

# APPLICATION PACKET

## NEIGHBORHOOD REVITALIZATION PROGRAM

**READ THIS ENTIRE COVER PAGE THOROUGHLY BEFORE COMPLETING AN APPLICATION!**

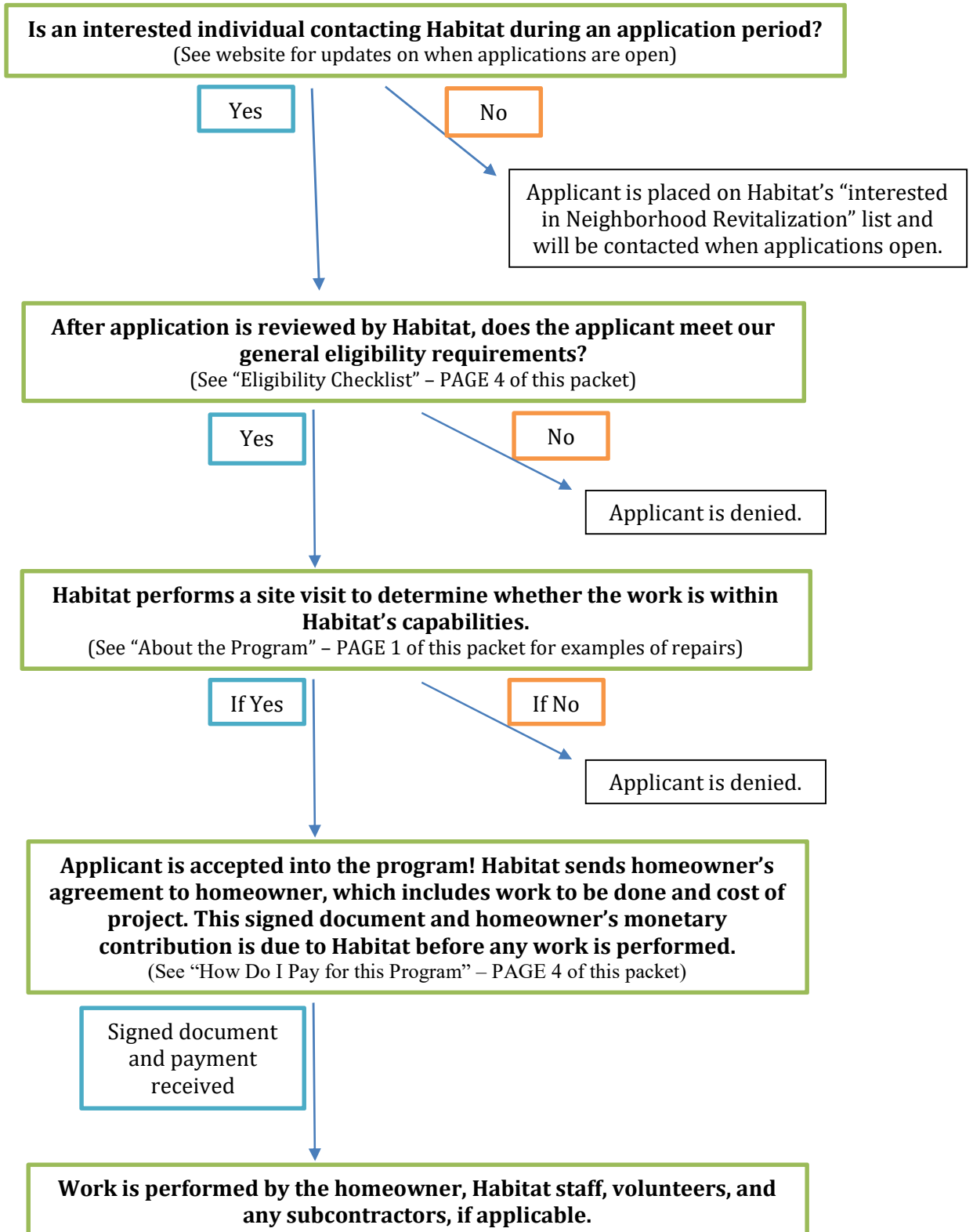
### About the Program:

- Habitat for Humanity of Burlington County & Greater Trenton-Princeton partners with families in need and volunteers to transform lives through decent and affordable homeownership.
- The Neighborhood Revitalization (NR) Program is a locally operated program serving low-to-moderate-income homeowners who need assistance repairing or improving the exterior of their homes. Services covered include, but are not limited to:
  - Accessibility modifications (wheelchair ramp, exterior hand rails)
  - Carpentry repairs (doors, floors, porches, steps, walls)
  - General cleaning (trash removal, cleaning of exterior)
  - Landscaping
  - Power washing
  - Painting
  - Minor siding and trim repair or replacement
  - Gutters
  - We do not perform roof work at this time, with the exception of the Roof Deployment Project, in which qualifying veterans receive roof repairs and replacements through our partnership with Owens Corning.

