



631 Iron City Drive
Pittsburgh, PA 15205
Phone: 412.922.0953
Fax: 412-922-3729
www.RTPittsburgh.org

Dear Homeowner,

Thank you for your interest in Rebuilding Together Pittsburgh. Our mission is to make homes safe, warm, and dry by providing elderly and disabled low-income homeowners with critical home repairs free of cost. Through the use of volunteers and skilled professionals we help homeowners with a variety of home repairs, including carpentry, plumbing, electrical, masonry, flooring, safety modifications such as grab bars and handrails, plastering, painting, occasional roofing repairs, etc. However, major issues such as foundation/structural problems, furnace repair and replacement, and sewer, water and gas line replacements are usually beyond our ability to address. In addition, we have a “whole-house” approach and usually select homes in which we are able to address all the safety concerns present in that home.

We have included with this letter our application, which is the first step in our process to request home repair services. Once we receive your completed application, and if you are qualified, an appointment will be made by a representative of RTP to visit your home to evaluate its condition. The representative’s report is then reviewed and a determination is made. There is no standard timeline on this process, but due to the high demand for our free services, it can be months before a decision is made as to whether or not we will have the resources and volunteers available to do the work needed in your home.

In order to be eligible, the following conditions must apply:

- ✓ You must own and have lived in your home for the past three years.
- ✓ Your home must be located in Allegheny County, Pennsylvania.
- ✓ You must be current on your property taxes or be on a qualified payment plan.

Additionally, preference is given to homeowners who meet the following qualifications:

- ✓ Your total household income falls at or below 200% of the Federal Poverty Guidelines. All residences in the home must disclose income.
- ✓ You are at least 60 years of age, *or* on permanent disability, *or* a veteran.

Please complete the attached application and return it with your proof of income. Again, thank you for your interest in Rebuilding Together Pittsburgh.

Rebuilding Together Pittsburgh
631 Iron City Drive
Pittsburgh, Pa 15205

If you have any questions, please contact the office at (412)-922-0953.

Frequently Asked Questions

Q: *What is your application process like?*

A: Our process follows these steps:

1. Fill out the application* and submit all required documents
*an application is not a guarantee of service
2. If you meet our eligibility requirements, your home will be previewed by an RTP representative to assess the work needed.
3. RTP determines if we have volunteers and resources to do the work needed on your home.
4. You will be notified if we are able to serve you or not.

**Keep in mind that we receive more applications than we are able to serve at the present time. Therefore, not all eligible homeowners will be selected. In addition, our process can take many months due to the number of applications we receive.

Q: *I meet 4 of the 5 eligibility criteria, am I eligible for services?*

A: In order to qualify for service, you must own your home in Allegheny County and be current on your property taxes. Preference will be given to homeowners who are over 60 years old, on permanent disability, or a veteran, and have a household income that falls below 200% of the federal poverty guideline.

Q: *What work do you do?*

A: Past repairs have included repairing or installing windows, doors, locks, ramps, porches, grab bars, handrails, patching, painting, caulking, minor carpentry, electrical, plumbing, and much more.

Q: *My roof leaks, can you help me?*

A: We are able to perform minor to moderate roofing repairs on most homes in your area. However, while we usually replace a few entire roofs each year, we do so on a case-by-case basis and cannot always replace an entire roof.

Q: *My furnace isn't working, can you help me?*

A: Unfortunately we do not have the resources to repair or replace furnaces. We recommend that you contact your utility company or the Low-Income Home Energy Assistance Program:
LIHEAP Crisis: 1-866-857-7095
Duquesne Light: 1-888-393-760
Equitable Gas: 1-877-577-8735, 1-800-654-6335
Columbia Gas: 1-800-537-7431, 1-866-956-0308
Peoples Natural Gas: 1-800-400-WARM

Q: *Do the homeowners pay for the repairs?*

A: No. All repairs are paid for by dollar donations or in-kind donations from businesses, foundations, service organizations, clubs, associations and individuals — from neighbors who care — at no cost to the homeowners.



Application Date: _____

Home Repair Application

Thank you for your interest in our home repair program. If you need assistance completing this application, please call our office at (412) 922-0953 and we will be glad to help.

