



## Shawnee, Johnson County

Dear Homeowner,

Enclosed is the application you requested for volunteer home repair from Rebuilding Together Shawnee, Johnson County. Please read carefully so you fully understand what to expect from the program.

- 1) Fill out the application completely, then mail it back to us as soon as possible.
- 2) Along with your signed application form, we will need the following:
  - a. Proof of home ownership (such as a copy of your original deed, a copy of your mortgage statement, or a copy of a property tax bill that shows your name and address).
  - b. Proof of income level from all adults over the age of 18 that live in your home (copy of pension or annuity statement, social security statement, tax returns or pay stubs).
  - c. Proof of homeowners insurance if you have any.
- 3) After we receive your complete application and verify the information, we will contact you for an appointment to meet with you and view the work needed in your home.
- 4) All applications are reviewed by a committee of our Board of Directors. Our ability to serve applicants is dependent on the availability of volunteer resources. Rebuilding Together relies on volunteer workers and financial sponsors. For this reason, we are not able to serve all applicants.
- 5) Our workers are all volunteers. If your home is selected by a volunteer sponsor, they will work on your home at no charge to you, but they cannot guarantee how much work will be done.
- 6) All able-bodied adults and teenagers, present on the workday, are requested to work with the volunteers.
- 7) Rebuilding Together makes no promises about the amount of work that a volunteer group can complete. If a volunteer group selects your home, they will work to accomplish jobs they are comfortable doing given the budget, supplies and skills they have.

Sincerely,

*Neal Sawyer and Ron Freyermuth*

Neal Sawyer and Ron Freyermuth  
Co-Presidents

Rebuilding Together Shawnee, Johnson County, Inc.  
P.O. Box 3617  
Shawnee, KS  
66203 913-248-  
2802  
Visit us on the web at [www.rebuildingtogethershawnee.com](http://www.rebuildingtogethershawnee.com)

## What happens after Rebuilding Together receives my application?

When we have received your complete and signed application (including copies of documents) we will notify you within 4-6 weeks if your home will receive an evaluation. You may be contacted by a RTS Board member to schedule a home preview. He/she will come to your home, meet with you to assess the state of your property, and determine the work RTS will perform if your application is accepted by RTS. The preview report will then be reviewed by a Rebuilding Together Shawnee committee that will make a recommendation for a vote of the RTS Board of Directors to either accept or deny the application.

You will be notified within another 4 - 6 weeks of the visit to your home for the home evaluation telling you whether or not your application has been approved by the RTS Board. If your application is accepted we will start trying to match your house with a volunteer group to do the approved repairs from the list of items you have requested on your application.

When you are matched, the leaders of your volunteer group (called House Captains) will contact you in order to organize the work that they will do at your house. They will purchase supplies and plan and facilitate your repairs. House Captains are not Rebuilding Together employees, they are volunteers donating their time to help you; their neighbors.

**Note: Regrettably, Rebuilding Together Shawnee does not have enough resources to assist all the eligible homeowners who submit a completed application or to do all repairs requested on the homes we work on.**

## What Repairs can Rebuilding Together make?

Rebuilding Together Shawnee's labor is primarily voluntary. When an applicant is selected as a participant, they receive assistance by a group of volunteers to make important repairs that the homeowner needs to their property. Since volunteers do the bulk of the labor, the amount and scope of work that gets done for each project site is **up to the capabilities, and energy of the individual volunteers.**

Much of the work by the volunteers is done in one weekend and includes minor repairs to improve the safety, warmth and security of the building. Following are examples of the types of repairs volunteers may be able to do:

- Interior painting
- Exterior painting
- Repair cracks, holes in walls and ceilings
- Repair stairs and handrails
- Replace entry locks
- Install new deadbolt locks
- Repair broken windows
- Plumbing repairs
- Electrical repairs

- Minor Roof repairs (No complete reroofs)
- Trash removal
- Yard work

### **Who does Rebuilding Together serve?**

Low-income homeowners with an emphasis on the following groups:

- Elderly and/or disabled
- U.S. Veterans
- Homeowners who are caring for disabled relatives or young children in their home
- 501(c)(3) non-profits

### **What documents does Rebuilding Together need with my application?**

To process your application, we need copies of the following documents:

- 1.) Proof of ownership of your home in the form of a copy of a deed or tax receipt which has the applicants' name and address on it. Rebuilding Together Shawnee does not work on rental properties or mobile homes.
- 2.) Proof of income for all adults living on the property, in the form of wage receipts, receipts from social security, pensions, annuities and all other income. A copy of last year's tax return for all adults living on the property is the best proof of income.
- 3.) Proof that homeowners insurance is currently in place. Homeowner must have homeowner's insurance coverage to be eligible for RTS assistance.
- 4.) Proof you are current on your mortgage payments if you have a mortgage on the property. A copy of your most recent monthly mortgage statement is required.



# Homeowner Application

## Shawnee, Johnson County

P.O. Box 3617, Shawnee, KS 66203 (913) 248-2802

[www.rebuildingtogethershawnee.org](http://www.rebuildingtogethershawnee.org)

Assistance is free. There is never a charge to you or your family.

To apply for the program, fill out this application, sign it, and mail or fax it (see address above) with:

- 1.) Proof of income for all adults living in the house and
- 2.) Proof of ownership of your home.
- 3.) Proof of homeowners insurance.

Please be sure to fill out all sections completely; the more information you can give us, the better. You will be notified by mail or phone if your home is selected.

