



Habitat for Humanity of South Central New Jersey

Homeownership Program Application

Mail to: Habitat for Humanity of South Central New Jersey, 530 Route 38 E, Maple Shade, NJ 08052, Attention: Homeowner Services Dept. Or call (856) 484-5615 to set-up a time to hand deliver.

Deadline: Wednesday, October 21st, 2026

Questions: (856) 484-5615 or eacevedo@habitatcnj.org



801 North Michigan Avenue, Atlantic City, NJ 08401

Application fee: \$40 for applicant/\$80 for applicant & co-applicant - cash, check or money order payable to Habitat for Humanity.

Home(s) for which you are applying:

Address

Beds/Baths

Veteran Status:

For Office Use Only

Date Rec'd:

Fee Paid:

Rec'd By: _____

☐ **801 North Michigan Avenue, Atlantic City, NJ** **4 Beds/1 Full Baths**

- ☐ Applicant is a Veteran
☐ Co-Applicant is a Veteran
☐ N/A

1. APPLICANT INFORMATION

Applicant		Co-Applicant (spouse must be Co-Applicant)	
Name _____ ☐ Male ☐ Female		Name _____ ☐ Male ☐ Female	
Social Security Number _____ Birth Date _____ Age _____		Social Security Number _____ Birth Date _____ Age _____	
☐ United States Citizen ☐ Permanent Resident Primary Language spoken _____		☐ United States Citizen ☐ Permanent Resident Primary Language spoken _____	
☐ Married ☐ Unmarried ☐ Separated (attach proof of marriage/divorce)		☐ Married ☐ Unmarried ☐ Separated (attach proof of marriage/divorce)	
Home Phone: _____ Cell Phone: _____		Home Phone: _____ Cell Phone: _____	
Email address: _____		Email address: _____	
Present Address: _____ Number of Years there _____ ☐ Own ☐ Rent		Present Address: _____ Number of Years there _____ ☐ Own ☐ Rent	
Previous Address (if living at present address for less than twoyears) Number of Years there _____ ☐ Own ☐ Rent		Previous Address (if living at present address for less than twoyears) Number of Years there _____ ☐ Own ☐ Rent	
Other Household Members (people not listed as co-applicant who will live with you) Attach additional sheets if necessary			
Name _____ Relationship _____ ☐ Male ☐ Female Birth date _____ Age _____		Name _____ Relationship _____ ☐ Male ☐ Female Birth date _____ Age _____	
Name _____ Relationship _____ ☐ Male ☐ Female Birth date _____ Age _____		Name _____ Relationship _____ ☐ Male ☐ Female Birth date _____ Age _____	

Name _____

Relationship _____

☐ Male ☐ Female Birth date _____ Age _____

Name _____

Relationship _____

☐ Male ☐ Female Birth date _____ Age _____

2. WILLINGNESS TO PARTNER

Upon selection for a Habitat of Humanity of South Central New Jersey home, you and your family must complete hours of "sweat equity" helping to build Habitat homes and/or helping in other areas of the organization. The exact amount of hours will be determined once you are accepted into the Homeownership Program: 12.5 - 25 hours per month (depending on household size) while in the Homeownership Program. At no time will anyone performing these volunteer hours be provided with compensation by HFHSCNJ. Sweat equity hours will also include online financial education classes and in some cases acting as HFHSCNJ Partner Family representatives at events that help to promote the Habitat mission. If you anticipate a problem with completing the required hours of sweat equity, please explain the nature of the problem.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT EQUITY HOURS: Applicant: ☐ Yes ☐ No ☐ See Explanation Above

Co-Applicant: ☐ Yes ☐ No ☐ See Explanation Above

3. PRESENT HOUSING CONDITIONS

Number of bedrooms in your current residence (please circle): 1 2 3 4 5 6 Number of bathrooms in your current residence: 1 2 3 4

Other rooms in your current residence:

☐ Kitchen ☐ Living Room ☐ Dining Room ☐ Other (Please describe) _____

Check one: ☐ Rent ☐ Own ☐ Live with relatives or friends

What is your current total monthly rental/housepayment? \$ _____

Do you live in Public Housing? Y ☐ N ☐

Is your rent subsidized? Y ☐ N ☐

If yes, how much do you receive? \$ _____

Do you receive a Section 8 Rental Voucher? Y ☐ N ☐ If yes, how much do you receive? \$ _____

If you rent your residence, please provide the following information about your current landlord:

Landlord's Name: _____

Landlord's Address: _____

Landlord's Phone Number: _____

Why do you need a Habitat home? Include the condition of your current residence and why it does not meet your needs. Attach another sheet of paper if necessary.

