



## Application for Home Repair

### How to Apply:

1. Review our eligibility requirements to see if you qualify.
2. Complete the application below.

Need assistance? Email [rwatkins@unitedwayck.org](mailto:rwatkins@unitedwayck.org) or call 270.737.6608

### ELIGIBILITY REQUIREMENTS:

1. You must currently live in and **own** a single-family residence in Hardin County and intend to live in this home for at least the next two years.
2. You are a low income individual, have disabilities, and/or a veteran of the U.S. Armed Forces (or their surviving spouse).
3. Your total household income (from all sources) for the previous calendar year must not exceed:  
Household size (monthly / yearly income):

**#per household/ monthly & annual income**

- **1:** \$2,683 / \$32,200
- **2:** \$3,629 / \$43,550
- **3:** \$4,575 / \$54,900
- **4:** \$5,521 / \$66,250

NOTE: Homes will be considered based on the availability of volunteers, materials, and scope of work.

## What We Do:

Home improvements are limited to exterior painting and related repairs. Work may include:

- Exterior Painting
- Caulking/Weather-stripping
- Repair or Partial Replacement of Damaged Siding, Fascia, or Trim
- Accessibility Ramp
- Railings Repair
- Stair/Walkway Repair
- Windows/Doors Repair
- Gutter Repair
- Deck/Porch Repair
- Landscaping Renewal
- Roof Patching

The purpose of this work is to restore the character of the home and the surrounding neighborhood and to improve the home's safety and security. Volunteers do not provide any interior refurbishment, major electrical work, or plumbing services. This is not a guarantee of service.

Unless you permit us to share contact information with other non-profit aid organizations, your application will be kept confidential and will be used solely for the purpose of evaluating the acceptability of your home for repairs or refurbishment by **Name to Be Determined**

**If you have questions regarding the application process or your eligibility, please call at 270.737.6608**

## Homeowner Application

**Applicant #1 Name** *(Required)*

First

Last

**Applicant #1 DOB** *(Required)*

**Applicant #2 Name**

First

Last

**Applicant #2 DOB**

**Address** *(Required)*

Street Address

Address Line 2

City

State / Province / Region

ZIP / Postal Code

Country

**County**

**Neighborhood**

**Home Phone** *(Required)*

**Alt Phone**

**Email**

**How did you hear about this program?**

**Disabled Individual in Home** *(Required)*

- Yes, over 60
- Yes, under 60/Medical Statement attached
- No

**Medical Statement**

No file chosen

Max. file size: 300 MB.

**Are you a Veteran of The United States Armed Forces or Surviving Spouse?** *(Required)*

- Yes
- No

**Number of Children/Dependents Living in Your Home** *(Required)*

\*

**Ages of Children/Dependents Living in Your Home**

**Number of Renters, Roommates, etc. Living in Your Home** *(Required)*

**Income: Total Gross Monthly Income** *(Required)*

Social Security (all household members)+Salaries+Rental Income+Other income= Total Gross Monthly Income

**Current Occupation(s) and Employer(s):**

**If Retired or Disabled, Former Occupation(s):**

**Demographic** *(optional)*

**Which Gender Do You Most Identify With:** *(optional)*

- Man
- Woman
- Other / Choose Not to Answer

**Size of Home** *(Required)*

- 1 Story
- 1 1/2 Story
- 2 Story
- 2 1/2 Story

**Year of Purchase**

**Year Built**

**Last Painted**

**Square Feet of Home**

**House Side Exterior** *(Required)*

- Wood
- Brick
- Shakes
- Stucco
- Asbestos Slate
- Aluminum
- Vinyl

**House Trim Exterior** *(Required)*

- Wood
- Aluminum
- Vinyl

**Garage Siding Exterior**

- Wood
- Aluminum
- Vinyl

**Garage Trim Exterior**

- Wood
- Aluminum
- Vinyl



**Parts of house and garage that need painting** *(Required)*

- House Siding
- House Trim
- Doors & Windows
- Garage Siding
- Garage Trim
- Garage Doors/Windows
- Other

**If "other" please describe**

**Repairs needed**

- Caulking/Weather-stripping
- Repair or partial replacement of damaged siding, fascia, or trim
- Accessibility Ramp Repair
- Railing Repair
- Stair/Walkway Repair
- Windows/Doors Repair
- Gutter Repair
- Deck/Porch Repair
- Landscaping Renewal
- Other

**Repairs needed on exterior:**

*HOMEOWNER AGREEMENT (PLEASE READ CAREFULLY) I hereby certify that I do not plan or intend to sell my home within the next two years. I certify that I have homeowner's insurance. I confirm that, except for conditions which may be described in this application, my home and the surrounding area is a safe place for volunteers. If requested, I agree to provide financial records to verify the income listed in this application, ownership of this property and insurance. I also understand that, because this is a volunteer organization dependent on donated services, materials and funds, **UWCK** reserves the right to revoke acceptance of any home into its program for any reason at any time. I also confirm that any physically able person(s) residing in my home or visiting for the project day will work alongside **UWCK** volunteers. If this waiver and release of claims is found ineffective by a court of law, then I waive all claims against **UWCK** and everyone associated with it, for property damage or personal injury to the extent that those claims are covered by any health or property insurance that I may have. I understand that the people who may work on my home are unpaid volunteers; that few (if any) of these volunteers are skilled in the building trades; and that **UWCK** MAKES NO WARRANTIES OR REPRESENTATIONS, EXPRESS OR IMPLIED, ABOUT ANY OF THE MATERIAL(S) USED OR WORK DONE BY ANYONE ON MY HOUSE. I hereby release **UWCK**, and all associated with it, from all liability arising from negligence for any personal injury or property damage arising out of or relating to the work done on my house. I also grant **UWCK**, unrestricted permission to use, copy, reproduce, alter, display, distribute, publish, and/or exhibit any pictures, video or narrative in which I may be included through any means of communication whatsoever for any lawful purpose whatsoever. I further release and discharge **UWCK**, from any and all claims arising out of such use or activity. In no event will **UWCK** be liable for any incidental or consequential.*

*Please note that, to assess your home's suitability for our program, we reserve the right to inspect the exterior of*

each home and the property surrounding it. Your signature below gives us permission to inspect the exterior of your home and surrounding property.

**I agree to the above Homeowner Agreement** *(Required)*

Agreed

**Signature of Homeowner #1** *(Required)*

**Today's Date** *(Required)*

**Signature of Homeowner #2**

**Today's Date**

**If you have assisted the homeowner(s) with applying please complete below:**

**Daytime Phone #**

**Organization Name**





**Email**

**IN COMPLETION OF THIS DOCUMENT, I/WE HEREBY CONFIRM THAT ALL  
INFORMATION IN THIS APPLICATION IS CORRECT AND THAT I/WE UNDERSTAND  
AND AGREE TO THE STATED TERMS AND CONDITIONS *(Required)***

Agreed

**Submit**

## Contact Us

 United Way of Central Kentucky  
 270-737-6608  [info@unitedwayck.org](mailto:info@unitedwayck.org)  
 604 N Main St. Elizabethtown, KY 42701

United Way of  
Central Kentucky

