



Rebuilding Together Portage, Inc.

2018 Homeowner Application – Portage Township

DUE BY: DECEMBER 1, 2017 TO BE CONSIDERED

Return via mail to: P.O. Box 2511 Portage, IN 46368

In order to uphold the mission of Rebuilding Together, preference is given to those homeowners who are low income, elderly and/or disabled and who have lived in their homes for many years as vital members of their community.

MANUFACTURED HOMES, DOUBLES, RENTALS AND LAND CONTRACT PROPERTIES WILL NOT BE CONSIDERED.

PROPERTY INFORMATION:

Name of ALL persons on Title: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone Number: (\_\_\_\_) \_\_\_\_\_

Owner occupied? Yes [ ] No [ ] How many people live in the home? \_\_\_\_\_

Are the property taxes current? Yes [ ] No [ ] If no, amount in arrears \$ \_\_\_\_\_

Is your home insured under a homeowner’s policy? Yes [ ] No [ ] If yes, Company Name: \_\_\_\_\_

How many years have you owned this home? \_\_\_\_\_

\*\*Do you plan on selling your home within the next three years? Yes [ ] No [ ]

What is the nature of the problem(s) to be repaired?

\_\_\_\_ Electrical \_\_\_\_ Stair Repair \_\_\_\_ Window Repairs \_\_\_\_ Wheel chair Ramp

\_\_\_\_ Plumbing \_\_\_\_ Wall Repairs \_\_\_\_ Roof Repairs \_\_\_\_ Concrete Repairs

\_\_\_\_ Yard Work \_\_\_\_ Floor Repairs \_\_\_\_ Door Repairs \_\_\_\_ Other (explain) \_\_\_\_\_

\*\*If you sell your house within 3 years of Rebuilding Together Portage, Inc. completing repairs to your home, please be advised that you will need to reimburse Rebuilding Together Portage, Inc. 25% of the cost of repairs to your home and payment is expected at the time of sale. The payment amount will go towards a future home that we repair.

How did you hear about Rebuilding Together Portage? \_\_\_\_\_

Have you applied for assistance from Rebuilding Together before? Yes [ ] No [ ]

Have you received assistance from Rebuilding Together before? Yes [ ] No [ ]

HOMEOWNER INFORMATION:

Homeowner 1: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex: Male [ ] Female [ ] Marital Status: Married [ ] Unmarried [ ]

Currently employed? Yes [ ] No [ ] Retired [ ] Number of years with employer: \_\_\_\_\_

Name of Employer \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Disabled: Yes [ ] No [ ] If yes, Nature of Disability: \_\_\_\_\_

U.S. Armed Forces Veteran: Yes [ ] No [ ]

Homeowner 2: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex: Male [ ] Female [ ] Marital Status: Married [ ] Unmarried [ ]

Currently employed? Yes [ ] No [ ] Retired [ ] Number of years with employer: \_\_\_\_\_

Name of Employer \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Disabled: Yes [ ] No [ ] If yes, Nature of Disability: \_\_\_\_\_

U.S. Armed Forces Veteran: Yes [ ] No [ ]

Have you missed a mortgage payment in the last 12 months? Yes  No  If yes, how many? \_\_\_\_\_

Relationship to Homeowners (spouses/parent-child/other) \_\_\_\_\_

Number of years Homeowner has lived in home? \_\_\_\_\_

Number of adults living in home \_\_\_\_\_ Number of adults employed or receiving income \_\_\_\_\_

Number of children living in home \_\_\_\_\_ Ages of children \_\_\_\_\_

Do you own other property: Yes  No  Use of other property \_\_\_\_\_

Race (used for HUD reporting purposes only)		Annual Income Limits			
Homeowner 1	Homeowner 2	Income limits for determining eligibility reflect 50% of 2017 Porter County Median Annual Income:			
<input type="checkbox"/> White (non-Hispanic origin)	<input type="checkbox"/>	<u>Family Size</u>	<u>Income</u>	<u>Family Size</u>	<u>Income</u>
<input type="checkbox"/> Black (non-Hispanic origin)	<input type="checkbox"/>	1	\$18,190	5	\$43,170
<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/>	2	\$24,360	6	\$49,440
<input type="checkbox"/> Hispanic	<input type="checkbox"/>	3	\$30,630	7	\$55,710
<input type="checkbox"/> Asian or Pacific Islander	<input type="checkbox"/>	4	\$36,900	8	\$61,980

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WARNING! It is a Federal crime punishable by fine and/or imprisonment to knowingly make false statements concerning any of the above facts as applicable under the provisions of Title 18, US Code, Section 1014.

IMPORTANT – READ CAREFULLY BEFORE SIGNING... Applicant's Statement:

I certify that I do not have the financial means (savings, investments, etc.) to perform the repairs for which I am applying. I certify that the above statements are true, accurate, and complete to the best of my knowledge and belief. This application shall remain the property of Rebuilding Together Portage, Inc. to which it is submitted for the purpose of obtaining assistance.

I hereby consent to and authorize Rebuilding Together Portage, Inc. after giving reasonable notice, to enter the property for the purpose of determining the need and scope of the repair(s) specified above. I authorize the disclosure of the above information to only those persons or agencies as necessary to secure the assistance for which this application is submitted.

\_\_\_\_\_  
Homeowner 1 Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Homeowner 2 Signature

\_\_\_\_\_  
Date

**REBUILD DAY IS APRIL 28, 2018**

**DO NOT DELAY. APPLICATIONS MUST BE POST MARKED BY DECEMBER 1, 2017 TO BE CONSIDERED**

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*If your home is selected, financials will be required at a later date. Please understand that you will NOT be charged anything for the materials or work that is done to your home!*