

INCOME

List each source of income and the amount for each person listed on page 1. Include full-time and part-time employment, social security or pension income, unemployment benefits, child support, alimony, TANF, and any other income. List **gross monthly income** (before taxes and deductions).

NAME	LIST THE SOURCE OF THE INCOME (SS, SSI, Pension, Employment, etc.)	ADDRESS OF EMPLOYER OR INCOME PROVIDER	MONTHLY INCOME

REPAIRS REQUESTED

Please list the repair items needed at the home. Be as specific as possible. _____

Attest: I own and live in the property at the address given and am able to provide documents showing ownership. I certify that all property taxes have been paid on this property. I expect to live in the home for at least two years. Should any changes occur, notification will be made to Renovation Alliance.

Signature of Homeowner(s)

Date

Signature of Homeowner(s)

Date

We understand it can be frustrating to wait, but please refrain from calling our office for status updates. This slows down the process for you and others in need. We have a very small staff and are working to complete repairs as quickly and efficiently as possible. Please only contact the office if there is a change in your information. To do so, email us at info@renovateall.org or call the office.

Return completed applications to:

Renovation Alliance
P.O. Box 4532
Roanoke, VA 24015
Phone (540) 400-0959
Email info@RenovateAll.org