



## Home Repair Program Preliminary Application

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
Household Income Guidelines									
2024 INCOME LIMIT CATEGORY	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PERSON	8 PERSON	
MAXIMUM INCOME LIMIT	\$68,500	\$78,250	\$88,050	\$97,800	\$105,650	\$113,450	\$121,300	\$129,100	
Have you ever served in the military (Army, Navy, Marine Corps, Air Force, Coast Guard, Space Force)?							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 <i>to the best of your ability</i> 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
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 repairs:

**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: Repairs totaling more than \$5,000 may require a lien on the home in accordance with Northern Ocean Habitat for Humanity's Policy effective 10/1/24**

**SEND APPLICATION TO:  
Northern Ocean Habitat for Humanity  
1620 Route 37 East,  
Toms River, NJ 08753**