilding Together also works with congregations that may provide emergency or minor repair work. By signing below, I authorize RTHC to contact these congregations on my behalf if the repairs I have requested are more appropriate to the services they offer.*

**Client/Legal Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(signature)



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Columbia, MD 21045  
(410) 381-3338  
[www.rebuildingtogetherhowardcounty.org](http://www.rebuildingtogetherhowardcounty.org)

## **HOMEOWNER INFORMATION SHEET**

Thank you for your request to become a recipient of the Rebuilding Together® Howard County program. To help you understand how this program works and what we will do for you if you are selected, we have answered some of the most frequently asked questions below. Please read through this carefully.

### **1. What is Rebuilding Together® Howard County (RTHC)?**

Rebuilding Together® is the leading national volunteer organization that, in partnership with the community, rehabilitates the houses of low-income homeowners, particularly the elderly and/or disabled, so that they may continue to live in warmth, safety and independence.

Rebuilding Together® Howard County is the local chapter of the national organization, which was founded in 1991. Over 1,000 volunteers rehabilitate approximately 30 to 35 houses in Howard County each year.

### **2. Is this a government program?**

No, Rebuilding Together® Howard County is not government sponsored nor subsidized. It is a private, non-profit, volunteer organization.

### **3. What are the qualifications or guidelines for acceptance into the program?**

The primary qualifications are as noted in Number 1 above—that is, the recipient must own the home and must be low income, elderly and/or disabled. The home must be located in Howard County.

### **4. How are the houses chosen for this program?**

Rebuilding Together® Howard County receives applications from homeowners throughout the year who are referred by various groups and individuals -- Office on Aging, senior citizen centers, churches, community organizations, even neighbors who hear of the program and wish to help their neighbor. The applications are reviewed by a committee chosen by the Rebuilding Together® Howard County Board of Directors. The committee consists of individuals who have backgrounds in homebuilding, architecture, housing needs, accessibility, etc. After reviewing the applications, the committee will select

potential recipients and then make an appointment with the homeowners to visit each house for a visual inspection of the work needed and to interview the homeowner. After all potential houses have been inspected, the committee makes its final selection and the homeowners are then notified to whether their house has been chosen or not.

**5. What is the cost to me?**

There is no cost at all to the recipient. All of the individuals who work on the house are volunteering their time and the building materials and supplies are paid through private and corporate donations.

**6. Who will work on my house?**

The people who work on the houses come from all walks of life: the construction trades, salespeople, homemakers, presidents of companies, ministers, government employees, bankers. These people are all brought together through their employer, civic organization, church, etc. As a sponsor, they agree that their organization will provide a financial contribution to pay for the work to be done and to have 20 to 30 individuals who wish to spend one day “rebuilding” a home. So, although you may have people from many different backgrounds working on your house, keep in mind they all have one thing in common -- they are there in the spirit of “neighbor helping neighbor” in the hopes of making our recipients’ lives better.

**7. When is the work done?**

“Rebuilding Day,” as it is called throughout the country, occurs on the last weekend in April. The volunteers will arrive at the recipient’s home in the morning (usually around 8:00 a.m.) and will complete the work to be done by the evening (around 5:00 p.m.). It is very important that the work selected can be completed in the one day.

**8. What do I do while the work is being done?**

If you are able bodied, or if you have family members who are, we request that you assist in the work being done. We do expect the homeowner to be at the house for the day. Many times, the homeowner may not be able to assist in the actual work, but can be at the home to answer questions that may arise. Some homeowners put on coffee; some even bake a cake or fix a meal to show their appreciation to the volunteers.

**9. Why am I being asked to sign a release of information form?**

Your signature on the “Consent to Release Information” form allows Rebuilding Together to work collaboratively with other area agencies to provide the most effective and comprehensive services available to you. You are not obligated to sign this form, and if there is no signature, it will not negatively affect your potential as an RT candidate. It is solely for your benefit to provide you with the best that Howard County can offer to you.