



## Charlotte Regional Realtor® Association Housing Opportunity Foundation Homeowner/Project Application

Realtors® Care Day ("RCD") is designed to assist homeowners with exterior home repairs, and adaptive and safety modifications for the elderly or disabled. All applicants must fill out an application form and provide required documentation by Feb. 15, 2015 to be considered for a repair project. (A list of all necessary documents is on Page 2.) Failure to provide the necessary documentation will eliminate your application from consideration. If your house is selected for the project, there is no charge for work completed. **NOTE: Your application, including your financial information, which shall remain confidential, will be retained in our office for a total of four (4) months following RCD. If you have not requested a return of your application and financial information by the end of the four (4) month period, all documents will be destroyed.**

\*\*\*Both pages of this document must be completed.\*\*\*

Name of homeowner(s): \_\_\_\_\_

Address, City, State Zip: \_\_\_\_\_

Mailing Address (if different from property address): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

What is your preferred method of contact? ☐ Home Phone ☐ Cell Phone ☐ Email

List names and ages of residents in house: \_\_\_\_\_

Is homeowner or other residents in the house disabled? ☐ Yes ☐ No

If yes, please list special needs: \_\_\_\_\_

**Please review the following, complete the requested information and sign to indicate your acceptance:**

- ✓ *I, or a person appointed by me, will be home on the selected project date while repairs are being done.*
- ✓ *I confirm that any able residents of the home will assist volunteers in working on the project.*
- ✓ *I certify that all information included on this form is true and correct.*
- ✓ *I own and live in the property at the address given and have homeowner's insurance.*
- ✓ *I intend to remain in my home for at least one year, barring illness or death.*
- ✓ *I am not in financial trouble or at risk of losing my home.*
- ✓ *The combined annual income of residents (homeowner(s) and any additional occupant(s) of the property), is as follows: (Please check one.)*

☐ Less than \$20,000 ☐ \$20,001-\$30,000 ☐ \$30,001-\$40,000 ☐ \$40,001-\$50,000 ☐ \$50,001-\$60,000 ☐ \$60,001 or more

Are you employed? ☐ Yes ☐ No If yes, who is your employer? \_\_\_\_\_

Are you being recommended by a Realtor® for this project? ☐ Yes ☐ No

If yes, what is your relationship? \_\_\_\_\_

**Signature of homeowner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(If there is more than one principal owner, all must sign this form)

*If this form is prepared by someone other than the homeowner or if assistance is given to the homeowner, please complete the following: Is the homeowner aware of this application?* \_\_\_\_\_

Name of person preparing or assisting with application: \_\_\_\_\_

Relation to homeowner: \_\_\_\_\_ Phone: \_\_\_\_\_



## Homeowner/Project Application (continued)

List the four most important *exterior* home repairs you need:  
(For example: doors, fencing, gutters, painting, porch/patio, ramp, roof, steps, yard work, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Required documentation to be included with application:**

- ☐ Proof of ownership: deed or mortgage
- ☐ Proof of residency: driver's license or acceptable identification card
- ☐ Proof of financial stability: statement of good standing from lender or copy of current mortgage statement showing no past due amount
- ☐ Proof of insurance: copy of current homeowner's insurance policy
- ☐ Proof of household income: latest federal and state tax return, three recent paycheck stubs or current Social Security statement, if applicable

After the Charlotte Regional Realtor® Association Housing Opportunity Foundation reviews your application and agrees that it meets the stated requirements you will be contacted for a personal interview and evaluation of the requested repairs. After all applications have been received and considered, you will be notified whether you will be a recipient of 2015 Realtors® Care Day repairs. If you have questions about the application or process, please e-mail the foundation staff at [crrafoundation@carolinahome.com](mailto:crrafoundation@carolinahome.com) or call 704-940-3148.

**Mail, email or fax completed application with documentation to the Housing Opportunity Foundation**

Mail: 1201 Greenwood Cliff, Ste. 200, Charlotte, NC 28204  
Email: [crrafoundation@carolinahome.com](mailto:crrafoundation@carolinahome.com)  
Fax: 704-338-9401

**For office use only:**

Date rcvd: \_\_\_\_\_ HO verified: ☐ yes ☐ no County: \_\_\_\_\_ All docs rcvd: ☐ yes ☐ no