



2018 PAINT AND REHAB PROGRAM

GENERAL GUIDELINES

1. The Program is open to all residential homeowners who qualify under the income eligibility established by the Council on Affordable Housing. Proof of income is required such as one or more of the following:

- a. 2017 Federal Tax Return (Form 1040) with W-2
- b. Annual Report from Social Security for 2017
- c. Award letter for Pension information
- d. If your status has changed from 2017, provide at least two consecutive pay stubs

2. The house must be owner-occupied. Rental properties do not qualify.

3. The property taxes must be paid to the current quarter. The sewer rent must be paid to the current half.

2018 Paint & Rehab Program Income Limits *		
FAMILY OF:	MODERATE INCOME:	LOW INCOME:
1	\$51,864	\$32,415
2	\$59,273	\$37,046
3	\$66,682	\$41,676
4	\$74,091	\$48,159
5	\$80,019	\$50,012
6	\$85,946	\$53,716
7	\$91,873	\$57,421
8	\$97,801	\$61,125

* From 2014 Affordable Housing Regional Income Limits



For Office Use Only:

Referred by: _

Phone #: _

Application #: _

SECTION 1 - Homeowner Information

Name of Homeowner: _____

Age: _____

Address: _____

Zip: _____

Telephone Numbers: _____

Home: _

Number of Years at Address: _

Please include **area code**

Cell: _

Name of Neighborhood: _____

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

(attach a list if more space is needed):

Name/relationship: _____ Age: _____

Name/relationship: _____ Age: _____

Name/relationship: _____ Age: _____

Name/relationship: _____ Age: _____

SECTION 2 - Special Needs

Is the homeowner or anyone in the home disabled? Yes No

If yes, indicate the type of disability below (check all that apply, please describe if "other"):

Uses a Walker, Cane or Crutches Wheelchair Bound Blind Hearing Impaired

Loss of Limb Mentally Disabled Other: _

Is translation needed? Yes No If yes, what language: _

SECTION 3 - Sharing Your Personal Information?

If your application is a more appropriate fit with other, similar programs may we share it with them?

Yes No

Unless you give us permission to share information with other organizations, your application will be kept confidential and will be used solely for the purpose of evaluating the acceptability of your home for repairs or painting by Coastal Habitat for Humanity, World Changers, or Mission 101.

SECTION 4 - Household Income

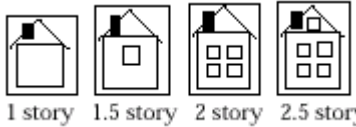
The *total, combined* income *before taxes* for ALL persons living in the home is: \$ _____ per **year**

You must attach verification of all HOUSEHOLD income for each adult in the house, unless a full time student (provide proof of registration) and/or benefits for children

(For instance, a 2015 income tax return, monthly social security statement, other retirement income statements, employment check stub and please note on attached statements if it represents annual, monthly, twice-monthly, bi-weekly or weekly income.).

If, after review, you do not qualify because your income is too high, are you willing to purchase the paint and/or materials necessary to do your work? Yes [] No []

SECTION 5 - House Information / Exterior

HOUSE INFORMATION		House Exterior		Garage Exterior	
Place a large "X" over the house (below), which most resembles the size of your house.  1 story 1.5 story 2 story 2.5 story Year Purchased: _____ Year Built: _ Last Painted: _		Siding <input type="checkbox"/> wood <input type="checkbox"/> brick <input type="checkbox"/> shakes <input type="checkbox"/> stucco <input type="checkbox"/> painted stucco <input type="checkbox"/> asbestos/slate <input type="checkbox"/> aluminum <input type="checkbox"/> vinyl	Trim <input type="checkbox"/> wood <input type="checkbox"/> vinyl <input type="checkbox"/> metal	Siding <input type="checkbox"/> wood <input type="checkbox"/> brick <input type="checkbox"/> shakes <input type="checkbox"/> stucco <input type="checkbox"/> painted stucco <input type="checkbox"/> asbestos/slate <input type="checkbox"/> aluminum <input type="checkbox"/> vinyl	Trim <input type="checkbox"/> wood <input type="checkbox"/> vinyl <input type="checkbox"/> metal
Parts of house and garage that need painting: <input type="checkbox"/> House siding <input type="checkbox"/> House trim (around doors, windows, overhangs, Etc.) <input type="checkbox"/> Garage siding <input type="checkbox"/> Garage trim (around doors, windows, Overhangs, etc.) <input type="checkbox"/> Other _		Repairs needed on exterior: _____ _____ _____ _____ _____ _____			

