



P.O. Box 3823
Long Beach, CA 90803
(562) 490-3802
www.rtlb.org

Community Building Application

APPLICANT INFORMATION		
NAME OF ORGANIZATION		
ADDRESS/CITY/ZIP		
EXECUTIVE DIRECTOR OR BOARD CHAIR		
CONTACT PERSON (IF DIFFERENT)		
PHONE	FAX	EMAIL
MISSION/PURPOSE OF ORGANIZATION		
PRIMARY SOURCE(S) OF FUNDING		
ANNUAL OPERATING BUDGET		

REPAIR WISH LIST: PLEASE LIST THE FOUR MOST IMPORTANT REPAIRS NEEDED	
1.	
2.	
3.	
4.	

FURTHER INFORMATION ABOUT YOU

DESCRIBE HOW THESE REPAIRS WILL IMPACT YOUR CLIENTS

DESCRIBE HOW THESE REPAIRS WILL IMPACT THE COMMUNITY

WOULD YOUR STAFF AND/OR CLIENTS BE AVAILABLE TO HELP VOLUNTEERS WITH SITE REPAIRS ON WORK-DAY?

YES ____ NO ____
IF YES, ABOUT HOW MANY? _____

WOULD THE FACILITY BE ABLE TO ASSIST IN PROVIDING ANY OF THE FOLLOWING ON WORK-DAY? (YES OR NO)

FOOD ____ BEVERAGES ____
MATERIALS ____ SKILLED LABOR ____

PLEASE INCLUDE ANY OTHER INFORMATION YOU FEEL IS RELEVANT TO THE SELECTION OF THIS SITE

EXECUTIVE DIRECTOR OR BOARD CHAIR (SIGNATURE)

FURTHER INFORMATION FOR YOU

PLEASE RETURN THIS APPLICATION ALONG WITH A COPY OF YOUR AGENCY'S IRS DETERMINATION LETTER TO THE FOLLOWING ADDRESS:

REBUILDING TOGETHER
SITE SELECTION COMMITTEE
P.O. BOX 3823
LONG BEACH, CA 90803

**APPLICATION DEADLINES:
JANUARY 31 FOR APRIL REPAIRS; JULY 15 FOR OCTOBER REPAIRS**

NON-PROFIT AGREEMENT

If selected as a recipient, I give permission for Rebuilding Together Long Beach and its volunteers to perform repairs and improvements at

I understand that the repairs and improvements will be performed free of charge, and Rebuilding Together Long Beach and its volunteers disclaim all warranties, expressed or implied, concerning the repairs. The repairs and improvements will be performed by volunteers, some or all of whom may be unskilled.

If selected, the general plan for repairs and improvements will be explained to me. I give Rebuilding Together Long Beach and its volunteers full authority to determine the extent and types of repairs and improvements to be performed, even if they should fail to notify me of any changes from the original plan. I understand that Rebuilding Together Long Beach is a volunteer initiative, and that promises cannot be made as to the specific work that will be done.

If selected, I agree that I will cooperate with the House Captain and teams of volunteers. I will assure that all able bodied personnel of my organization will participate or that they will be absent during repairs.

In consideration of the repairs and improvements, I further hold Rebuilding Together Long Beach, its officers, directors, agents, donors, volunteers, and other affiliates, collectively or individually, harmless from any claims and liabilities arising at any time as a result of the repairs, including, with limitation, any rights or causes of action resulting from personal injury or death, damage to my property, directly or indirectly arising from any improperly performed repairs or improvements or defects in materials or workmanship.

No inducements or promises have been made to me to secure my signature to this release, other than the intention of Rebuilding Together Long Beach to perform the repairs and improvements.

Signed this _____ day of _____, 20 ____

Director,

Witnessed by