





What is the *my*HOME program?

The *my*HOME program is a **health and safety** repair program that provides <u>up to \$5,000</u> to eligible homeowners in certain neighborhoods to complete health and safety repairs to their home. There isn't a financial liability to the homeowner, the program is **FREE** to homeowners and does not have to be repaid. All costs including necessary permits are covered by the program and are paid for by Saint Joseph's Carpenter Society through the utilization of grants. The program covers the repair of basic systems in a home with a focus on safety and health. **The program does NOT include cosmetic items for your home.**

Who is Eligible to Apply?

The applicant must:

- Live in the neighborhoods of :
 - <u>East Camden, City of Camden, NJ</u> (Area Code: 08105; Census Tracts: Dudley, Marlton, Stockton, Rosedale)
 - o Cramer Hill, City of Camden, NJ (Area Code: 08105; Census Tracts: State to 36th St.)
 - o Other Certain Neighborhoods, Camden, NJ
- Own and occupy the home as his/her primary residence for at least the last calendar year
- Household income must be <u>less than</u> 80% of the median area income for 2023

Total Number of People in	80% of Area Median Gross
Household (including self)	Income for Camden County
1 Person	62,500
2 Person	71,400
3 Person	80,350
4 Person	89,250
5 Person	96,400
6 Person	103,550
7 Person	110,700
8 Person	117,850

How to Apply?

Any interested applicants should contact Saint Joseph's Carpenter Society to discuss eligibility and attain an application. **The application is on a first come, first serve basis.**

For further questions, or to receive and or Submit an Application please contact:
Iveliz Porrata @ 856-966-8117 (Ext225)

iporrata@sjcscamden.org 20 Church St. Camden NJ 08105







What is Eligible for Repair or Replacement?

Our primary focus is on safety and health of the occupants of the current home. Therefore, there will be a focus on major systems repairs. Next, items that are causing damage or creating hazards to homeowners will be addressed. Lastly, items that will improve energy efficiency for the homeowner will be addressed. **Under any circumstances - no cosmetic items will be addressed.**

The list below is intended to provide a working base, but is by no means inclusive of every item that may possibly arise. All repair materials will be contractor grade and are selected by our contractors. There are no substitutions allowed in material.

Eligible Items

Exterior

Roof, Gutters, and Fascia Water Infiltration
Siding, Stucco, and Brick – **Only if substantially damaged!**Steps
Handrails
Windows (Vinyl replacements)
Doors
Lights
Doorbell

Interior

Smoke and CO Detectors
Handrails, Balusters, and Banisters
Outlet Repair and Replacement
Kitchen Cabinet and Bathroom Vanity Repair
Electrical Hazards
Plumbing Leaks
Windows
Holes in Drywall
Flooring (Broken or Trip Hazards) – No cosmetic flooring improvements!
Bathroom Exhaust Fans
HVAC – Non-Working or for Energy Efficiency Upgrade
Basement Water Infiltration (Sump Pump and/or Drydock)

THIS IS A HEALTH AND SAFETY HOME PROGRAM. No cosmetic items will be addressed. Scope of work will be determined by project manager and accepted by contractor and homeowner. All materials will be contractor grade and is selected by our contractors. No substitutions are allowed.

Please initial here that	you have read and	understand these elis	gible repairs to	your home:	Date:	







Required Documents

Document Checklist

NJ	Driver's License or NJ Non-Driver's Identification (Adults Only)
So	cial Security Cards for all members of the household
La	st 4 paystubs – One month (for all employed members of the household)
De	ed or Mortgage Statement
Ot	her income information (if applicable)
0	SSI or Social Security Award Letter 2023
0	Unemployment Statement
0	Child Support Statement
0	Pension Statement
0	Welfare -Camden County Board of Social Services Award Letter (Cash Only)

FYI: If you need to obtain copies of current or past income tax returns, you can

• Call the IRS at 1-800-908-9946

OR

Go online to http://www.irs.gov/Individuals/Order-a-Transcript

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myHOME Program Procedure

The following is a step-by-step informational procedure of the myHome Process. <u>Please note: every case is unique and may require</u> more than one visit from SJCS staff and/or the contractor. <u>Contracting, inspecting and intake times may differ from client to client. You, as a client, have the right to OPT OUT of this program at any time.</u> In general, please expect a minimum of FIVE (5) visits from program staff, contractors and monitors.