### How to Apply? \*There is no fee to apply

- **Step 1:** Determine whether you're eligible to apply by flipping to **PAGE 4** of this packet
- **Step 2:** Complete this application within the application period (check website for updates)
- **Step 3:** Attach all the **necessary documents** (see **PAGE 7** for more detail)
  - Mortgage statement
  - Evidence of payment for homeowner's insurance
  - If veteran, DD 214 or DD 256
  - **From ALL household members aged 18 and over, if applicable** (not just from applicant)
    - 2 sources of personal identification
    - 4 most recent, consecutive paystubs
    - Most recent year's W2(s)
    - All sources of unearned income
    - 3 most recent, consecutive bank statements
    - Completed background authorization form
  - **If your application is submitted with missing documents, it will be considered INCOMPLETE and WILL delay the approval process.**
- **Step 4:** Submit the application. There are 4 ways to submit an application:
  1. **Mail** to Attn: Cathy Fletcher, 530 Route 38 East, Maple Shade, NJ 08052
  2. **Drop off** at a Habitat office Monday - Friday, between the hours of 8:30am and 4:00pm at: 530 Route 38 East, Maple Shade, NJ 08052 or 120 John Street, Princeton, NJ 08542
  3. **Email** to [AmeriCorps@HabitatBCGTP.org](mailto:AmeriCorps@HabitatBCGTP.org)
  4. **Fax** to (856) 439-6437

## What is the Application Process?



## **Frequently Asked Questions**

### **What is Sweat Equity?**

- Habitat for Humanity gives a hand up, not a hand out. Through the homeowner's willingness to partner criteria of this program, homeowners are expected to help with the success of the project. Habitat will work with approved homeowners to determine what form of sweat equity is required. Examples include, but are not limited to: preparing the house for work, being present and helping during the project, writing thank-you notes to volunteers, or volunteering at the ReStore.

### **When are Applications Accepted?**

- Contact the office or check the website to have the most up-to-date information about when applications are open. Application periods are subject to change based on weather conditions, number of applicants, and Habitat staff availability.

### **Are there Information Sessions?**

- Refer to our website to hear about any planned information sessions.

### **Other Questions?**

Many questions can be answered checking our website at [www.habitatbcgtp.org](http://www.habitatbcgtp.org)  
If you still have questions, email Cathy Fletcher at [AmeriCorps@HabitatBCGTP.org](mailto:AmeriCorps@HabitatBCGTP.org)  
or call (856) 319-5231.

# Eligibility Checklist

*If you can answer YES to all of the following questions, you may be eligible for the program:*

- Do you own and live in your home as a primary residence in Burlington or Mercer Counties?
- Do you have an adequate homeowner's insurance policy?
- Are you current with your mortgage payments, homeowner's insurance, and property taxes?
- Does your primary residence have exterior work or repairs that need to be completed?
- Are you willing to meet all deadlines during the application process, attend all required events, and work or, if not possible to work, be present alongside the volunteers while work is being done on the home?
- Do you have a gross (**before taxes**) annual household income that does not exceed the **MAXIMUM** income limits listed below (note that income from all household members aged 18 and up is included)?

**If your house is located in BURLINGTON COUNTY, use these:**

|          | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person | 8+ Person |
|----------|----------|----------|----------|----------|----------|----------|----------|-----------|
| Maximum  | \$50,456 | \$57,664 | \$64,872 | \$72,080 | \$77,846 | \$83,613 | \$89,379 | \$95,146  |
| Low      | \$31,535 | \$36,040 | \$40,545 | \$45,050 | \$48,654 | \$52,258 | \$55,862 | \$59,466  |
| Very Low | \$18,921 | \$21,624 | \$24,327 | \$27,030 | \$29,192 | \$31,355 | \$33,517 | \$35,680  |

**If your house is located in MERCER COUNTY, use these:**

|          | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person  | 8+ Person |
|----------|----------|----------|----------|----------|----------|----------|-----------|-----------|
| Maximum  | \$57,732 | \$65,979 | \$74,226 | \$82,474 | \$89,072 | \$95,670 | \$102,268 | \$108,865 |
| Low      | \$36,082 | \$41,237 | \$46,392 | \$51,546 | \$55,670 | \$59,794 | \$63,917  | \$68,041  |
| Very Low | \$21,649 | \$24,742 | \$27,835 | \$30,928 | \$33,402 | \$35,876 | \$38,350  | \$40,825  |

## How do I Pay for this Program?

### Military

Approved homeowners who are active-duty military, veterans, reservists/National Guard members, or a surviving spouse of a veteran are given the opportunity to participate in this program at **no cost**. If the individual has been discharged, the discharge was honorary or other than honorary (**NOT dishonorable**).

