



Christmas in October

Rebuilding Houses, Lives and Neighborhoods since 1984

P.O. Box 32108, Kansas City, MO 64171
816.531.6443 www.christmasinOctober.org

Pre-Qualified by:

Group Name:

Neighborhood:

Hickman Mills

Homeownership Verified:

SPW

2024 Resident Application

To qualify for the Christmas in October program, you must:

- (1) Own only one residence (the home in which you currently live).
- (2) Lack the finances or resources to have the repairs completed.

\$99,000

In addition, you must meet ONE of the following 3 criteria:

- (1) Be age 62 or older.
- (2) Have a physical disability.
- (3) Be a veteran or have a veteran residing in your home.

****Application must be completed in its entirety and signed in order to be considered.****

Homeowner Information				
Name of Homeowner	Renita A Johnson			
Street Address	8505 E. 106th St			
City	Kansas City	State	Missouri	Zip Code 64134
Primary Phone	(816) 491-0013	Secondary Phone	(816) 651-8962	
Name of Alternate Contact	Tiffany Johnson	Alternate Contact's Phone	(816) 442-1039	
Total Annual Household Income \$	11,556	Age of Owner	65-8962-67	
How many years have you lived in your home?	15 1/2 years			
(optional) Is any resident disabled?	<input checked="" type="radio"/> N	Which resident has the disability?		
Explain disability:	Arthritis thruout body, back injury myself Renita Johnson			
Are you married?	<input checked="" type="radio"/> N	Does a veteran live in the home?	<input checked="" type="radio"/> N	
Please list all residents other than the owner living in the home and If you are caring for children 18 years or younger either full or part time please list them below:				
First Name	Age	Part time	Full time	Relationship
N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
General Information on House: Number of stories <u>1</u> Number of bedrooms <u>2</u>				
Number of bathrooms <u>1 1/2</u> Does house have basement? <u>Yes</u>				
Have you received help from Christmas in October before? <input checked="" type="radio"/> N What year?				

Please use the area below to disclose any additional relevant information regarding your request.

Please DO NOT submit tax, homeowner or other personal information with this application

~~exterior painting needed at home peeling paint and
old shutters old need to go plus sometimes bats
live in them, but dropping found at times!~~

Christmas in October Waiver of Liability

The undersigned, Brandon A. Johnson (homeowner), hereby releases and forever discharges the officers, directors, agents, employees, volunteers and representatives of the Christmas in October Program, as well as the municipal government in which the home is situated, including, but not limited to, the City of Kansas City, Kansas, the City of Kansas City, Missouri, and the persons or entities providing materials or labor to the rehabilitation or renovation work provided to the undersigned homeowner, from all claims, demands, actions and causes of action relating to any injury or loss which the undersigned may sustain in any way connected with the undersigned's home participating in the Christmas in October program.

The undersigned agrees and understands that the undersigned is to assume all the risks and grant this release in consideration for whatever rehabilitation or renovation work is provided to the undersigned's residence. The undersigned fully understands that all work provided is on a voluntary basis and the undersigned agrees to accept whatever work is provided. The undersigned understands that no promises or assurances have been made that any particular work will be done or that any particular result will be achieved.

The undersigned also understands that the Cities of Kansas City, Kansas, and Kansas City, Missouri, will not be inspecting any work done by volunteers from Christmas in October.

As one of the Christmas in October program participants, the undersigned, as well as all other residents in the home, authorize Christmas in October to use and/or publish any and all photographs or video taken the day of the event to use for reporting and/or marketing purposes (i.e., sales and marketing collateral, website, published reports, etc.).

The undersigned fully understands the meaning of the terms of this release and the undersigned has freely agreed to be bound by its terms.

HOMEOWNER

SIGNATURE: Brandon A. Johnson

DATE: 7/2/2024

TO SUBMIT APPLICATION:

Mail: P.O. Box 32108, KCMO, 64171 OR Email: Info@christmasinOctober.org

HOMEOWNER NAME: Revita Johnson

Date of inspection: _____

ADDRESS: 4585 S 106th

Inspectors: _____

Number of Stories: 0 / 2 / 3

Number of bedrooms: 1 / 2 / 3 / 4

Number of bathrooms: 1 / 2 / 3 1 1/2

QUESTIONS FOR THE HOMEOWNER:

- How many years have you lived here? 15
- Does the furnace work?
- Is the Gas turned on?
- Is the Water turned on?
- Is the electric service connected?
- Is the Attic insulated?
- Is there a smoke detector in each bdr? 2 need
- Is there at least one CO2 detector? Battery
- Does the main sewer line work?
- Is the roof free of leaks?
- Is there a bathroom on the 1st floor?

YES NO

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

EXTERIOR

Yard

- Overgrown trees / bushes / shrubs / vines
- Lawn needs mowing
- Trash in the yard
- Fence / Gate repair is needed type of fence _____
- Dumpster needed (check if yes)
- Other _____

Urgent

Accessibility

- Repairs needed to wheelchair ramp
- A wheelchair ramp needs to be built
- Sidewalk repair/replacement/addition is needed

Front Steps -- Type: Concrete / Wood

- Minor repair needed
- Major repair / Replacement needed
- Handrail repair / replacement / addition needed

Tub/Shower

- Tub spout / shower head drips / wastes water
- Low hot / cold water flow/pressure
- Tub / shower faucet doesn't work *NO cold water*
- Bad Tub/Shower diverter valve
- Tub / shower drain leaks
- Tub / shower drain is clogged
- Tub/Shower Surround needs repair *TUB needs caulk*
- Tub needs caulking
- Recommend Replacing Tub with Shower *could use tile on wall*
- Recommend Grab Bars for safety

Bathroom Lights & Outlets

- Bathroom light doesn't work
- Bathroom outlet (Receptacle) doesn't work
- Recommend GFCI receptacle

Bathroom Floor

- Floor needs repairs *Basement needs molding on floor*

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LAUNDRY -- Location: Basement / Main Level

- Recommend relocating laundry to the main level

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Washer

- Water supply line(s) leaking
- Drain is clogged / backs up
- Washer doesn't work

Dryer Type: Electric / Gas

- Dryer does not vent properly to the exterior
- Dryer does not work

ELECTRICAL

- Bad receptacle / switch / light fixture / ceiling fan needs replacement
- Additional receptacle(s) needed to minimize use of extension cords
- Unsafe electric panel / wiring / needs correction
- Replace switch or outlet cover plate(s)
- Service entrance / meter defect -- contact utility provider

Basement floor + lights out