- 1. After you complete your application, a SJCS staff member will review and verify your documentation, ownership status and income to determine if you qualify for this program.
- 2. Once we determine you qualify, you will receive official confirmation that you are participating in this program.
- 3. After you receive the confirmation, an SJCS staff member will set up an appointment with you to come and complete a preliminary walkthrough of your home to determine priority health and safety issues with a pre-selected contractor. SJCS will select the contractor to complete your work.
- 4. The pre-selected contractor will prepare a preliminary scope of work and cost estimate for the prioritized health and safety improvements in your home UP TO \$5,000. Please note: not all work will total to \$5,000 and we cannot EXCEED \$5,000 in your home. No COSMETIC ITEMS will be addressed.
- 5. In the event that the home requires more than \$5,000 worth of work, we will work with you to PRIORTIZE improvements that need immediate attention.
- 6. We will invite you to our office to attend a meeting on where you will sign off on the scope of work, cost estimate and sign a contract. You will receive copies of all documents at this meeting. At this meeting, please be prepared to provide your availability to the contractor to complete the work.
- 7. The contractor will reach out to you to schedule dates and times on when he or she can come to your home and complete the repairs. Repairs will use contractor-grade material and we will attempt to match what is existing in your home in-kind.

 Contractors are responsible in selecting the materials used for your repairs. No substations of materials are allowed.

 Typically, repairs take 2 to 3 weeks to finish.
- 8. After the contractor completes the work, SJCS will conduct a **FINAL WALKTHROUGH** where we examine the work for workmanship and ask you to sign off on the completion form.
- 9. Your home is now safer than it once was! No other documents or follow-ups are required.

By signing my name below, I certify that I have read the above information. Any questions concerning this procedure have be	en
discussed. My signature also certifies my understanding of and agreement with the above procedure.	

If you have any questions on MyHome process, please contact Marisol DiFrancesco, SJCS Intake Specialist, at 856-966-8117.

Print Name	Date
Sign Name	







			Date			
	pplication					
Owner Name:	Date of Birth	: Telep	Telephone Number:			
Address:		Mari	tal Status	s (circle one):		
		Married Single				
Race (circle all that			Disabled:			
Alaskan Native/ Pacif		D		X7 X1		
Asian Black White American Indian Island				Yes No		
Hispanic (circle one):		al Source:	7 11 T	XX 1 CX 6		
Yes No	Agen	ey w	/alk-In	Word of Mout		
Highest Level of Education (circle one):				Veteran (circle one		
HS/GED Associate's Bachelor's Master'			Other	Yes No		
Employer:	Job Tit	le:		Status (circle one):		
				Full Time Part Time		
Second Employer (if applicable):	Second	Job Title:		Status (circle one):		
				Full Time Part Time		
_		_				
Co-Owner Name:	Date of Birth	Date of Birth: Telephone Number:				
Address:		Mari	tal Status	(circle one):		
			Married	l Single		
Race (circle all that a	apply):	Disabled:				
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Alaskan Native/ Pacific	Other					
Asian Black White American Indian Islande	Other Multiple			Yes No		
Asian Black White American Indian Islande Hispanic (circle one): Alaskan Native/ Pacific American Indian Islande	Other Multiple	al Source:		Yes No		
Asian Black White American Indian Islande Hispanic (circle one): Yes No	Other Multiple	al Source:	/alk-In	Yes No Word of Mout		
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TOTAL number of people in the household, including yourself:

Information for **ALL** other Members of Household:

Name

1			
2			
3			
4			
5			
6			
7			
Employment Informati Household Member Name:	on for Hou	ısehold Men	ıbers
Troubenoid fremmer frame.			
Employer:	Employer Pl	none Number:	
Employon Adduses		(single one).	
Employer Address:		(circle one): Full Time	Part Time
		Full Tillle	Part Time
Household Member Name:	Job Title:		
Employer:	Employer Ph	none Number:	
Employer Address:		(circle one):	
		Full Time	Part Time
Household Member Name:	Job Title:		
Employer:	Employer Ph	one Number:	
Employer Address:	·	(circle one):	
		Full Time	Part Time

Birth Date

Relationship to Owner



St. Joseph's Carpenter Society - Client Disclosure Statement

St. Joseph's Carpenter Society is a nonprofit organization with a mission to improve the quality of life of the people of Camden by promoting affordable homeownership and neighborhood development. Through education initiatives, we encourage people to take charge of their lives and become active community members. To assist residents and potential residents, we offer the following products and services:

- MyHome Home Improvement Document
- Pre-Purchase Homebuyer Education workshops;
- Pre-Purchase One-on-One counseling;
- Pos-Purchase One-on-One counseling
- Units for Rent;
- Homes for Sale.