### Non-Military

Non-military approved homeowners will be asked to pay a fee that is determined as a percentage of the total project repair cost that is based on their level of income. To determine your level of income, refer to the income charts listed above.

The amount you will pay is then determined using a sliding scale payment process as follows:

**VERY LOW** will pay 10% of project cost

**LOW** will pay 40% of project cost

**MAXIMUM (also known as MODERATE)** will pay 80% of project cost

Project cost typically varies between \$100 and \$3000. The full amount of the homeowner's portion is due up front prior to the work being performed.

**Example 1)** A homeowner's household of 4 people in Mercer County makes \$45,000/year, which is LOW income. Their estimated project cost is \$500. At LOW income, the homeowner is responsible for 40% of the total project cost, a total of \$200 (\$500 X 40% = \$200). The homeowner must show proof that they can pay \$200 for the project.

**Example 2)** A homeowner's household of 2 people in Burlington County makes \$50,000/year, which is MAXIMUM income. Their estimated project cost is \$2000. At MAXIMUM income, the homeowner is responsible for 80% of the total project cost, a total of \$1600 (\$2000 X 80% = \$1600). The homeowner must show proof that they can pay \$1600 for the project.



| For Office Use Only |       |
|---------------------|-------|
| Date Received:      | _____ |
| Staff Initials:     | _____ |
| Application No.:    | _____ |

## APPLICATION NEIGHBORHOOD REVITALIZATION PROGRAM

### SECTION 1 - Homeowner Information

Include Co-Homeowner, if applicable:

|                            |                   |                        |       |          |
|----------------------------|-------------------|------------------------|-------|----------|
| First Name                 | Last Name         | Maiden or Other Name   |       |          |
| Property Address           | Apt/Lot No.       | City                   | State | Zip Code |
| Cell Phone Number          | Home Phone Number | Email Address          |       |          |
| Number of Years at Address | Birth Date        | Social Security Number |       |          |

### SECTION 2 - Household Information

List the names, ages, and relationship to homeowner of all people living in the home:

| Name | Date of Birth | Relationship to Homeowner | Sex (M or F) |
|------|---------------|---------------------------|--------------|
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |
|      |               |                           |              |

Is anyone in your household a veteran?       Yes  No      Name: \_\_\_\_\_

Is anyone in your household serving in the military?       Yes  No      Name: \_\_\_\_\_

Does anyone in your household have a medical or physical need that may require special arrangements?  
 Yes  No      Describe: \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

## SECTION 3 – Requested Repairs

Year House Built, if Known: \_\_\_\_\_

Has your property been cited for any municipal code violations in the past 12 months? \_\_\_\_\_  
 If so, please attach an explanation on a separate piece of paper.

Briefly describe the type of work you would like done on the exterior of your home in the table below. Please write your repairs in order of importance to you. Attach a separate piece of paper if there is not enough space to list all repairs.

Examples of Exterior repairs:

1. Accessibility Modifications (wheelchair ramp, exterior hand rails, etc.)
2. Carpentry Repairs (doors, floors, porches, steps, walls, etc.)
3. Painting, Siding, or Power Washing
4. General Cleaning (trash removal, cleaning of exterior, etc.)
5. Landscaping (cutting down brush, cutting back shrubbery, planting flowers and bushes, etc.)
6. Roofing (Military ONLY through the Roof Deployment Project with Owens Corning)

**NOTE:** the items you list will be considered for repair, but the final decision on what work can be done with our time and financial resources will be made at the discretion of staff. Please be as specific as possible in your descriptions. **All requested repairs may not be completed.**

| Area of Repair | Description |
|----------------|-------------|
|                |             |
|                |             |
|                |             |
|                |             |
|                |             |

### SECTION 4 – Site Visit Availability

Please complete the following table for your general availability for site visits.  
Site visits typically last for approximately one hour.

|   | <b>Monday</b> | <b>Tuesday</b> | <b>Wednesday</b> | <b>Thursday</b> | <b>Friday</b> |
|---|---------------|----------------|------------------|-----------------|---------------|
| <b>Availability<br/>(between<br/>8am and 4pm)</b> |               |                |                  |                 |               |

