



HOMEOWNER APPLICATION

945 West Wilshire Blvd., Oklahoma City, OK 73116

Phone: 405.486.0776 • Fax: 405.486.0776

www.rebuildingtogetherokc.org

Dear Homeowner:

Thank you for your interest in Rebuilding Together Oklahoma City. Our mission is to repair homes, revitalize communities, and rebuild lives. Through the contributions of time, labor, materials, and funding from neighbors who care, we are able to provide repairs at no cost to qualifying homeowners. Acceptance into our program does not guarantee that any repairs will be made. Rebuilding Together Oklahoma City reserves the right to prioritize any repairs made. Our waiting list can be up to 1 year, with the exception of ADA Ramps.

- **55 years of age or older for most of our programs. Individuals under the age of 55 years are considered for specific programs.**
- **Live in Oklahoma County**
- **You must own and reside in your home.**
- **You must not owe any back property taxes**
- **The total combined gross income for all individuals living in the home must be counted.**
- **Proof of any and all income for each resident must be provided to Rebuilding Together Oklahoma City within 10 business days of submitting this application, with copies of all mandatory documents.**
- **The income standards range from at or below 80% to 50% of the Area Medium Income limits, dependent upon the funding sources available for the repairs. RT Oklahoma City will determine financial eligibility as it relates to repairs needed.**
- **If you are in doubt about any of the eligibility requirements, please submit the application for review and determination.**

DOCUMENTS CHECKLIST

- Copy of driver's license or birth certificate for all household members [REQUIRED]**
- Proof of income for all household members [REQUIRED]**
- DD214 for veterans**

***We are happy to make copies of required documents and return originals.**

HOMEOWNER RESOURCES

ORGANIZATION	PHONE NUMBER	NOTES
Oklahoma Healthy Aging Initiative	405.271.6424	Caregiver Training & Resources
Daily Living Centers	405.702.8640	Day Care & Respite Care
Metropolitan Better Living Center	405.525.3024	Day Care, Transport, & Meals
Neighborhood Services Organization	405.236.0413	Dental Clinic & Housing
Crossings Community Clinic	405.749.0800	Medical, Dental & Vision Clinic
Midwest City Operation Paintbrush	405.739.1009	Exterior Painting
Hope Chest Ministries	405.204.9108	Furniture & Household Goods
Valir PACE Services	405.609.3688	Home Health Care
City of Edmond	405.359.4694	Home Repairs
City of Midwest City	405.739.1216	Home Repairs
Indian Health Services	405.951.3782	Home Repairs
Serve More	405.735.3060	Home Repairs
Capitol View in Action	405.427.9446	Home Repairs
Restore OKC	405.642.0886	Home Repairs *Northeast OKC
Legal Aid Services of Oklahoma	405.421.1641	Legal Services
Senior Law Resource Center	405.528.0858	Legal Services
NewView	405.232.4644	Low Vision Clinic
Senior Farmer's Market	405.521.3444	Nutrition Program
Pet Food Bank & Pantry	405.316.3663	Pet Food Assistance
2-1-1 Oklahoma	2.1.1	Resource Helpline
Areawide Aging Agency	405.942.8500	Resource Helpline
The Gatekeeper Program	405.713.1893	Resource Helpline
Sunbeam Family Services	405.528.7721	Respite Care & Grandchildren
EMBARC	405.235.7433	Transportation
Retired Senior Volunteer Program	405.605.3110	Transportation
Shepherd of Love Ministries	405.348.5195	Utilities
Department of Human Services	405.522.5818	Utilities
Salvation Army	405.246.1060	Utilities & Summer Cooling
Community Action Agency	405.232.0199	Weatherization
OG&E	405.272.9741	Weatherization
OKC SNI Home Assist. Repair	405.297.2846	Home Repair



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HOMEOWNER INFORMATION

Name of Homeowner:		Phone:	Age:
Name of Homeowner:		Phone:	Age:
Address:		City:	Zip:
Emergency contact name:		Emergency contact phone:	
Relationship to emergency contact:		Email:	
Do you own other property: Y N *If yes, what type			
Is a translator needed? Y N *If yes, what language?			
Tell us about yourself:			
How would repairs provided make a difference?			
How did you hear about Rebuilding Together?			
Do you plan to remain living in your home? Y N			
Is anyone in your family a Mason or Eastern Star Member? Y N			
Is anyone in the home a Veteran or are you a widow/widower of a Veteran? Y N			

HOME INFORMATION

Type of House (Circle Below) :

Single Family Multi-Family Condo Mobile Home Manufactured Housing

Year Built:	Move In Year:
Monthly Mortgage Payment:	Unit Insured? Y N
Mortgage Current? Y N	Property Taxes Current? Y N

HOUSEHOLD MEMBERS

PROOF OF INCOME EXAMPLES:

- A copy of most recent benefit verification letter
- A copy of most recent 30 day pay stub.
 - *The pay stub must include the year to date income, company name, and employee name*

Full Name	Date of Birth	Disabled Y or N	Gross Monthly Income	Income Source	Proof of Income Included*

TOTAL HOUSEHOLD MONTHLY INCOME: \$_____

***We are happy to make copies of required documents and return originals.**

DEMOGRAPHICS

What is your gender or sex? _____

What is your race? Please check all that apply.

American Indian or Alaskan Native	Asian	Black or African American	Native Hawaiian or Pacific Islander	White
Other	I wish to decline a response			

What is your ethnicity?

Hispanic or Latino/a/x

Not Hispanic or Latino/a/x

I wish to decline a response

REPAIRS

- Roof** **Repair or Replace?** _____
- Window** **Repair or Replace?** _____
- Bathroom Renovation**
- ADA Ramp**

Safety modifications:

Please list other repairs needed:

- ADA Toilet**
- Grab Bars**
- Handrails**
- Shower Chair**

Please Read the Following Information Carefully

My signature below certifies that the information provided above is true and complete to the best of my knowledge. I have read the information provided by Rebuilding Together Oklahoma City and have a basic understanding of the program, its process and the qualifications I must meet to participate. I understand that funds used to repair my home may include funding from the Areawide Aging Agency by way of a Grant from the Masonic Charity Foundation of Oklahoma. I give Rebuilding Together Oklahoma City staff or volunteers my permission to inspect my home for purposes of project selection and/or repair.

I also grant Rebuilding Together Oklahoma City permission to take or have taken photographs and film, including television, of my home. I consent and authorize Rebuilding Together Oklahoma City, its partners, funders, advertising agencies, news media interested in Rebuilding Together Oklahoma City and its work to use and reproduce the photographs and films and to circulate and publicize the same by all means including, without limiting the generality of the foregoing, newspapers, television media, brochures, pamphlets, instructional materials, books and clinical material for the primary purpose of promoting and aiding its programs and its work.

Signature of Homeowner[s]:

Date:

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***This is an Equal
Opportunity Program.
Discrimination is
prohibited by law.***