SECTION 6 - Requested Repairs

If these repairs are a result of damage caused by SuperStorm Sandy, please check here []

Briefly describe the type of work you would like done on your home. Attach a separate piece of paper if there is not enough space to list all repairs. Remember that the items listed below will be considered for repair, but the final decision on what work can be done with the volunteer organization's time and resources will be at the discretion of the Township of Neptune. **These volunteers are not professionals and may not be able to make all repairs.**

Please print

Area of Repair	Description
Accessibility Modifications. Examples: wheelchair ramp, bathroom grab bars, etc. Would you like an assessment? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Carpentry Repairs. Describe problems with doors, floors, porches, steps, walls, ceilings, etc. Indicate places in house needing repair.	
Roofing Repairs. Identify where roof leaks.	

<p>Painting. List all interior rooms that require painting and any exterior painting requirements.</p>	
<p>Landscaping. Describe any landscaping or cleanup work.</p>	
<p>Doors and Windows. Describe repairs required, including locks, glass, frames, weather-stripping, etc.</p>	
<p>General Cleaning. Indicate if there is interior or exterior cleaning and/or trash removal required. Use this space to request attic, basement, shed or garage clean out.</p>	
<p>Other. Identify other repairs requested but not listed above.</p>	

SECTION 7 - Checklist
<p>Did you complete all six sections of this application? [<input type="checkbox"/>]</p>
<p>Did you sign the application? (Last page) [<input type="checkbox"/>]</p>
<p>Did you enclose a copy of the deed on your home or other proof of ownership, such as a property tax receipt? <i>All documents submitted must show the name and address of the applicant.</i> [<input type="checkbox"/>]</p>
<p>Do you currently have homeowner's insurance? Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]</p>
<p>Did you include a statement verifying income? This statement can be a copy of one or more of the following: tax return, Social Security receipts, retirement pay receipts, or other documentation of household income. [<input type="checkbox"/>]</p> <p><i>All adults, over the age of 18, must submit an income document (or prove <u>current full time student status</u>).</i></p>

Section 8 – Homeowner's Agreement

I certify that the information on this application is accurate and that I own the property at the address given on this application. I have no present intention to move or offer my home for sale for at least three years.

I confirm that any physically able persons residing in my home or visiting for the project day may be expected to work alongside the volunteers.

I confirm that, except for the conditions listed above, my home is a safe place for volunteers.

I understand that the people who may work on my house are unpaid volunteers; that few, if any of them, are skilled in the building trades; and that Neptune Township **MAKES NO WARRANTIES, EXPRESS OR IMPLIED, REGARDING ANY MATERIALS USED OR WORK DONE BY ANYONE AT MY HOUSE.**

I hereby release Coastal Habitat for Humanity, World Changers, and Missions 101 and all associated with it from any and all liability whatsoever.

SIGNATURE OF HOMEOWNER

DATE

Complete the following if you are not the homeowner, but are assisting the homeowner in completing this application.

Your Name:	Your daytime telephone #:	Is homeowner aware of this application? Yes [] No []
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Return application by **March 30, 2018** to Ashleigh Curtis at 25 Neptune Blvd. If you are mailing, enclose the signed application and accompanying documents to:

Township of Neptune
Attn: Ashleigh Curtis
PO Box 1125
Neptune NJ 07754-1125