### SECTION 5 – Household Income and Qualification Information

Please complete the following information for **all household members aged 18 and over**:

**Name of Person Receiving Income:**

- Full time employment
- Part time employment
- Circle all applicable: Social Security, SSI, Unemployment Benefits, Veterans Benefits, Disability Benefits, Child Support, Retirement/Pension, Workers Compensation
- Other: \_\_\_\_\_

**Name of Person Receiving Income:**

- Full time employment
- Part time employment
- Circle all applicable: Social Security, SSI, Unemployment Benefits, Veterans Benefits, Disability Benefits, Child Support, Retirement/Pension, Workers Compensation
- Other: \_\_\_\_\_

**Name of Person Receiving Income:**

- Full time employment
- Part time employment
- Circle all applicable: Social Security, SSI, Unemployment Benefits, Veterans Benefits, Disability Benefits, Child Support, Retirement/Pension, Workers Compensation
- Other: \_\_\_\_\_

**Name of Person Receiving Income:**

- Full time employment
- Part time employment
- Circle all applicable: Social Security, SSI, Unemployment Benefits, Veterans Benefits, Disability Benefits, Child Support, Retirement/Pension, Workers Compensation
- Other: \_\_\_\_\_

**Name of Person Receiving Income:**

- Full time employment
- Part time employment
- Circle all applicable: Social Security, SSI, Unemployment Benefits, Veterans Benefits, Disability Benefits, Child Support, Retirement/Pension, Workers Compensation
- Other: \_\_\_\_\_

## SECTION 6 – Required Documentation

If your application is missing documents, it will be considered incomplete and WILL delay the approval process. Check out the "[Example Application Documents](#)" on our website to look at examples of documents.

### Provide copies of the following documents:

**NOTE:** You must include all pages of each document, even if they are blank.

- Most recent mortgage statement showing up-to-date payment
  - If mortgage is paid off, a discharge is required. If no mortgage ever encumbered the property, a settlement statement is required.
- Declarations page for homeowner's insurance, or evidence showing up-to-date payment
- If veteran, provide DD 214 or DD 256.

Include the following documents **from all household members aged 18 and over**, if applicable:

- 2 sources of personal identification
  - Acceptable forms of identification:  
Driver's license, passport, social security card, voter's registration card, U.S. military card, U.S. military dependent's ID card, ID card issued by federal, state, or local government agencies
- Verification of income:
  - 4 most recent, consecutive paystubs, if applicable
  - Most recent year's w2(s), if applicable
  - All sources of unearned income, if applicable
    - Social Security, SSI, Unemployment Benefits, Veterans Benefits, Disability Benefits, Child Support, Retirement/Pension, Workers Compensation, and any other sources of income
    - Examples of documentation include award letters, disbursement history (child support)
- 3 most recent, consecutive bank statements from all accounts. (NOT a list of transactions)
- Background authorization form (included on pages 11 and 12 of this application)
  - If you have a middle name, it must be written out on the form. Failure to do so will delay the application process.

**Additional documents may be requested during application processing.**



## SECTION 7 – Willingness to Partner

To be considered for the Neighborhood Revitalization Program, you must be willing to show a willingness to partner by meeting all deadlines during the application process, attending all required events, and working or being present alongside the volunteers while working on the home.

I AM WILLING TO PARTNER BY ABIDING BY THE ABOVE STATEMENT:       Yes       No

## SECTION 8 – Homeowner’s Agreement & Background Check Authorizations

I certify the following:

- The information on this application is **accurate**.
- I **own** the property at the address given on this application.
- The home at the address given on this application is my **primary residence**.
- **I have no intention to move or sell my home for at least 3 years.**
- I confirm that, except for the conditions listed above, my home is a **safe** place for volunteers.

To the extent permitted by law and without affecting the coverage provided by the required homeowners insurance, I agree to sign the release and waiver of liability.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Applicant, if applicable

\_\_\_\_\_  
Date

## **APPLICANT CHECKLIST BEFORE SUBMITTAL**

**Please review your application before submittal. If your application is submitted with missing documents, it will be considered incomplete and WILL delay the approval process.**

- Have you filled out all pages of the application?
- Did you provide documentation for your mortgage?
- Did you provide documentation for your homeowner's insurance?
- If veteran, did you provide your DD 214 or DD 256?
- Have you provided 2 sources of identification for all household members 18 years or older?
- Have you provided 4 most recent, consecutive paystubs for all household members 18 years or older that are employed?
- Have you provided the most recent year's W2 for all household members 18 years or older?
- Have you provided documentation describing unearned income for all household members 18 years or older?
- Have you provided 3 most recent, consecutive bank statements for all accounts for all household members 18 years or older?
- Have you filled out background authorization forms for all household members 18 years or older?

