

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	of this for	m?				Yes		No	
o you own your home and is it your only residence?						Yes		No No No SON 8 PERSON		
If yes, how long have you lived in this re	sidence as	s your onl	y and prin	nary home	?					
How many adults live in the home?			Children?							
Does the total income of the residents liv below)	ving at this	address	fit the inc	ome guide	elines? (se	e chart	Yes		No	
	Hous	sehold Incoi	me Guideline	es						
2024 INCOME LIMIT CATEGORY	1 PERSON	2 PERSON	3 PERSON	4 PERSON	5 PERSON	6 PERSON	7 PER	SON		
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 (Arn Force)?	ıy, Navy, I	Marine Co	rps, Air Fo	orce, Coas	t Guard, S	Space	Yes		No	
Do you receive PAAD, SNAP, or Medicaid	1?						Yes		No	
Do you have homeowners insurance? (re	equired)						Yes		No	
Do you pay a homeowner's association f	ee?						Yes		No	
Is your home for sale (by broker or by ov	vner)?						Yes		No	
While payment is not required in order to donation or volunteering <i>to the best of y</i> Habitat (to the best of your ability) to per can be volunteering at the Habitat ReSto repairs possible, distributing Habitat info community organizations, etc.?	o <i>ur ability</i> form simp re, writing	is sugge le acts of thank yo	sted. Are y kindness u notes to	you willing in your co the peopl	g to partne ommunity e that mae	er with ? This de your	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 Habit		ile 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(Bayvi Heights, Jackson, Lakehurst, Lakewood, Lavallette, Manchester (Whiting) Mantoloking, Ocean Gate, Point Pleasant Beach, Pine Beach, Plumstead,(New Egypt), Seaside Heights, Seaside Park, South Te River	, Point P	leasant,
Please note: Repairs totaling more than \$5,000 may require a lien on the home in accordance with Northern Ocean Habita Policy effective 10/1/24	at for Hum	anity's

SEND APPLICATION TO:

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