

Where Community, Business & Tourism Prosper

2024 PAINT & 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. 2022 or 2023 Federal Tax Return (Form 1040) with W-2
- b. Annual Report from Social Security for 2023
- c. Award letter for Pension information

d. If your status has changed from 2023,, 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.

2024 Paint & Rehab Program Income Limits *			
FAMILY OF:	MODERATE INCOME:		
1	\$72,830		
2	\$83,234		
3	\$93,639		
4	\$104,043		
5	\$112,367		
6	\$120,690		
7	\$129,013		
8+	\$137,337		

* From 2023 Affordable Housing Regional Income Limits

All Applications are due by Tuesday, April 9, 2024 No applications will be accepted after the deadline



Phone #: Application #:

SECTION 1 - Homeowner Information

W

Name of Homeowner:		Age:		
Address:		Zip:		
Home:	Number of Years at Addres	s: _		
Please include area code Cell:	Name of Neighborhood:			
List the names, ages, and relationship to homeowner of all pe	cople living in the home			
(attach a list if more space is needed): Name/relationship:	Age:			
Name/relationship:	-			
Name/relationship:	•			
Name/relationship:	-			
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	d 🛛 🛛 Blind 🖵 Hear	ing Impaired		
□Loss of Limb □ Mentally Disabled □ Other:				
Is translation needed? Yes No If y	ves, what language: _			
SECTION 3 - Sharing Your Personal Inform	nation?			
If your application is a more appropriate fit with other, simila		with them?		
Unless you give us permission to share information with a	I No	nnlication will be kent		
confidential and will be used solely for the purpose of evaluation				
painting by Coastal Habitat for Humanity or World Changers.				
SECTION 4 - Household Income				
The <i>total, combined</i> income <i>before taxes</i> for <u>ALL</u> 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 2023 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.	SidingTrimwoodwoodbrickvinylshakesmetalstuccopainted stuccoasbestos/slatealuminumvinyl	SidingTrimwoodwoodbrickvinylshakesmetalstuccopainted stuccoasbestos/slatealuminumvinylnot applicable			
 Parts of house and garage that need painting: House siding House trim (around doors, windows, overhangs, Etc.) Garage siding Garage trim (around doors, windows, Overhangs, etc.) Other_ 	Repairs needed on exterior:				

SECTION 6 - Requested Repairs

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.

r lease print information below				
Area of Repair	Description			
Accessibility Modifications. Examples: wheelchair ramp, bathroom grab bars, etc.				
Would you like an assessment?				
□ Yes □ 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.				

Please print information below

Painting. List all interior rooms that require painting and any exterior painting requirements.	
Landscaping. Describe any landscaping or cleanup work.	
Doors and Windows. Describe repairs required, including locks, glass, frames, weather-stripping, etc.	
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.	
Other. Identify other repairs requested but not listed above.	

SECTION 7 - Checklist

Did you complete all six sections of this application? []

Did you sign the application? (Last page) []

Did you enclose a copy of the deed on your home or other proof of ownership, such as a property tax receipt? *All documents submitted must show the name and address of the applicant.* []

Do you have a current homeowners insurance policy? [] Yes No []

Please provide proof of insurance with this application.

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. []

All adults, over the age of 18, must submit an income document (or prove current full time student status).

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.			
<u>I understand that this application is not a guarantee of work to be done even if I meet all</u> <u>criteria.</u>			
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 all associated with it from any and all liability whatsoever.			
SIGNATURE OF HOME	OWNER	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?	

Return application by April 9, 2024 to Ashleigh Curtis via mail:

PLEASE NOTE: NO applications will not be accepted after the deadline.

If you are mailing, enclose the signed application and accompanying documents to:

Yes [] No []

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