Do you anticipate a change in your family/household size in the near future? ☐ Yes ☐ No If yes, please explain below.

4. EMPLOYMENT INFORMATION**Applicant****Co-Applicant**Name and Address of **Current** EmployerName and Address of **Current** Employer

Position Held

Number of months
worked per year:

Position Held

If seasonal, number of
months worked per year:

Work Phone

Monthly Gross Wages
\$

Work Phone

Monthly Gross Wages
\$

Start Date

Hours/Week

Start Date

Hours/Week

**If working at current job less than two years, or if you have more than one job, complete the following information.
You must provide at least two years of work history. Attach additional sheets if necessary.**Name & Address of Employer ☐ Previous ☐ AdditionalName & Address of Employer ☐ Previous ☐ Additional

Position Held

Number of months
worked per year:

Position Held

If seasonal, number of
months worked per year:

Work Phone

Monthly Gross Wages
\$

Work Phone

Monthly Gross Wages
\$

Start Date

Finish Date

Start Date

Finish Date

Name & Address of Employer ☐ Previous ☐ AdditionalName & Address of Employer ☐ Previous ☐ Additional

Position Held

Number of months
worked per year:

Position Held

If seasonal, number of
months worked per year:

Work Phone

Monthly Gross Wages
\$

Work Phone

Monthly Gross Wages
\$

Start Date

Finish Date

Start Date

Finish Date

Additional Household Members With Income (income for any household member over the age of 18 must be listed. Include Social Security for everyone, including children)

Name of Household Member

Social Security #

Name of Household Member

Social Security #

Name and Address of Employer or Source of Income
(e.g., pension, social security, etc.)Name and Address of Employer or Source of Income
(e.g., pension, social security, etc.)Monthly Gross Wages
\$

Start Date

Monthly Gross Wages
\$

Start Date

Name of Household Member

Social Security #

Name of Household Member

Social Security #

Name and Address of Employer or Source of Income
(e.g., pension, social security, etc.)Name and Address of Employer or Source of Income
(e.g., pension, social security, etc.)

5. MONTHLY INCOME

Provide information for all household members with income. Please fill in names as appropriate. Attach additional sheets if necessary.

Gross Monthly Income	Applicant	Co-Applicant	Other:	Other:	Other:
Primary Job	\$	\$	\$	\$	\$
Second Job	\$	\$	\$	\$	\$
Pension	\$	\$	\$	\$	\$
Social Security	\$	\$	\$	\$	\$
Unemployment	\$	\$	\$	\$	\$
Supplemental Security (SSI)	\$	\$	\$	\$	\$
Disability	\$	\$	\$	\$	\$
Alimony / Spousal Support Income	\$	\$	\$	\$	\$
Child Support	\$	\$	\$	\$	\$
Food Stamps	\$	\$	\$	\$	\$
Other income (attach explanation)	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

6. MONTHLY EXPENSES

Monthly Expenses	Paid To:	Applicant	Co-Applicant
Rent / Mortgage		\$	\$
Spousal Support / Alimony Payments		\$	\$
Child Support Payments		\$	\$
Car Payments		\$	\$
Medical Insurance		\$	\$
Automobile Insurance		\$	\$
Child Care		\$	\$
Water		\$	\$
Electric		\$	\$
Natural Gas / Heating Oil		\$	\$
Home Phone		\$	\$
Cell Phone		\$	\$
Cable/Satellite TV		\$	\$
Student Loan Payments		\$	\$
Other Loan Payments (e.g., Credit Union)		\$	\$
Credit Cards Payments (total minimum monthly payments)		\$	\$
Other: _____			
Total		\$	\$

7. LONG TERM DEBT

To whom do you owe money? Include all debt you owe. Attach additional sheets if necessary.

Applicant

Account	Lender/Creditor Name	Total Due	Monthly Payment
Alimony		\$	\$
Child Support		\$	\$
Car Loan / Lease		\$	\$
Credit Card #1		\$	\$
Credit Card #2		\$	\$
Credit Card #3		\$	\$
Credit Card #4		\$	\$
Student Loan #1		\$	\$
Student Loan #2		\$	\$
Personal Loan #1		\$	\$
Personal Loan #2		\$	\$
Medical Debt #1		\$	\$
Medical Debt #2		\$	\$
Medical Debt #3		\$	\$
Judgment #1		\$	\$
Judgment #2		\$	\$
Other:		\$	\$
Other:		\$	\$
Totals		\$	\$

