



*"Better Lives through Better Homes"*

Arizona Service Project  
PO Box 6565  
Goodyear, AZ 85338  
[azserviceproject@gmail.com](mailto:azserviceproject@gmail.com)

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### **How our program works:**

Arizona Service Project completes home repairs for low-income residents of Avondale, Goodyear and surrounding Arizona communities through volunteer labor. Led by the AzSP team, local volunteers will execute home repairs in order to make homes safer and healthier to live and learn in. Our home repairs are free of charge to the homeowner, and completed by non-professional, volunteer labor.

### **Types of repairs that qualify:**

Typical repairs may include, but are not limited to: structural foundation repairs, underpinning installation, siding and exterior weatherization, wall and floor repair or replacement, roof repair, porches and wheelchair ramps, and additional accessibility related modifications. Please list the repair(s) needed along with a brief description of each on the back of this application.

### **Next steps:**

If you, or someone you know is in need of home repair:

**Step 1:** Complete this application and return it to PO box listed on the next page.

**Step 2:** The AzSP team will review your application, if additional information is needed someone may contact you to schedule a time to come by your home to do an in-person evaluation.

**Step 3:** All applicants will be updated regarding whether your home was selected for repairs this season by January. Your application will be kept on file for 3 years, and if AzSP is not able to assist you this season you will be considered for future repair seasons.

**Step 4:** If your home is selected for the current season, the AzSP team will contact you in order to complete the necessary paperwork and documentation.

**Step 5:** If your home is selected for the current season, volunteers will complete the agreed upon repairs free of charge to you. Volunteers will be on site anywhere from 1 to 5 days depending on the project scope.

### **Questions?**

Please feel free to contact us with any questions at [azserviceproject@gmail.com](mailto:azserviceproject@gmail.com) or by phone at (623) 252-5505 and someone will get back to you shortly.



# AzSP

## Application for Home Repair

Return your completed application to:  
 Arizona Service Project, PO Box 6565 Goodyear, AZ 85338

### GENERAL INFORMATION

Name: \_\_\_\_\_ County: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 (Your mailing address or PO Box)

\_\_\_\_\_  
 \_\_\_\_\_  
 (911 address of your home. DO NOT USE PO Box)

\_\_\_\_\_  
 (City) (State) (Zip Code)

\_\_\_\_\_  
 (City) (State) (Zip Code)

E-mail address: \_\_\_\_\_

Cell / Primary phone: (\_\_\_\_\_) \_\_\_\_\_

Other phone: (\_\_\_\_\_) \_\_\_\_\_

Directions to your home: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you applied to Arizona Service Project before? (circle one) YES NO If so, when? \_\_\_\_\_

Has Arizona Service Project ever worked on your home? YES NO If so, when? \_\_\_\_\_

If an organization referred you to Arizona Service Project, please list their name: \_\_\_\_\_

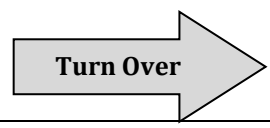
Are you willing to let Arizona Service Project share this application with other home repair agencies? YES NO

### THOSE IN YOUR HOUSEHOLD

**Please list everyone who lives in your home at least some of the time, including yourself:**

Name	Year Born	Gender (M/F)	Disabled? (Y/N)	Veteran? (Y/N)

**Total household income: \$ \_\_\_\_\_ per month.**  
 (Include all sources of income, including Social Security, SSI, alimony, and other benefits)



FOR OFFICE USE ONLY			
Date of IHV: _____	Visited by: _____	(If not visited, write N/A & send letter)	
Selected? Y / N	If no, why? _____		
Call needed? Y / N	Letter needed? Y / N	Date of call/letter: _____	
Referral source notified of status? Y / N	Date: _____	How notified? _____	

**INFORMATION ABOUT YOUR HOME**

Do you (please circle): Rent Rent to Own Have a Mortgage Own Do you own the land? YES NO

If you rent, give landlord’s name & phone: \_\_\_\_\_

Was your home damaged by any of the following? (circle any that apply) FIRE FLOOD STORM

What year was the home built? \_\_\_\_\_ How long have you lived in this home? \_\_\_\_\_

Type of home: (circle one) MOBILE HOME/TRAILER HOUSE OTHER

Number of rooms in home: Bedrooms \_\_\_\_\_ Bathrooms \_\_\_\_\_ Total Rooms \_\_\_\_\_

Does your home have electricity? YES NO Does your home have running water? YES No

**REPAIRS REQUESTED**

Which item(s) in your home are in need of repair? Please briefly describe the need for each repair.

- \_\_\_\_\_ Foundation \_\_\_\_\_
- \_\_\_\_\_ Underpinning \_\_\_\_\_
- \_\_\_\_\_ Siding / Exterior Walls \_\_\_\_\_
- \_\_\_\_\_ Floors \_\_\_\_\_
- \_\_\_\_\_ Insulation \_\_\_\_\_
- \_\_\_\_\_ Inside Walls / Ceilings \_\_\_\_\_
- \_\_\_\_\_ Roof \_\_\_\_\_
- \_\_\_\_\_ Windows / Doors \_\_\_\_\_
- \_\_\_\_\_ Porch or Steps \_\_\_\_\_
- \_\_\_\_\_ Wheelchair Ramp \_\_\_\_\_
- \_\_\_\_\_ Handicap Modifications \_\_\_\_\_
- \_\_\_\_\_ Electrical / Plumbing \_\_\_\_\_
- \_\_\_\_\_ Room Addition Needed \_\_\_\_\_
- \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Comments or Additional Information:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VERIFICATION**

To the best of my knowledge, I certify that the information in this application is true and correct, and that the home listed is my primary residence. I understand that Arizona Service Project is a non-profit that is only able to assist a small percentage of those who apply. If selected, I may be asked to show documents that verify this information.

Signature \_\_\_\_\_ Date \_\_\_\_\_