

**FR** THE **STRUGGLE** 

### ELDER RESPONSE INITIATIVE CRITICAL HOME REPAIR PROGRAM

#### THE PROCESS:

#### **Step 1: Submit Your Application**

To be considered for FTS's Elder Response Initiative Critical Home Repair program you must submit a completed application along with supporting documents for pre-approval. Supporting documents include:

- Proof of income for all household residents 18+ (Two months of recent paystubs or current year's SSI benefits letter and/or retirement benefits letter)
- Two months of your most recent bank statements
- Current Homeowner's Declarations Page
- Current mortgage statement (if applicable)
- Signed declaration that you will continue to live in the home for a minimum of five (5) years.
- Annual income for one person household at or less than \$35,400
- Annual income for two person household at or less than \$39,000
- 62 years of age or older
- Please note: Some critical home repairs may take multiple days to complete. Eligible participants are responsible for any necessary alternative housing arrangements during critical home repairs that require multiple days to complete.

An Elder Response Initiative Facilitator will help you through the process of preparing your application and supporting documents and will submit the application on your behalf and work with you throughout the process. For more information, please call 704-800-6628.

#### **Step 2. Application Assessment**

Once your application and supporting documents are received, your application will be assessed to ensure your household meets all criteria necessary for your participation in FTS's Elder Response Initiative Critical Home Repair Program. If all criteria are met then you are considered pre-approved.

#### Step 3. Home Visit

An FTS representative will conduct a home visit to assess your critical repairs needed and to discuss the details of the program, expectations, and answer any questions or concerns. At this meeting, you will also sign a release and waiver form and any additional contracts or forms required by the licensed general contractor performing work on your home. You will also receive a tentative timeline regarding the construction-repair schedule for your home.

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#### **Step 4. Construction Home Visit**

Two licensed general contractors will come to your home to conduct a physical assessment of the most critical repairs of your home.

#### Step 5. Repairs

Upon FTS's approval of the costs to perform critical repairs on your home, such repair work will begin.

#### Step 6. Follow Up Visit

A FTS Critical Home Repair representative will do a follow up visit to discuss your repairs and to obtain a statement from you regarding the repairs and how they have helped your use and enjoyment of your home.



#### **Critical Home Repair Application**

#### PRIMARY APPLICANT INFORMATION Military Veteran/Active duty? Disabled?

| Last Name             | First Name                          |              |                   |                | MI        |  |
|-----------------------|-------------------------------------|--------------|-------------------|----------------|-----------|--|
| Address               |                                     |              |                   |                |           |  |
| City                  |                                     |              | State             |                | Zip       |  |
| //<br>Date of Birth   | Primary Phone Number                |              |                   |                |           |  |
| Marital Status:       | Married                             | Separated    | Widowed           | Unmarried      |           |  |
| Email address         |                                     |              |                   |                |           |  |
| SECONDARY APP         | LICANT INFOR                        | MATION M     | ilitary Veteran/. | Active duty? 🛛 | Disabled? |  |
| Last Name             | First Name                          |              |                   |                | MI        |  |
| //<br>Date of Birth   | -                                   | Primary Pho  | ne Number         |                |           |  |
| HOME INFORMAT         | ION                                 |              |                   |                |           |  |
| Type of House:        | Single Family                       | / Manufact   | ured Cond         | do Multi-fa    | mily      |  |
| Year built:           | Year moved in: Monthly Mortgage: \$ |              |                   |                |           |  |
| Monthly Utility Bills | : \$                                |              |                   |                |           |  |
| Property Taxes Cu     | rrent? 2 Yes 2 I                    | No Mor       | tgage current?    | ??Yes ?No      |           |  |
| Active Homeowner      | 's Insurance Pol                    | icy? 2 Yes 2 | No                |                |           |  |

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#### **HOUSEHOLD INFORMATION**

| Date of Birth | Relationship to Applicant | Employer |
|---------------|---------------------------|----------|
|               |                           |          |
|               |                           |          |
|               |                           |          |
|               |                           |          |
|               |                           |          |

#### **HOUSEHOLD REPAIRS**

Please check the items below that need repairs:

PloorsCeiling/RoofElectricalPlumbing leakNo hot water

No heat Accessibility issues (such as railings, ramps, & bathtub)

Please share what these repairs will help your quality of life.

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#### (Signature of Additional Applicants/Residents) Date

(Signature of Applicant)

My signature indicates that I have read, understand, and agree to all of the terms above and that I am of legal age and am freely signing this agreement. My signature further indicates that I declare and swear that if I receive critical home repairs, I will reside in my home for a minimum of five (5) years upon completion of such repairs. If I sell my home prior to five (5) years after the date of completion, I understand and agree that I shall reimburse For The Struggle, Inc. for the costs of repairs.

My signature further indicates that all of the information for the duration of the application process provided to For The Struggle, Inc. is true and accurate to the best of my knowledge. I understand that false and/or misleading information may be grounds for rejection of my application and termination of my participation in For The Struggle, Inc.'s Elder Response Initiative Program at any time without explanation. I further understand that my completion of this application is in no way a guarantee that I will receive assistance from For The Struggle, Inc.

My signature further indicates that I declare and swear that if I receive critical home repairs, I will reside in my home for a minimum of five (5) years upon completion of such repairs. If I sell my home prior to five (5) years after the date of completion, I understand and agree that I shall reimburse For The Struggle, Inc. for the costs of repairs.

Date