



Organizational Partnership Program Application

Thank you for your interest in the NARI Milwaukee Foundation organizational partnership program.

Qualified non-profits with a remodeling, repair, or other improvement needs may be eligible for assistance from the NARI Milwaukee Foundation's organizational partnership program.

This program provides eligible organizations with funding and/or professional assistance to repair, replace, or upgrade facilities to better serve the community. Services may include full or partial professional improvements, monetary assistance, and/or material assistance.

Eligibility Requirements:

- Non-profit organization
- Located within Milwaukee, Waukesha, Ozaukee, Racine, or Kenosha counties.
- Organization has a remodeling or repair need that impacts how the organization serves the community.
- Organization needs financial assistance and/or skilled labor to complete the project.
- Organization owns building/property or has written approval from building owner to make modifications.
- Project falls under the definition of residential or light commercial.

Return the completed application with a copy of the following verification documents:

- Proof of non-profit status
- Current mortgage statement or lease accompanied with a letter of approval from building owner.
- Copy of organization's most recent 990
- Proof of tax exempt status (if applicable)
- Any estimates already obtained and/or a copy of any current contract(s).

COMPLETING AN APPLICATION DOES NOT GUARANTEE YOUR APPLICATION WILL BE ACCEPTED. NARI MILWAUKEE FOUNDATION, INC. RESERVES THE RIGHT TO DENY ANY APPLICATION, CANCEL, MODIFY, OR TERMINATE THE PROGRAM AT ANY TIME. ALL PROJECTS WILL BE CONSIDERED BUT THE FINAL DECISION TO ACCEPT AN APPLICATION WILL BE MADE AT THE SOLE DISCRETION OF THE NARI MILWAUKEE FOUNDATION, INC.

Applications and supporting documents can be mailed, faxed, emailed or dropped off:

The NARI Milwaukee office is open weekdays 8 a.m. – 4:30 p.m.

NARI Milwaukee, Inc.
Attn: NARI Milwaukee Foundation
11815 W. Dearbourn Avenue
Wauwatosa, WI 53226
Email: foundation@narimilwaukee.org
Phone: 414-771-4071
Fax: 414-771-4077

The NARI Milwaukee Foundation, Inc. serves as the charitable arm of NARI Milwaukee, Inc. The Foundation supports the local advocacy for the professionalism of the remodeling and construction trades, the advancement of industry education through scholarships, and renovations needed to enhance our community and improve the quality of life.

SECTION 1 – CONTACT INFORMATION

Organization Name: _____

Contact Name & Title: _____

Organization Address: _____

City: _____ State: _____ Zip: _____

Primary Telephone Number: *(Please include area code)* _____

Secondary Number: _____

Email Address: _____ Website: _____

SECTION 2 – ORGANIZATION INFORMATION

If this information is available on a website, please write “see website”. If not, please provide the following:

What is your organization’s mission and vision?

How does your organization serve the community?

How do you raise funds to offer your services?

Please provide a list of your Board of Directors & executive staff.

How many people do you serve annually? _____

Annual Budget: _____ How large is the staff? _____

Do you have volunteers that would be able to assist with the project? Yes No

SECTION 3 – EXPLAIN THE AREA OF NEED

Explain why your organization is requesting aid. What is the immediate need or problem area? Attach a separate piece of paper if necessary. All projects will be considered, but the final decision to accept applications will be made at the sole discretion of the NARI Milwaukee Foundation, Inc.

Describe how the impacted area is used and how this issue has negatively impacted your ability to serve the community and/or fulfill your mission and vision.

Give a general description of necessary repairs or modifications needed.

The NARI Milwaukee Foundation will send contractor representatives to assess the situation if the application moves forward.

How urgent is this situation? What is the impact to the organization if repair is delayed?

Have you received any estimates? Yes No *If yes, please include with application.*

Has work on any part of this project already begun? Yes No

Has the organization applied for any grants or other financial assistance from other organizations? Yes No

If yes, how much was received and from which organization(s)?

Is the organization in a position to provide volunteer assistance? Yes No

Is the organization in a position to fund any part of this project? If so, to what extent?

SECTION 4 – DETAILS ABOUT BUILDING REQUIRING RENOVATIONS

Year Built: _____ How Many Stories: _____

Does your organization own or lease the building? Own Lease *If leased, provide contact information for owner below.*

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Does your organization occupy the entire building? Yes No *If no, please explain* _____

Who else occupies the building? *(if applicable)* _____

Are the property taxes current? Yes No

Is the building up to code? Yes No Unsure

Is the building ADA compliant? Yes No Unsure

How many years has the organization occupied/owned this building? _____

SECTION 5 – APPLICATION HISTORY

Has your organization applied for assistance from the NARI Milwaukee Foundation, Inc. in the past? Yes No

If Yes, what year(s)? _____

Has your organization received assistance from the NARI Milwaukee Foundation, Inc. in the past? Yes No

If Yes, what year(s)? _____

SECTION 6 – MEDIA AND PUBLICITY

Where did you learn about the NARI Milwaukee Foundation, Inc.? _____

If the NARI Milwaukee Foundation, Inc. selects your organization, would you be willing to have your picture taken and/or be interviewed by media reporters?

YES, Interviews and photographs are OK.

NO, I do not want interviews or photographs.

Does the location need to remain confidential? Yes No

Are pictures or stories disclosing the location allowed? Yes No

SECTION 7 – PERSONAL STATEMENT

Provide any additional information about the organization and/or the situation that you feel is important to share with the NARI Milwaukee Foundation, Inc. for further consideration.

To the best of my knowledge the information provided on and in connection with this form is accurate and true. I understand the submission of this application is for fact finding and consideration by NARI Milwaukee Foundation and submission of this application does not guarantee acceptance.

Signature _____ Date: _____