### Section 1: Homeowner(s) Information

Homeowner(s) Full Name \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (H) \_\_\_\_\_ (C) \_\_\_\_\_

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

Number of years at this address: \_\_\_\_\_

Do you have a mortgage on the property? \_\_\_\_\_ Are you current on your monthly payments? \_\_\_\_\_

Number of people living at this address: \_\_\_\_\_

Do you plan to sell or vacate your home within 12 months? \_\_\_\_\_

## Section 2: Resident Information & Special Needs

List the name and age for everyone currently living in the property and describe any special needs, e.g. hearing or visually impaired, wheelchair bound, uses a walker/cane, mentally disabled, loss of limb, diabetes, etc. Note: All able-bodied residents are encouraged to assist the volunteers on the day of the work.

|          |           |                    |
|----------|-----------|--------------------|
| 1. _____ | Age _____ | Disabilities _____ |
| 2. _____ | Age _____ | Disabilities _____ |
| 3. _____ | Age _____ | Disabilities _____ |
| 4. _____ | Age _____ | Disabilities _____ |
| 5. _____ | Age _____ | Disabilities _____ |

## Section 3: Finances

We need proof of income from every person in the home over age 18. A copy of the first page of your last tax return is the best. If this is unavailable, attach copies of wage receipts, social security receipts, pension, annuities, or other assets. Documents must show the applicant's name and address.

Is the applicant(s) employed? \_\_\_\_\_ If yes, by whom? \_\_\_\_\_

Are you current with your property taxes? \_\_\_ Yes \_\_\_ No

Do you have homeowners insurance? \_\_\_ Yes \_\_\_ No (if YES, please provide proof of Insurance. If NO, Please explain) \_\_\_\_\_

Have you received home repair or maintenance assistance from RTS in the last 5 Years? \_\_\_\_\_. If yes, when? \_\_\_\_\_

## Section 4: Describe the Work You Want on Your Home

*Please PRINT CLEARLY or type*

**Accessibility Modifications:** (Do you need a wheelchair ramp, bathroom grab bars, stairway handrails, accessible shower stall, or anything else to help make your home safer and more accessible?)

**Roofing Repairs:** Does your roof leak? \_\_\_ Yes \_\_\_ No If yes, where and how much does it leak?

**Plumbing Repairs:** (Describe leaking sinks, bathtubs, showers, toilets, drainage problems.)

**Carpentry Repairs:** (Describe problems with doors, floors, porches, steps, walls, ceilings and indicate places in the house that need repair.)

**Electrical Repairs:** (Describe problems with fixtures, appliances, wiring, sockets, etc.)

**Appliance Repairs:** (Describe problems with stove, refrigerator, hot water heater)

**Doors and Windows:** (Locks, frames, sashes, broken glass, weather -stripping)

**Trash Removal \ Yard Work:** (Describe significant hauling or yard work needed.)

**Other:** (Describe)

### **Section 5: Homeowner's Statement**

Write a brief statement explaining why you feel your home should be selected and how the program would help you. Explain any disabilities you or any occupants have or dangerous conditions in your home (attach additional pages if necessary).

### **Section 6: Other**

In what year was your home built? \_\_\_\_\_ If you don't know, can you tell us if it was built before 1978? Before 1978 \_\_\_\_\_ 1978 or after \_\_\_\_\_

Is any resident of the home a U.S. Armed Forces veteran or currently serving?  
YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, what are their name(s)

Please indicate if you are a widow or widower of a veteran: YES \_\_\_\_\_ NO \_\_\_\_\_

## **Section 7: Application Checklist**

\_\_\_ I have read and filled out this entire application.

\_\_\_ I have enclosed a copy of the deed on my home or other proof of home ownership. (for example, a property tax receipt showing my name and address)

\_\_\_ I have enclosed a statement(s) verifying the total income for all adults living on my property (i.e. first page of a tax return, social security of wage receipt, pension receipt, etc. *If unemployed or retired, please enclose a note to that effect*).

\_\_\_ I have signed and dated this application.

## **Section 8: Homeowner's Agreement / Waiver**

I certify that the information I have provided on this application is accurate and that I own the property at the given address. I have no present intention to move or offer my home for sale. I grant Rebuilding Together Shawnee permission to take or have taken still and moving photographs and films, including television of me, my guests and my home. I consent and authorize Rebuilding Together Shawnee its advertising agencies, news media and any other persons interested in Rebuilding Together, 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 forgoing, newspapers, television media, brochures, pamphlets, internet, instructional materials and books. I confirm that (except for the conditions listed on this application) my home is a safe place for volunteers to work.

I understand none of the work done is warranted or guaranteed.

The work to be done will be that previously discussed with me/us by a representative of Rebuilding Together Shawnee and **I/we understand that there is no guarantee as to the amount of work which Rebuilding Together Shawnee may complete.**

In consideration of the work to be performed free of charge by the volunteers organized by Rebuilding Together Shawnee for the benefit of the Homeowner(s) and in light of the aims and purposes of the community service provided by Rebuilding Together Shawnee in organizing this home repair and renovation program, Homeowner(s) agree to release and hold Rebuilding Together Shawnee, its officers and directors, employees, agents, vendors and volunteers harmless from any cause of action, claim or suit arising from such work.

**Homeowner's Name** \_\_\_\_\_

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

**Homeowner's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*If you are not the homeowner, but are assisting in completing this application, please fill out the following:*

**Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

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