Name (please print) _____ Phone: (____) _____

Address _____ City _____ Zip Code _____

Emergency Contact Person _____ Phone (____) _____

How did you hear about Rebuilding Together? _____

Name other agencies that have helped you with home repair services in the past two years:

Is anyone in the home a Veteran? Yes No

Does anyone in the home have documented Physical Disabilities? Yes No

If yes, please explain: _____

How long have you lived in your home? ____ Years

INFORMATION ABOUT THE HOUSE/ASSETS

Are you the homeowner of record? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you current on your real estate taxes? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you in danger of losing your home? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you on a real estate tax payment plan? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Gas Co:	Electric Co:	
	<u>Description</u>	<u>Value</u>
Do you own any other real estate? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you have any investments? Yes <input type="checkbox"/> No <input type="checkbox"/>		

INFORMATION ABOUT HOUSEHOLD RESIDENTS

Please list all household residents, their date of birth (month/date/year), relationship to homeowner, and monthly income, beginning with the homeowner.

Name	Date of Birth	Relationship	Monthly Income
	/ /	Homeowner/Applicant	\$
	/ /		\$
	/ /		\$
	/ /		\$

Total Household Monthly Income: \$ _____

Total Number of residents in house: _____

Home Repair Application

PLEASE DESCRIBE THE CONDITION OF YOUR HOME TO THE BEST OF YOUR ABILITY

	Good	Needs some repairs	Bad	Remarks
Roof				
Gutters and downspouts				
Exterior doors, including storm doors (open, close, and lock properly? broken glass?)				
Lights outside each exterior door				
Doorbell				
Fences and/or gates				
Steps (inside or out)				
Trees/plants/shrubs around the house				
Windows, including storm windows (open, close, and lock properly?; broken glass?)				
Basement walls and floors (do you have water damage?)				
Furnace Age of Furnace: _____ Years				
Water heater				
Refrigerator Age of Refrigerator: _____ Years				
Stove				
Dishwasher				
Washer and dryer				
Sinks, tubs, and toilets				
Lights, outlets, and switches				
Plaster/drywall				

	Yes	No	Remarks
1) Is the house number readily visible from the street day and night?			
2) Is there a working smoke detector on every level?			
3) Is there a working carbon monoxide detector?			
4) Is there a working fire extinguisher in the kitchen?			
5) Does your home have circuit breakers (not old fuses) in the electrical panel box?			
6) Are there any plumbing leaks?			
7) Does the sewer back up?			
8) Are there rodents in the house?			
9) Do you detect the odor of natural gas inside or out?			
10) Are all household residents physically able to use the toilet, shower, or tub?			
11) Do you need any handrails or grab-bars to be installed or repaired?			
12) Have you had any falls in the last six months due to tripping hazards?			
13) Are certain activities painful or difficult?			
14) Are you avoiding any activities that you used to do because they are difficult or because you are worried about safety?			



Application Date: _____

Home Repair Application

LIST THE THREE REPAIRS YOU CONSIDER MOST IMPORTANT

1.
2.
3.

PROOF OF INCOME

Please provide copies of the following supporting documents for each person living at this address, as applicable:

- Most recent federal tax return
- Latest paycheck stub
- Latest Social Security and/or pension benefit statement

Note: Due to the high volume of applications received, selection of participants is limited. Submission of an application does not guarantee participation or completion of all requests. Major structural and foundation problems will not be considered.

REFERRALS

Rebuilding Together Pittsburgh works in partnership with other housing assistance agencies to meet the needs of homeowners. These other agencies may be able to provide you with additional housing assistance. May we share your information with other agencies for possible additional assistance for you?

Please check on of the following boxes: I do I do not give Rebuilding Together Pittsburgh permission to release my information to other housing assistance agencies.

APPLICANT CERTIFICATION

I certify that the above information is true and correct to the best of my knowledge. I authorize Rebuilding Together Pittsburgh to verify income and assets as necessary to process this application. I realize that any repairs provided by Rebuilding Together Pittsburgh will be at no cost to me or to my family.

Homeowner Signature

Date

Mail completed application and proof of income to:

Rebuilding Together Pittsburgh

631 Iron City Drive
Pittsburgh, PA 15205
Or fax: 412-922-3729

Questions? Call 412-922-0953