Co-Applicant

Account	Lender/Creditor Name	Total Due	Monthly Payment
Alimony		\$	\$
Child Support		\$	\$
Car Loan / Lease		\$	\$
Credit Card #1		\$	\$
Credit Card #2		\$	\$
Credit Card #3		\$	\$
Credit Card #4		\$	\$
Student Loan #1		\$	\$
Student Loan #2		\$	\$
Personal Loan #1		\$	\$
Personal Loan #2		\$	\$
Medical Debt #1		\$	\$
Medical Debt #2		\$	\$
Medical Debt #3		\$	\$
Judgment #1		\$	\$
Judgment #2		\$	\$
Other:		\$	\$
Other:		\$	\$
Totals		\$	\$

8. ASSETS

List all financial accounts, such as checking, savings, CDs, IRAs, Pensions or other investment accounts. Attach additional sheets if necessary.

Applicant		Co-Applicant	
Name and Address of Bank, Savings & Loan, or Credit Union		Name and Address of Bank, Savings & Loan, or Credit Union	
Account Number	Balance \$	Account Number	Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union		Name and Address of Bank, Savings & Loan, or Credit Union	
Account Number	Balance \$	Account Number	Balance \$
Name and Address of Bank, Savings & Loan, or Credit Union		Name and Address of Bank, Savings & Loan, or Credit Union	
Account Number	Balance \$	Account Number	Balance \$
Do you own any Real Estate? ☐ Yes ☐ No		Do you own any Real Estate? ☐ Yes ☐ No	
If yes, please provide location & market value:		If yes, please provide location & market value:	
Do you own an automobile? ☐ Yes ☐ No		Do you own an automobile? ☐ Yes ☐ No	
If yes, please provide year, make and model:		If yes, please provide year, make and model:	

9. SOURCE OF PAYMENT FOR CLOSING COSTS

You will be required to pay closing costs which are estimated at \$5500. Please tell us where you will get this money (e.g., savings, family, First Time Homebuyer grant funds). If you are borrowing money to pay these costs, explain how and from whom and how you plan to pay them back.

10. DECLARATIONS

	Applicant	Co-Applicant
a. Do you have any debt because of a court decision/judgment against you?	☐ Yes ☐ No	☐ Yes ☐ No
b. Have you ever been convicted of a crime?	☐ Yes ☐ No	☐ Yes ☐ No
c. Have you been declared bankrupt within the past 7 years?	☐ Yes ☐ No	☐ Yes ☐ No
d. Have you had property foreclosed on in the last 7 years?	☐ Yes ☐ No	☐ Yes ☐ No
e. Are you currently involved in a lawsuit?	☐ Yes ☐ No	☐ Yes ☐ No
f. Are you paying alimony or child support?	☐ Yes ☐ No	☐ Yes ☐ No
g. Are you a U.S. citizen or legal permanent resident?	☐ Yes ☐ No	☐ Yes ☐ No
Answering 'yes' to questions a through e does not automatically disqualify you. However, if you did answer yes to these questions, please explain the circumstances on a separate sheet of paper.		

11. AUTHORIZATION, AGREEMENT AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity of South Central New Jersey to evaluate my actual need for a Habitat home, my ability to repay an affordable loan and other expenses of homeownership, and my willingness to fully participate in the Habitat program. **I understand that the evaluation will include**, but is not limited to, a full review of my financial situation, personal visits from Habitat representatives, **employment and income verification, criminal background check and a credit check**. I further understand that if any information provided changes after I submit this application, I will supplement this document as applicable. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to receive a Habitat home, I may be disqualified from the program if my situation changes or any of the information I provided or Habitat obtains is false or misleading. The original or a copy of this application may be retained by Habitat for Humanity of South Central New Jersey even if the application is not approved. **I agree that Habitat for Humanity of South Central New Jersey, Inc. may obtain verification of my employment; my income; my credit report, including my credit scores; and my criminal background in connection with its review of this application.**

If this application is created as (or converted into) an "electronic application," I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable federal and/or state electronic transaction laws. I intend to sign and have signed this application either using my: (a) electronic signature or (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.

Applicant - Print Name

Co-Applicant - Print Name

Applicant Signature

Date

Co-Applicant Signature

Date

PLEASE NOTE: All requested information must be provided in order for your application to be considered complete. If more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application. (Please indicate whether additional information applies to applicant or co-applicant.) **Please be aware that incomplete applications or false statements may disqualify you from further consideration.**

12 SUPPORTING DOCUMENTATION

Please provide photocopies (no originals) of the following documents for EACH APPLICANT. Documents provided will not be returned.

