

Date:										
Full Name(s) of Homeowner(s):										
Address:										
Phone Number:										
Email Address:										
Do you live in one of the towns listed on the back of this form?						Yes		No		
Do you own your home and is it your only residence?						Yes		No		
If yes, how long have you lived in this residence as your only and primary home?										
How many adults live in the home?			Children?							
Does the total income of the residents living at this address fit the income guidelines? (see chart below)					Yes		No			
	Hou	sehold Incol	me Guideline	es						
2023 INCOME LIMIT CATEGORY	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PER	SON	8 PER	
MAXIMUM INCOME LIMIT	\$66,300	\$75,750	\$85,200	\$94,650	\$102,250	\$109,800	\$117,	400	\$124	,950
Are you a veteran, currently serving, or with an honorable discharge? (not necessary to qualify for assistance)				Yes		No				
Do you receive PAAD, SNAP, or Medicaid?					Yes		No			
Do you have homeowners insurance? (required)					Yes		No			
Do you pay a homeowner's association fee?					Yes		No			
Is your home for sale (by broker or by owner)?				Yes		No				

While payment is not required in order to be eligible for Habitat's Home Repair Program, volunteering to the best of your ability is required. Are you willing to partner with Habitat (to the best of your ability) to perform simple acts of kindness in your community? This can be volunteering at the Habitat ReStore, writing thank you notes to the people that made your repairs possible, distributing Habitat information to your neighbors in need, volunteering for other community organizations, etc.?	Yes		No	
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Do you have any pets? Type?	Yes		No				
Do you want assistance completing the full application?	Yes		No				
Briefly describe the requested repairs (attach additional sheet if necessary):							
Please provide some context for why you need Habitat to assist you in making the requested repair	s:						
NOTE: This is a preliminary application for general contact information only. Northern Ocean Habitat will file this form if a full application is not received within 3 months of the date of the application.							
Municipalities served by NOHFH in Northern Ocean County: Bay Head, Beachwood, Berkeley(Bayville), Brick, Island Heights, Jackson, Lakehurst, Lakewood, Lavallette, Manchester (Whiting) Mantoloking, Ocean Gate, Point Pleasant, Point Pleasant Beach, Pine Beach, Plumstead,(New Egypt), Seaside Heights, Seaside Park, South Toms River, Toms River							
Please note: In rare instances, home repairs exceed \$15,000. Repairs totaling more than \$15,000 will require a lien on the home in accordance with Northern Ocean Habitat for Humanity's Policy effective 6/23/22							

SEND APPLICATION TO:

Northern Ocean Habitat for Humanity 1620 Route 37 East, Toms River, NJ 08753