



COMMUNITY FACILITY APPLICATION

945 W. Wilshire Blvd., Oklahoma City, OK 73116

Phone: 405.607.0464 • Fax: 405. 607. 0362

www.rebuildingtogetherokc.org

Rebuilding Together OKC is thrilled to launch the Community Facility Application! We hope that by providing our expertise in volunteer driven repairs to a chosen local advocate, your organization will have a strengthened base to serve neighbors in need. The project selection committee selects a community facility based on several factors: our mission, the number of applicants, facility need, our ability to complete required repairs, and the applicant's involvement. Scopes of work can range from painting and weatherization to electrical and accessibility modifications, but do not include major structural repair. Selected site visits assist in our ability to match volunteer skillset and resources available to address your facility's most critical needs. Please let us know if you have any questions or suggestions. We look forward to receiving your application. - The RTOKC Team

ELIGIBILITY CHECKLIST

- Located in the Oklahoma City metro area
- Registered community facility or nonprofit
- Own the facility OR have a two-year lease with management approval for repairs
- No plans to sell or break the lease of facility within the next two years
- Submittal of completed application with required documents

REQUIRED DOCUMENTS CHECKLIST

- Current budget
- Recent Form 990
- Property insurance
- Verification of facility ownership or lease and management approval for repairs

PROGRAM TIMELINE

Rebuilding Together OKC applicant eligibility is not determined by race, color, national origin, age, sexual orientation, sex, religion, familial status or disability.



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ELIGIBILITY REQUIREMENTS

- Located in the Oklahoma City metro area
- Registered community facility or 501(c)(3) nonprofit
- Own the facility OR have a two year lease with management approval for repairs
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- Submittal of completed application with required documents
- Organizations that are able to cover the cost of materials are given priority

SECTION 1.

Name of Organization:

Mailing Address:

City, State, Zip:

Phone:

Website:

Executive Director:

Social Networks/ list platform+handles:

SECTION 2.

Name of Facility (if different from above):

Facility Address:

City, State, Zip:

Facility Phone:

Contact at Facility:

SECTION 3.

Tell us about your mission:

Describe the demographic that you serve:

Explain type of services and number of individuals served annually:

SECTION 4.

Year facility was built:

Year moved into facility:

Approximate number of rooms:

Who owns the facility:

If not owned, please provide letter detailing management approval for repairs

List & describe your top repair priorities below (no major structural work)

1.

2.

3.

4.

Additional repairs you would like to see done:

SECTION 5.

Has Rebuilding Together OKC done work for your organization in the past?

If yes, when and at what facility?

Does your organization have the ability to collaborate with Rebuilding Together OKC regarding financial support of the project?

If your organization is unable to contribute these funds, please explain:

AGREEMENT

I/we certify that the above information is true and correct to the best of my/our knowledge. I/we realize that failure to provide all information requested could result in our application being invalid. I/we authorize you to check any references necessary to complete the processing of this application for receiving facility rehabilitation through Rebuilding Together OKC. I/we understand that submission of an application provides no guarantee that work will be performed nor creates any duty or obligation on RTOKC's behalf. I/we also understand that any information received will be kept confidential and will be used strictly for determining my/our eligibility for this program. I/we also grant permission to Rebuilding Together OKC, its employees and any of its volunteers to conduct site visits at my/our facility, to take photos and measurements, as necessary, and to examine in-person the "Repair Wish List" items to gauge the scope of work required. I/we understand that not cooperating with all RTOKC's policies and program requirements can result in termination of assistance. In light of the goals and purposes of the community service provided by RTOKC in organizing this repair and renovation program, I/we agree to release and hold RTOKC, its directors and officers, employees, agents, attorneys and volunteers harmless from any cause of action, claim or suit arising from, or in connection with, this application.

Signature, Executive Director

Date

REQUIRED DOCUMENTS

Please include copies of the following

- **Current budget**
- **Recent Form 990**
- **Property insurance**
- **Verification of facility ownership or lease and management approval for repairs**

SUBMIT COMPLETED APPLICATION + DOCUMENTS BY:

- **Email: contact@rebuildingtogetherokc.org**
- **Mail: 945 W. Wilshire Blvd., Oklahoma City, OK 73116**
- **Fax: 405.486.0776**

PROGRAM TIMELINE

Questions or suggestions? Call 405.607.0464

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