**Background Authorization Form - Homeowner**  
Personal Information Necessary to Facilitate Background Check

Name: \_\_\_\_\_  
First Name Middle Name Last Name

\*\*Previous Names Used: (Within the past 7 years) \_\_\_\_\_

Current Home Address: \_\_\_\_\_  
Street Address (No P.O. Boxes) City State Zip Code County

Previous Address: \_\_\_\_\_  
Street Address (No P.O. Boxes) City State Zip Code County

How long have you lived at current address? \_\_\_\_\_

\*\*Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Driver's License State: \_\_\_\_\_

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Have you ever been convicted of a crime other than minor traffic offenses? Y \_\_\_\_\_ N \_\_\_\_\_

If yes, provide explanation:

Year of Offense: \_\_\_\_\_

Offense Description: \_\_\_\_\_

City offense was committed: \_\_\_\_\_ County offense was committed: \_\_\_\_\_

**\*\* Crimcheck.com will only use this information for background screening purposes and no other purpose.**

**DISCLOSURE OF BACKGROUND CHECK TO BE CONDUCTED ON YOU**

In connection with your application and/or employment with Habitat for Humanity, Burlington County and Greater Trenton-Princeton, Inc. ("the Company") this notice is provided to inform you that a "consumer report" and/or "investigative consumer report", as defined by the Fair Credit Reporting Act, may be obtained from a consumer reporting agency for employment purposes. These types of reports may include information as to your character, general reputation, personal characteristics and mode of living, whichever are applicable. The report(s) may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, verification of your education or employment history and other background checks. They may involve interviews with sources such as your neighbors, friends or associates. You have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report by contacting Crimcheck.com, Inc. 17295 Foltz Industrial Parkway, Suite B, Strongsville, OH 44149 [1-877-992-4325].

**ACKNOWLEDGMENT AND AUTHORIZATION OF BACKGROUND CHECK**

By signing below, I authorize Habitat for Humanity of Burlington County and Greater Trenton-Princeton, Inc. ("the Company") to obtain "consumer reports" and/or "investigative consumer reports" about me at any time after receipt of this authorization and during the course of this program, to the extent permitted by law.

You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency, Crimcheck.com, Inc., directly.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_



## **NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW**

Habitat for Humanity of Burlington County and Greater Trenton-Princeton, Inc. ("the Company") intends to obtain information about you from an investigative consumer reporting agency and/or a consumer credit reporting agency for employment purposes. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics, and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to, obtaining a criminal record report, verifying references, work history, your educational achievements, licensure and certifications, obtaining your driving record and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be Crimcheck.com, Inc. 17295 Foltz Industrial Parkway, Suite B, Strongsville, OH 44149 [1-877-992-4325]. The source of any credit report will be Crimcheck.com, Inc., 17295 Foltz Industrial Parkway, Suite B, Strongsville, OH 44149 [1-877-992-4325]. Information regarding Crimcheck's, privacy practices (including information about whether any consumer personal information will be sent outside the U.S. or its territories) may be found at [www.crimcheck.com](http://www.crimcheck.com).

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and upon reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you which is required to be provided by the California Civil Code and will be provided to you via telephone, if you have made a written request with proper identification for telephone disclosure and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

# **Affordable Housing and Other Resources**

***KEEP THIS PAGE FOR YOUR RECORDS***

- **2-1-1, NJ's Help Hotline**
  - Dial 2-1-1 from any phone
  - <http://www.nj211.org/>
  
- **Soldier On**
  - (413) 582-3059
  - [www.wesoldieron.org](http://www.wesoldieron.org)
  
- **TRIAD Housing**
  - (856) 690-5749
  - <http://triadhousingprograms.com/>
  
- **Public Housing Authority**
  - (202) 708-1112
  - <http://www.hud.gov/offices/pih/pha/contacts/states/nj.cfm>
  
- **Social Serve**
  - 1-877-428-8844
  - [www.socialserve.com](http://www.socialserve.com)
  
- **BCCAP**
  - (609) 386-5800
  - <http://bccap.org/>
  
- **MEND**
  - (856) 722-7070
  - <http://www.mendinc.org/>
  
- **USDA Loans**
  - <http://eligibility.sc.egov.usda.gov/eligibility/welcomeAction.do>
  
- **CONTACT Crisis Hotline**
  - (856) 234-8888
  - <http://contactburlco.org/>