HOMEOWNER APPLICATION
2018 – 2019

Program Deadlines (Single application for all):
Year-Round for Safe at Home Repair Program
By April 15 for Fall Rebuilding Day consideration
By October 15 for Spring Rebuilding Day consideration

Rebuilding Together Peninsula (RTP) is a nonprofit organization that provides free home repairs to income-qualified homeowners.

You are Eligible If You ...

✓ Live in the home you own in San Mateo County or in the cities of Sunnyvale, Mountain View, Palo Alto, or Los Altos
✓ Own no other real estate and intend on staying in your home at least two years
✓ Your household qualifies as low-income (see table below)
✓ Have documents that prove you own your own home and meet our income qualifications

Income Eligibility

To find out if you are eligible, fill out the Household Income Worksheet on page 3 of the application and compare your total household income to the Income Eligibility Table below. You qualify if your total gross household income is below the following:

<table>
<thead>
<tr>
<th>Household Size (adults and children)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santa Clara County Total Annual Income</td>
<td>$66,150</td>
<td>$75,600</td>
<td>$85,050</td>
<td>$94,450</td>
<td>$102,050</td>
<td>$109,600</td>
<td>$117,150</td>
</tr>
<tr>
<td>San Mateo County Total Annual Income</td>
<td>$82,200</td>
<td>$93,950</td>
<td>$105,700</td>
<td>$117,400</td>
<td>$126,800</td>
<td>$136,200</td>
<td>$145,600</td>
</tr>
</tbody>
</table>

What does gross household income include?

✪ Income from all adults ages 18 and over living in your house, including any adult renters. Adults receiving no income will need to complete a zero income affidavit – please contact RTP for a copy of this document.
✪ All income received, including salaries, pensions/annuities, income/dividends, SSI/SSDI, rent payments, and other contributions.
✪ Total income before taxes and other deductions are taken.
How Do RTP’s Programs Work?

Once we receive your complete application, our staff and volunteers will schedule a comprehensive assessment of repairs needed at your home. Following the assessment, projects selected for repair will be accepted into one of our core repair programs:

<table>
<thead>
<tr>
<th>Safe at Home (SAH)</th>
<th>Projects involve smaller-scale, critical health and safety repairs completed by a staff member and/or a handful of skilled volunteers. Repairs are completed year-round, primarily on weekdays.</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Rebuilding Day (NRD)</td>
<td>Projects are typically larger in scale, engaging approximately 20 or more volunteers per project to tackle a wide range of repair needs. Repairs will occur on or around the last Saturday of April or October.</td>
</tr>
</tbody>
</table>

- Priority is given to households that have not yet received any services from our organization, as well as seniors and persons with disabilities who are unable to make their own repairs and who have no able-bodied family members to assist them.

- Social Service benefits are NOT affected if you receive RTP services.

What Repairs Will Be Considered?

Priority repairs have a direct benefit to the health and safety of your household. Following are examples of common repairs:

- Hot water or furnace repairs
- Door and window repairs
- Wall and ceiling repairs
- Floor repairs/installation
- Debris removal
- Painting
- Basic plumbing
- Basic electrical
- Basic carpentry
- Roof repairs/replacements
- Safety Modifications
- Fence and/or gate repairs

RTP is limited in the type of work we can complete based on funding and volunteers available. Large, resource-intensive projects like roofing, painting, landscaping, or fencing outside are primarily considered for our National Rebuilding Day program in April or October. RTP does not do structural repairs such as foundations, framing, seismic retrofitting, new construction, or room additions. We also may not be able to work on projects that include repairs that were done without proper permits.
To Apply

Fill out all pages of the application.

Sign the application.

Gather required documents to prove your home ownership, residence, and household income. See application page 3 for a list of documents RTP accepts.

Make copies of those documents. Black out all social security numbers and bank account numbers – we only need the documents to show name and/or address.

Detach and keep this page so that you can follow up with RTP.

