



**Cost Free
Program!**

**Waiver and Release for Rebuilding Together Dutchess County's
Home Safety & Fire Prevention Program**

Each homeowner participating in the *Home Safety and Fire Prevention Program* must sign the below waiver and release.

I affirm that I am the lawful owner of the home described below, and that I have the authority to participate in Rebuilding Together Dutchess County's *Home Safety and Fire Prevention Program*. By signing below, I hereby give my permission for Rebuilding Together Dutchess County to install a fire extinguisher, house number, solar light, interior smoke detector, and/or carbon monoxide detector in my home.

I understand that Rebuilding Together Dutchess County and its employees, agents or volunteers are installing the fire extinguisher, house number, solar light, interior smoke detector, and/or carbon monoxide detector free of charge. In consideration of the work to be performed for my benefit, I agree to maintain the fixtures by cleaning the light periodically in order to optimize its operation. I further agree to test the smoke and carbon monoxide detectors monthly to ensure its operation and follow the manufacturer's guidelines to maintain the fire extinguisher.

I understand that none of the work performed by any of the employees, agents or volunteers of Rebuilding Together Dutchess County is warranted or guaranteed, and I hereby waive any and all warranties. Furthermore, I understand that there is no guarantee that all of the scheduled work will be completed by Rebuilding Together Dutchess County or its employees, agents or volunteers. I also understand that I must be present during the scheduled installation time.

I am aware that Rebuilding Together Dutchess County's employees, agents or volunteers will be installing the fire extinguisher, house number, solar light, interior smoke detector, and/or carbon monoxide detectors. I hereby authorize them to enter my property in order to complete the installation. In consideration of the work to be performed free of charge by Rebuilding Together Dutchess County and its volunteers, I agree to release and hold Rebuilding Together Dutchess County, its directors and officers, employees, agents, attorneys and volunteers harmless from any cause of action, claim or suit arising from, or in connection with, such work.

I further agree to accept the work performed in an "as is" condition, and I hereby irrevocably absolve, release and waive any and all liability, actions, claims or demands against Rebuilding Together Dutchess County, its directors and officers, employees, agents and volunteers for any losses sustained on the premises or as a result of, or in connection with, any work performed on my home, whether such work is intended or authorized. Without limiting the generality of the foregoing, I agree that this waiver and release shall include any and all manner of actions, suits, debts, accounts, direct and indirect damages, judgments, demands or causes of action whatsoever in law or equity, or otherwise, resulting from any loss, theft, personal injury or damage my home sustained in connection with any work performed by Rebuilding Together Dutchess County or its employees, agents or volunteers.

I do not object if (i) a photographer and/or videographer takes photographs and video of the volunteers, my home, my friends, family members or me while the work is being performed at my home or (ii) if those photographs, video or any reference to my home, my friends, family members or me are used in Rebuilding Together Dutchess County publicity materials.

I hereby authorize Rebuilding Together Dutchess County to check the validity of any personal information that I have provided to Rebuilding Together Dutchess County.



2019 Home Safety & Fire Prevention Program Application

Please mail to: PO Box 3695, Poughkeepsie, NY 12603 or FAX: (845) 454-7378
If you have any questions, please call (845) 454-7310 or email info@RTDutchess.org

Eligibility: The Home Safety and Fire Prevention Program serves and is free of cost to Dutchess County homeowners who fall within our household income eligibility range. *Note that income range (4) is restricted to households with at least one member of or above the age of 62.

Homeowner Name: _____

Homeowner Address (Incl. city/zip): _____

Telephone Number: _____ **Email:** _____

How long have you lived in your home? _____ **Number of Bedrooms:** _____ **Number of Stories:** _____

Are you available during the weekday or weekend? _____

Annual Household Income: Please check the total household income range in the appropriate column based on total number of individuals in the home.

1 Person in Home

- \$0 - \$19,900
- \$19,901 - \$33,150
- \$33,151 - \$50,350
- \$50,351 - \$66,300*

2 People in Home

- \$0 - \$22,750
- \$22,751 - \$37,850
- \$37,851 - \$57,550
- \$57,551 - \$75,700*

3 People in Home

- \$0 - \$25,600
- \$25,601 - \$42,600
- \$42,601 - \$64,750
- \$64,751 - \$85,200*

4 People in Home

- \$0 - \$28,400
- \$28,401 - \$47,300
- \$47,301 - \$71,900
- \$71,901 - \$94,600*

5 People in Home

- \$0 - \$30,700
- \$30,701 - \$51,100
- \$51,001 - \$77,700
- \$77,701 - \$102,200*

6 People in Home

- \$0 - \$33,740
- \$33,741 - \$54,900
- \$54,901 - \$83,450
- \$83,451 - \$109,800*

7 People in Home

- \$0 - \$38,060
- \$38,061 - \$58,700
- \$58,701 - \$89,200
- \$89,201 - \$117,400*

8 People in Home

- \$0 - \$42,380
- \$42,381 - \$62,450
- \$62,451 - \$94,950
- \$94,951 - \$124,900*

*At least one individual 62+

Ethnicity (optional): African American/Black American Indian/Alaska Native Asian
Hispanic/Latino Native Hawaiian/Pacific Islander White/Non-Hispanic Other

Total number of individuals in household: _____

Number of individuals 62 or older: _____ **Number of individuals 16 or younger:** _____

Individual(s) in the home who are Veterans?
 Yes No If yes, who? _____

Individual(s) in the home with a Disability?
 Yes No If yes, who? _____

How did you hear about Rebuilding Together? _____

Acceptance

I have read the attached Waiver & Release for the RTDC "Home Safety & Fire Prevention" Program and fully understand its contents (see reverse page). I am authorized to sign this agreement for the home listed above, and I sign this agreement of my own free will.

Homeowner Authorized Signature: _____ **Date:** _____