

# **Love Thy Neighbor**

**Matthew 22:39** 

We are now taking applications for the Love Thy Neighbor program. The Love Thy Neighbor program is a community home repair service provided by the local church body. The

purpose of this program is to improve local houses for people who have no other means by which to make the improvements or repairs.

Love Thy Neighbor will take place the week of **June 2 - 6, 2024**. Volunteers will work on homes Monday through Thursday. Wednesday will be a half-day of work, and the remainder of the day will be designated for a community fun day. Everyone in the community will be invited to join us at the City Park for a meal, yard games, and pool access.

### Who is Eligible?

- ✓ Residents who are unable to do the work themselves due to physical and/or financial situations
- ✓ Residents who have no other means of getting the work completed
- ✓ Residents who can provide an environment that will be socially and physically safe for all volunteers.

Applications will be reviewed on a first come first serve basis. To be eligible for consideration please return applications ASAP. Applications are due **March 1**. Homeowners will be notified by mid-May if their home has been chosen by the Love Thy Neighbor committee.

- ✓ Love Thy Neighbor can only assist with EXTERIOR WORK ONLY.
- ✓ Love Thy Neighbor <u>CANNOT</u> work on rental houses.

### Return application to:

- 1. First Baptist Church office (3rd and MacArthur use 3rd street entrance): M-Th, 8:00-4:00.
- 2. Edward Jones Office, 907 S. Pershing: M-F, 8:00-5:00
- 3. New Harmony Church, 5841 Hwy 32 West: M-Th, 9:00-4:00
- 4. Mail to: Love Thy Neighbor, P.O. Box 732, Salem MO 65560



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Community home repair service provided by the Local Church Body

Only homeowners are eligible to apply

#### Please print the following information:

| Your Name                                     | Day Phone #            |                      |                                    |
|---|------------------------|----------------------|------------------------------------|
| nysical Address: Mailing address:             |                        |                      |                                    |
| If your home is difficult to find, pleas      |                        |                      |                                    |
| Do you own your home? Yes No                  | Cell Phon              | e#                   |                                    |
| How did you hear of Love Thy Neighbor?        |                        |                      |                                    |
| How many people live in your home?            | Your date o            | f birth:             |                                    |
| Marital Status: Single Married _              |                        |                      |                                    |
| Are you a veteran?                            | Are you dis            | abled?               |                                    |
| Do you own a dog? Yes No If Yes               | s: How many?           |                      |                                    |
| Please list the breed of dog(s):              | ·                      |                      |                                    |
| Are you involved in a local church? Yes_      | _ No If yes, v         | vhat church?         |                                    |
| Have you ever been convicted of a felony      | •                      |                      |                                    |
| assistance.) Yes No If yes, please            | explain:               |                      |                                    |
| Discourse and advantage of conditions and     |                        |                      |                                    |
| Please select what type of work you need      | -                      |                      | noire Minor Cidina                 |
| Gutter maintenance<br>Brush or Tree removal   |                        |                      | pairs Minor Siding ep Construction |
| Lawn or other yard repairs                    | roicii/Step Nepaii     |                      | air ramp construction/repail       |
| Other (describe)                              |                        |                      | an ramp construction/repair        |
|   |                        |                      |                                    |
| Please provide more details about the wo      | rk listed above:       |                      |                                    |
|   |                        |                      |                                    |
|   |                        |                      |                                    |
|   |                        |                      |                                    |
|   |                        |                      |                                    |
| T-Shirt Sizes of all household members cu     | urrently living with y | ou: (Ex. Adult Med,  | Youth Sm)                          |
|   |                        | <del> </del>         |                                    |
| If any line bloom link way to be an accompany | :                      |                      |                                    |
| If applicable please list your homeowners     | · ·                    |                      |                                    |
| Company                                       | Policy #               |                      |                                    |
| Please put "x" by the income range that b     | est describes vour     | household's total a  | nnual income                       |
| Income Range:                                 | rest describes your    | nouscrioid's total a | inidal income.                     |
| \$0 through \$14,700                          | \$24,901 through       | \$30,000             |                                    |
| \$14,701 through \$19,800                     | \$30,001 through       |                      |                                    |
| \$19,801 through \$24,900                     | \$35,101 through       |                      |                                    |
| . ,   | . ,                    | · ,                  |                                    |
| Please list the areas of employment/incom     | ne of the people liv   | ing in the household | d below:                           |

Please note: Volunteers **CANNOT** do electrical, plumbing, heating work, interior work, or paint over 2 stories (28) ft. high. When an assessment is done of your project many variables are considered to determine the viability of the project. Please fill out as much of the application as possible. Completion of the application does not guarantee you will be chosen. Homeowners will be notified by mid-May if chosen to schedule a more thorough inspection.