Mail or e-mail the signed application to RTP:

**Post Mail or Drop off:**
Rebuilding Together Peninsula
841 Kaynyne St.
Redwood City, CA 94063

**OR**

**Email:** info@RTPeninsula.org
Scan and email application in pdf format with all necessary documentation.

Once RTP Receives Your Application...

RTP will follow up with you when we receive this application. If you do not receive a call within two weeks of mailing the application, please call us at 650-366-6597.

RTP is committed to providing equal opportunities for all applicants for the programs’ services. All selection decisions are made without regard to unlawful considerations of race, sex, religion, national origin, age, sexual orientation, disability, or any other legally protected status.

QUESTIONS?
Contact us at
Rebuilding Together Peninsula
841 Kaynyne St.
Redwood City, CA 94063
(650) 366-6597
info@RTPeninsula.org
http://www.RTPeninsula.org
Alternative Repair & Weatherization Programs

Central Coast Energy Services
Provides energy assistance programs including the Home Energy Assistance Program, PG&E Care, and Home Weatherization Services for low-income households in Monterey, Santa Cruz, San Benito, Santa Clara & San Mateo Counties.
(650) 242-9474 | Liz Moreno, lizet@energyservices.org | energyservices.org

El Concilio, PG&E Energy Savings Assistance Program
Free weatherization & energy-use education. Repairs include appliance-testing, caulking, CFL's, weather-stripping, water heater blanket, attic insulation, exterior door replacement, window replacement, CO2 detectors, heater & water heater repair/replacement for fixed-income PG&E customers in San Mateo County.
(650) 373-1086 | Gloria Samayoa, gsamayoa.elconcilio@gmail.com | el-concilio.com

Senior Coastsiders
Free minor home repair for income-qualified homeowners; Seniors (60 yrs +) or people with disabilities; coast side residents from Montaras to Pescadero.
(650) 726-9056 | seniorcoastsiders.org

Sacred Heart Community Energy Service
Weatherization measures and utility bill assistance; Repairs include attic insulation and venting, weather-stripping, low-flow showerheads, windowpane replacement low-income homeowners or renters in Santa Clara County.
(877) 278-6455 | sacredheartenergy.org

Home Modification Programs

Center for Interdependence of Individuals with Disabilities (CID)
Home accessibility, safety modifications, assistive technology, free wheelchairs, counseling for anyone with disabilities in San Mateo County
(650) 645-1780 ext. 122 | Lisa Heath, lisah@cidsanmateo.org | cidsanmateo.org

Silicon Valley Independent Living Center (SVILC)
Systems advocacy, assistive technology, housing referral/placement, and independent living skills support for people with disabilities in Santa Clara County
(408) 894-9041 | (408) 894-9012 TTY | info@svilc.org | svilc.org
### REBUILDING TOGETHER PENINSULA
#### 2018-2019
#### HOMEOWNER REPAIR APPLICATION

**Full Name(s) of Homeowner(s) write on line above**

<table>
<thead>
<tr>
<th>Address (street)</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</thead>
</table>

**Home Phone | Cell Phone | Work Phone**

*Check one if preferred: [ ] Home Phone  [ ] Cell Phone  [ ] Work Phone*

**Email Address**

Emergency Contact: ________________ Phone #__________ Relationship to homeowner: ________________

List **all** persons living in the home including all children, **starting with** the homeowner:

<table>
<thead>
<tr>
<th>Name of household member(s)</th>
<th>Relationship to the homeowner</th>
<th>Date of Birth mm/dd/yy</th>
<th>Age</th>
<th>Gender (M/F)</th>
<th>Disabled? (Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Homeowner</td>
<td>/ /</td>
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<tr>
<td>8.</td>
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</table>

**House Information:**

Type of Home? [ ] Single Family  [ ] Mobile/RV  [ ] Condo/Townhome  [ ] Other: _____  House sq. ft.: _____

Year Built: _____ Year you moved in? _____ Total # of Rooms: _____ # Bathrooms _____ # Bedrooms _____