- Most recent 4 pay stubs.
- Copy of driver's license.
- Copy of social security card.
- Don't forget your application fee of \$40 per applicant - cash, check or money order payable to Habitat for Humanity.

*If you are selected for this home, you will be required to submit additional documents at that time.

Applicant's Name	Co-Applicant's Name
13. INFORMATION FOR GOVERNMENT MONITORING PURPOSES	
Please Read This Statement Before Completing the Box Below: The following information is requested by the Federal government for loans related to the purchase of homes, in order to monitor the lender's compliance with equal credit opportunity and fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations this lender is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the loan applied for.)	
Applicant	Co-Applicant
Highest level of education obtained. Check one: ☐ Less than H.S. Diploma ☐ H.S. Diploma or equivalent ☐ Some college ☐ Associate Degree ☐ Bachelor's Degree ☐ Certification from vocational or technical training program ☐ Master's Degree or other graduate degree Race/National Origin: ☐ American Indian or Alaskan Native ☐ American Indian AND White ☐ American Indian AND Black ☐ Native Hawaiian or Pacific Islander ☐ White ☐ Asian ☐ Asian AND white ☐ Black or African American ☐ Black or African American AND White ☐ Hispanic ☐ Hispanic AND White ☐ Other (specify): _____ ☐ I do not wish to furnish this information Marital Status: ☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed) Are you: serving in the U.S. Military? ☐ Are you a Veteran of the U.S. Military? ☐	Highest level of education obtained. Check one: ☐ Less than H.S. Diploma ☐ H.S. Diploma or equivalent ☐ Some college ☐ Associate Degree ☐ Bachelor's Degree ☐ Certification from vocational or technical training program ☐ Master's Degree or other graduate degree Race/National Origin: ☐ American Indian or Alaskan Native ☐ American Indian AND White ☐ American Indian AND Black ☐ Native Hawaiian or Pacific Islander ☐ White ☐ Asian ☐ Asian AND white ☐ Black or African American ☐ Black or African American AND White ☐ Hispanic ☐ Hispanic AND White ☐ Other (specify): _____ ☐ I do not wish to furnish this information Marital Status: ☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed) Are you serving in the U.S. Military? ☐ Are you a Veteran of the U.S. Military? ☐
For Office Use Only To Be Completed Only by Affiliate	
This application was taken by: ☐ Face-to-Face Interview ☐ Mail	Interviewer's Name (print or type) Interviewer's Signature Date



Habitat for Humanity of South Central New Jersey is pledged to the letter and spirit of U.S. and State of NJ policy for the achievement of equal housing opportunity throughout the nation. Habitat for Humanity of South Central New Jersey does not discriminate against any person on the basis of Race, Creed, Color, National Origin, Ancestry, Nationality, Marital or Domestic Partnership or Civil Union Status, Familial Status, Sex, Gender Identity or Expression, Affectional or Sexual Orientation, Disability, Source of Lawful Income or Source of Lawful Rent Payment (including Section 8), or any other protected class in any activity involving the selling, renting or leasing of housing accommodations.

Habitat for Humanity of South Central New Jersey

PRIVACY STATEMENT & NOTICE

At Habitat for Humanity of South Central New Jersey, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data – such as tax returns, pay stubs, credit reports, employment verifications and payment history – internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us, or others, and;
- Information we receive from a consumer-reporting agency.

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on applications and other forms, such as name, address, social security number, income, or number in household.
- Information about your transaction with us, such as your loan balance, and payment history.
- Information we receive from a consumer-reporting agency such as your credit history.

Habitat for Humanity of South Central New Jersey employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents;
- Non-profit organizations, government entities, or other subsidy providers.

If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). If you wish to opt out of disclosures to nonaffiliated third parties, you must notify Habitat for Humanity of South Central New Jersey at apply@habitatscnj.org or 856-484-5615.

I/We have received a copy and understand Habitat for Humanity of South Central New Jersey's Privacy Statement & Notice.

Applicant

Date

Co-Applicant

Date

Habitat for Humanity South Central New Jersey
EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices at the FTC regional Office for the Northeast region, 1 Bowling Green #318, New York City, NY 10004; or, Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and affordable mortgage amount, information regarding the applicant's marital status; alimony, child support and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete, and we will be unable to invite you to participate in the Habitat program.

Applicant:

Date _____

Name (print) _____

Signature _____

Co-Applicant:

Date _____

Name (print) _____

Signature _____