

APPLICATION

Complete this form online at Revive225.com or send a completed paper copy to Revive225's office at 930 North Boulevard, Baton Rouge, LA 70802. For assistance, please call Revive225 at (225) 383-4777.

Name: _____ Parish: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____

Primary phone: _____ Other phone: _____

Have you applied to Revive225 before? Yes No If so, when? _____

Has Revive225 ever worked on your home? Yes No If so, when? _____

If an organization referred you to Revive225, please list its name: _____

Are you willing to allow Revive225 to share this application with other home repair agencies? Yes No

Household Members

Please list everyone who lives in your home (at least some of the time, including yourself).

Name	Year Born	Gender	Disabled?	Veteran?

Total household income: \$ _____ per month. (Include all sources of income, including Social Security, SSI, alimony and other benefits.)

Date submitted: _____ Form: Online Drop-Off Initial Visit Date: _____

Call needed? Yes No Letter needed? Yes No Date of call or letter: _____

Referral source notified of status? Yes No Date: _____ How notified? _____

Was your house damaged by any of the following? Fire Flood Storm

What year was your home built? _____ How long have you lived in this home? _____

Type of home: Mobile home/trailer House Other

Number of rooms in home: Bedrooms: _____ Bathrooms: _____ Total rooms: _____

Does your home have electricity? Yes No Does your home have running water? Yes No

Repairs Requested

Which items in your home are in need of repair? Please briefly describe the need for each repair?

_____ Foundation

_____ Windows / Doors

_____ Painting

_____ Porch / Steps

_____ Siding / Exterior walls

_____ Wheelchair ramp

_____ Floors

_____ Handicap modifications

_____ Insulation

_____ Electrical / Plumbing

_____ Interior walls / Ceiling

_____ Home disassembly

_____ Roof

_____ Other

Comments or additional information:

Verification

To the best of my knowledge, I certify that the information in this application is true and correct, and that the home listed is my primary residence. I understand that Revive225 is a non-profit ministry that is only able to assist a small percentage of those who apply. If selected, I may be asked to show documentation that verify this information.

Signature

Date

Send to Revive225, 930 North Boulevard, Baton Rouge, LA 70802