Any additions? [ ] No  [ ] Yes → What year was it constructed? ___  Permits/Documentation? [ ] No  [ ] Yes

Please describe the addition: ___________________________________________________________

Factors that have prevented you from making the repairs listed: ___________________________________________

**What are your repair needs?**

- [ ] Water Heater Repair
- [ ] Furnace Repair
- [ ] Wall or Ceiling Repair
- [ ] Door or Window Repair
- [ ] Floor Repair
- [ ] Lighting Repairs
- [ ] Debris Removal
- [ ] Painting
- [ ] Electrical Repair
- [ ] Basic Carpentry
- [ ] Roof Repair
- [ ] Gutter Repair
- [ ] Fence and/or Gate Repair
- [ ] Handrails or Grab Bars
- [ ] Plumbing Repair
- [ ] Active Leaks Repair

Repair Comments: ________________________________________________________________
Please note: The information on this page is for grant reporting purposes only. It will not impact the consideration of your application.

1. What is the racial and ethnic background of the household? Note all household members, including children *(please write the total number of each race in the columns to the right).*

<table>
<thead>
<tr>
<th>RACE</th>
<th>ETHNICITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td># Not Hispanic # Hispanic</td>
</tr>
<tr>
<td>Black/African American</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaska Native and White</td>
<td></td>
</tr>
<tr>
<td>Asian and White</td>
<td></td>
</tr>
<tr>
<td>Black/African American and White</td>
<td></td>
</tr>
<tr>
<td>American Indian/Alaska Native and Black/African American</td>
<td></td>
</tr>
<tr>
<td>Other Multi-Racial</td>
<td></td>
</tr>
</tbody>
</table>

2a. What gender is the head of household? *(The head of household is defined as the individual financially responsible for keeping up at least half of the home).*  
☐ Male ☐ Female ________________

2b. Is the household a single parent household? *(a single parent is responsible for full guardianship of at least one child under the age of 18).*  
☐ No ☐ Yes

3a. Is the head of household disabled? ☐ No ☐ Yes  
3b. Is anyone else in the house disabled? ☐ No ☐ Yes  
→ If “yes,” on either question 3a or 3b please provide: Total Number of disabled occupants: _____  
Description of disability/disabilities: ________________________________________________________________

4. Are/were any family members of the household a member of the military? ☐ No ☐ Yes

5. Do you own any other house or hold title property in another other state or country? ☐ No ☐ Yes  
→ If “yes,” please explain: ________________________________________________________________

6. Are you the sole owner of the home? ☐ No ☐ Yes  
→ If “No,” please list **all** the names on the house title and any necessary explanation: ________________________________________________________________

7. Are you current on mortgage payments on the home? ☐ No ☐ Yes ☐ Home Paid in Full

8. Have you worked with another housing program or organization? *(Example: CIID, PG&E, CCES, etc.)*  
☐ No ☐ Yes  
→ Which one(s)?______________________________________________________________

9. How did you hear about Rebuilding Together? Please include name of publication, friend, Senior Center, relative, etc__________________________

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Household Income Worksheet

Please record the total monthly gross income of all individuals 18 and over living in the home, including renters. This information will remain confidential to Rebuilding Together Peninsula (RTP). Supporting documentation must be provided for each of the areas that are completed:

<table>
<thead>
<tr>
<th>Type of Income</th>
<th>Household monthly total from this source</th>
<th>Whose income? (Name and relationship to applicant)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>SSI or SSD</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Social Security</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Alimony/Child Support</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Interest and Dividends</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Pensions and Annuities</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Rental Income</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Other Income</td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

**Total of all Income** $

Please list any individuals 18 and over living in the home who do NOT have any income and explain why - they will need to complete a zero income affidavit - please contact RTP for a copy of this document:

_________________________________________________________________________________________________

Required Support Documents Checklist

To be considered, applications must include proof of income, ownership and residence. Referring to the income worksheet above, all income from all sources must be documented for all adults ages 18 and over living in the home, including renters.