These products are available to any client that requests it; however, we do not steer or expect any of our clients to utilize these products beyond their initial service. *Clients are not obligated to receive any other services offered by the organization or its partners.*

Client Statement

	entioned disclosure and understand that I am under no obligation or steered toward using any products or services beyond my initial service.	
Client Signature	Date	_

Privacy Policy and Practices of St. Joseph's Carpenter Society

SJCS respects your privacy. We know it is important to keep your non-public personal information confidential. You have our assurance that SJCS will do our best to handle your non-public personal information (defined below) with discretion and care.

such significant sources of sourc

Information we collect

To assist you in obtaining affordable housing, SJCS collects and uses publicly available information as well as non-public personal information. We collect non-public personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us, our affiliates or others;
- Information we receive during personal interviews;
- Information we receive from personal and employment references;
- Information we receive from personal documents such as a social security card, driver's license, government identification, court order or decree, tax return, W-2, 1099 or pay-stub; and
- Information we receive from a consumer reporting agency.

Information we disclose

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

- Information we received from you on applications or other forms, such as your name, address, social security number, employer, occupation, assets, debts and income;
- Information about your transactions with us, our affiliates or others, such as your account balance, payment history and parties to your transactions; and
- Information we receive from a consumer reporting agency, such as your credit bureau reports, your credit history and your creditworthiness.

To Whom Do We Disclose

We may disclose your personal information to the following types of unaffiliated third parties:

- Financial service providers, such as companies engaged in providing home mortgages; and
- Others, such as nonprofit organizations involved in community development, but only for review, auditing, research and oversight purposes.

If you prefer that we not disclose personal information about you to unaffiliated 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). A Privacy Choices Form will be provided to you to opt out upon receipt of written request. Please send request to:

St. Joseph's Carpenter Society 20 Church Street Camden, NJ 08105 ATTN: Director of Counseling

We may also disclose personal information about you to third parties as permitted by law. *Prior to sharing personal information with unaffiliated third parties, except as described in this policy, we will give you an opportunity to direct that such information not be disclosed.*

Confidentiality and Security

We restrict access to personal information about you to those of our employees who need to know that information to provide products and services to you and to help them do their jobs. We maintain physical and electronic security procedures to safeguard the confidentiality and integrity of personal information in our possession and to guard against unauthorized access. We use locked files, user authentication and detection software to protect your information. Our safeguards comply with federal regulations to guard your personal information.

I/we acknowledge the receipt of a copy of the Privacy Policy and Practices of St. Joseph's Carpenter Society.

Client Signature	Date
Client Signature	Date
Counselor Signature	Date

Privacy Choices Form

If you want to opt out, that is direct us not to make disclosures about your personal information (other than disclosures

permitted by law) as described in the Privacy Police boxes below to indicate your privacy choices. There	and Practices of St. Joseph's Carpenter Society, check the box or send this form to the address listed below.
☐ Box 1 – Limit disclosure of personal information organizations involved in community development	about me to unaffiliated third parties other than nonprofit .
\square Box 2 – Limit disclosure of personal information development that are used only for review, auditir	about me to nonprofit organizations involved in community g, research and oversight purposes.
Name:	
Address:	
City:	
State:Zip Code	
Signature:	

If you have checked any of the boxes above, please mail this form in a stamped envelope to:

St. Joseph's Carpenter Society 20 Church Street Camden, NJ 08105

Please allow approximately 30 days from our receipt of your Privacy Choices Form for it to become effective. Your privacy instructions and any previous privacy instructions will remain in effect until you request a change.

STOP. This portion will be completed by SJCS.

Household Income Calculation

					-	
Namas						
Name:						
Employment	\$					
Social Security/SSI	\$					
Pension	\$					
Child Support	\$					
Public Assistance	\$					
Unemployment	\$					
Other	\$					
TOTAL (Monthly Income)	\$					
Total mon	Total monthly household income:		come:	\$_		
Total annual household income:		come:	\$_			