



HOMEOWNER APPLICATION EMERGENCY HOME REPAIR

Rebuilding Together Hartford
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Please read the information below carefully before submitting your application:

Rebuilding Together is a non-profit organization that provides free home repair services to low income Hartford homeowners, particularly the elderly, disabled and families with children. Our goal is to keep people living in warmth safety and independence.

Emergency Home Repair Program:

This program is a **year-round program** and assists with critical issues, i.e., no heat or hot water, safety and/or accessibility modifications. The aim of the program is to help people who have an immediate need that impacts their ability to live in warmth, safety and independence.

Application Guidelines:

Be advised that should your home be chosen for any of our programs, proof of Hartford residency and household income will be required to qualify. **You MUST be current on your City of Hartford property taxes or on a payment plan.** All information will be kept **CONFIDENTIAL**. You may mail, fax or email your application to our contact information above.

Name: _____	Home Phone: _____
Spouse Name: _____	Cell Phone: _____
Address: _____	Work Phone: _____
Zip Code: _____	Date of Birth: _____
Email Address: _____	

Are you a prior recipient of this program? _____ Historic Property? _____

Is anyone in the home disabled? _____ *If yes, please describe:* _____

Is there a Veteran living in the home? _____	Service Branch: _____
Served where? _____	Service Started: _____ Service Ended: _____

Owner(s) (name to deed on house): _____

Monthly Mortgage Amount: _____ Years residing at this address: _____ Year house built: _____

Annual Employment Income: _____ SSI: _____ Pension: _____ State Assistance: _____ Other Income: _____

Type of home:	<input type="checkbox"/> Single Family	<input type="checkbox"/> Two Family	<input type="checkbox"/> Three Family	<input type="checkbox"/> Other: _____
	Rent	Rent	Rent	Rent
	1 st floor	2 nd floor	3 rd floor	Other _____

If multi family home, what floor do you occupy? _____	Total # of people Living in your household? _____	List the ages of all children under age 18 living in your household: _____
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If this is an emergency, what repairs are needed on your home? **(only complete this section if your application type is Emergency Home Repair)**

Gas Furnace Oil Furnace Ramp Stair Lift

Referred by: (if applicable) _____