<table>
<thead>
<tr>
<th>INCOME</th>
<th>OWNERSHIP</th>
<th>RESIDENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>From each adult, we require copies of one or more of the following to verify their income:</td>
<td>We require a copy of one of the following from the homeowner:</td>
<td>We require a copy of one of the following displaying the name and address of the homeowner:</td>
</tr>
<tr>
<td>☐ Most recent income tax return – first two pages only (preferred documentation) OR all possible documents from the list below:</td>
<td>☐ Most recent property tax bill displaying the name and address OR</td>
<td>☐ Most recent bill from:</td>
</tr>
<tr>
<td>☐ Last three bank statements</td>
<td>☐ Deed to property (a copy – not the original) OR</td>
<td>☐ PG&amp;E</td>
</tr>
<tr>
<td>☐ Last two pay stubs</td>
<td>☐ (for mobile homes only) OR</td>
<td>☐ Utility</td>
</tr>
<tr>
<td>☐ Social security award letter</td>
<td>☐ Copy of Mobile Home Title OR</td>
<td>☐ Cable</td>
</tr>
<tr>
<td>☐ SSI or SSDI statements</td>
<td>☐ Copy of DMV Registration (RV’s or trailers)</td>
<td>☐ Home telephone</td>
</tr>
<tr>
<td>☐ Rent check(s)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* BLACK OUT ALL social security numbers or bank account numbers on your documents before submitting them – we only need it to show the name and/or address information.*
**Additional Contact Information**

1. Do you have a social worker, caseworker or conservator? □ No □ Yes → List their details below:
   - Name/Title: ____________________________
   - Phone: ____________________________

2. What is your primary spoken language? ______________________
   - If English is not your primary language please select one of the following options:
     - □ English is not my primary language, but I am comfortable speaking in English and do not need a translator
     - □ I need someone to translate for me into English
     - □ I have someone who can translate for me into English:
       - Name of person who will translate: ____________________________
       - Phone number: ____________________________

3. Only complete question three if this application been prepared by someone other than the applicant:
   a. Name of person preparing or assisting: ____________________________
      - Phone: ____________________________
   b. Relationship to the applicant: ____________________________ (e.g. social worker, brother, etc.)
   c. Does the person assisting want to be notified prior to a home inspection visit? □ No □ Yes
   d. Is the homeowner aware of the application to provide repairs to their home? □ No □ Yes

**Authorization and Verification**

- I am not planning nor do I intend within the next two years to sell my home.
- I understand and agree that the work on my home may be done by volunteers.
- I authorize Rebuilding Together Peninsula to perform criminal and home ownership background checks on myself and members of the household.
- I understand there is no fee required to apply for these programs.
- I understand applications are reviewed based upon the mission of RTP and selected according to available monetary and labor resources.
- I understand that applicants and household members are expected to assist with repairs to the best of their abilities.
- There are no other financial resources available to myself or members of the household, which could be applied to these repair needs.

*I, the undersigned, certify subject to disqualification that the information provided in this application is true and correct and that the provisions stated are accepted and agreed to:*

______________________________
Applicant Signature

______________________________
Print Name

______________________________
Date

**Returning the Application**

<table>
<thead>
<tr>
<th>Post Mail or Drop off:</th>
<th>Email:</th>
<th>QUESTIONS? Please Call (650) 366-6597 or check out our website at <a href="http://www.RTPeninsula.org">http://www.RTPeninsula.org</a>.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rebuilding Together Peninsula</td>
<td></td>
<td></td>
</tr>
<tr>
<td>841 Kaynynie St.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Redwood City, CA 94063</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(scan and email application in .pdf format with ALL necessary documentation)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><a href="mailto:info@RTPeninsula.org">info@RTPeninsula.org</a></td>
<td></td>
<td></td>
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</tbody>
</table>

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