



Request for **FREE** HomeRepairs **2017-2018** Application

RebuildingTogetherAlex.org

Will your home be next? Applying is simple. Fill out and return this application and we will contact you! Or, you can call us at **703.836.1021** to learn more.

CONTACT INFORMATION

Name of Homeowner(s): _____

Street Address: _____

Date of Birth(s): _____

Home Phone: _____

Zip Code: _____

Other Phone: _____

TYPE OF WORK

Please check the general types of repairs needed in your home.
(We do not guarantee every item will be repaired.)

- | | |
|--|--|
| <input type="checkbox"/> Accessibility | <input type="checkbox"/> Roof |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Safety Concerns |
| <input type="checkbox"/> Heating/Cooling | <input type="checkbox"/> Stairways |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Other _____ | |
| _____ | |
| _____ | |
| _____ | |
| _____ | |

Do you have an active roof leak?

Yes No

Do you have an active plumbing leak?

Yes No

Have we performed work on your home before?

Yes No

If yes when: _____

Circle BOTH answers that best describes you and your TOTAL household:

Number of people living in home	1	2	3	4	5	6	7	8
Household Income (less than)	\$61,850	\$70,650	\$79,450	\$88,250	\$95,350	\$102,400	\$109,450	\$116,500

**To be considered, apply by
December 31st!**

Please mail your application to:
Rebuilding Together Alexandria
700 Princess Street, Suite 206
Alexandria, VA 22314

*La solicitud en Español está disponible por www.RebuildingTogetherAlex.org (Elige "Apply")