

Aging in Place Home Repair Program

Ensure you are eligible for the program. Applicant's household income must be below 80% of the current Area Median Income of Westchester County for their household size.

Area MEDIAN INCOME (AMI) Westchester: \$170,000*	1-person household	2-person household	3-person household	4-person household	5-person household	6-person household
80% AMI	\$95,200	\$108,800	\$122,400	\$136,000	\$146,900	\$157,750

*As of May 2025

- Applicants must be the owner of their home, and occupy it as their primary residence.
- Applicants must reside in Westchester County.
- Applicants must be at least 62 years old.

Habitat for Humanity New York City and Westchester County's (Habitat NYC and Westchester) resources at this time allow for the following types of repair projects: simple Aging in Place modifications (such as grab bars, handrails, switch and doorknob replacement, lighting, toilet seat height adjustment, etc.), porch repair and external accessibility assistance, and bathtub to walk-in shower conversions; scope items will be dependent on current funding available. Please detail your priorities on the application, and understand that the final scope of work will be based on a visit to your home with the contractor as well as the grant funding we have available.

Additionally, Habitat NYC and Westchester will work directly with a NYSERDA-certified contractor on a referral basis to determine if each applicant is eligible for further assistance such as energy efficiency upgrades.

Complete applications with all required supporting documentation will be accepted based on a first come first served basis. Habitat NYC and Westchester is not able to accommodate every request we receive.

Sincerely,

Habitat for Humanity New York City and Westchester County

Homeowner Application

INSTRUCTIONS

Please adhere to these instructions in completing and submitting this application.

All information provided will remain confidential. Failure to properly complete and submit this application could result in denial of services.

For assistance, email aginginplace@habitatnycwc.org or call 914.240.7003

1. Please check off the list below to confirm that you are eligible for the Aging in Place Home Repair Program of Habitat NYC and Westchester.

- You are the owner of the home needing work, and occupy it as your primary residence; Habitat NYC and Westchester can only perform repairs on Homeowner Occupied Homes
- You reside in Westchester County
- You are at least 62 years old

2. Accurately and completely provide information requested on the following pages.

- Be sure to sign the application on the final page

3. Be prepared to provide the following supportive documentation.

- Photo IDs for all Applicant household Members over 18 years of Age (driver's license, military ID, or other government-issue ID)
- Bank account statements for all accounts past three months

4. Submit the Homeowner Application to Habitat NYC and Westchester

- Complete and sign application
- Submit application via one of the following:

Email:

aginginplace@habitatnycwc.org

Mail / hand deliver:

Habitat NYC and Westchester
111 John St
Suite 770
New York, NY 10038

APPLICATION

1. BASIC INFORMATION

Date of Application: _____

Name of Applicant (Homeowner): _____

D.O.B. (mm/dd/yy): _____

Address of Property:

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____

Email address:

Are you a veteran? (YES/NO) _____

2. HOUSEHOLD INCOME

- Applicant's household income must be below 80% of the current Area Median Income of Westchester County (calculated using HUD Guidelines of NYS). There is no minimum income required.
- Use separate sheet if you need more space
- Be prepared to provide two recent paystubs of ALL working adults that reside at this property

Please identify ALL occupants (including applicant) residing at this property, and their income.

List ALL full-time, part-time, seasonal and/or temporary employment for ALL household members. Include overtime pay, commissions, fees, tips, bonuses and/or self-employed earnings:

FIRST NAME	LAST NAME	RELATIONSHIP	AGE	D.O.B. (mm/dd/yy)	EMPLOYER	ANNUAL INCOME

OTHER SOURCES OF INCOME: (E.g. social security, SSI, pensions, disability compensation, unemployment compensation, interest, baby-sitting, care-giving, alimony, child support, annuities, dividends, income from rental property and/or Armed Forces Reserves.)

FIRST NAME	LAST NAME	SOURCE	ANNUAL INCOME
TOTAL ANNUAL HOUSEHOLD INCOME			

3. PROPERTY OWNERSHIP

1. Are you (the applicant) a primary owner of this property? (YES/NO) _____
2. When did you purchase your home? (YEAR) _____
3. Do you have a mortgage on this property? (YES/NO) _____
 - a. If yes, with what bank or institution?

 - b. If yes, what is your monthly mortgage payment?
\$ _____

- c. If yes, are your mortgage payments current? (YES/NO) _____
- d. Do you have the deed to your property? (YES/NO) _____
- 4. Are the property taxes paid and current? (YES/NO) _____
- 5. Is your primary residence at this property? (YES/NO) _____
- 6. Does anyone pay rent to live at this property? (YES/NO) _____
 - a. If so, how much monthly rental revenue do you receive?
\$ _____
- 7. Do you fully understand the eligibility requirements and homeowner obligations as described on the cover page of this application? (YES/NO) _____
- 8. Have you had repairs performed by Habitat before? (YES/NO) _____
- 9. Do you live in a condo or co-op? (YES/NO) _____

4. DOCUMENTATION

All household members must submit copies of the following documents with their application:

- The two most recent w2 and federal tax federal tax returns
- Most recent pay stubs (3 months)
- Documentation on any other source(s) of income (E.g. social security, pension, annuity payments)
- All bank, credit union and investment statements (all pages) (3 months)
 - Include checking accounts, passbook savings, CDs, trust accounts, mutual funds, etc.
- Most recent retirement fund account statements (E.g. 403b, 401k)
- Identification (social security card, and drivers' license *or* birth certificate)

Additional documents may be requested.

I/ We hereby affirm that the information provided on this application (including any attached papers) are true and complete to the best of my/our knowledge. I/ We also understand that falsified information or significant omissions may disqualify me/ us from further consideration for SERVICES.

Applicant Signature Co-Application Signature Date (mm/dd/yy)

With this application, I, the homeowner and resident of this property, request the following service from the Home Repair Program of Habitat NYC and Westchester.

Please check one or more of the following boxes:

Interior accessibility repairs/modifications (E.g. grab bars, handrails, doorknobs, trip prevention)

Exterior accessibility repairs/modifications (E.g., porch repair, step repair)

Dependent on funding availability:

Bathroom/kitchen remodel (E.g. bathtub removal, no-step shower installation, door widening)

Stair lift, entry ramp

The following services are not provided by Habitat NYC and Westchester but can be accessed with a referral to our partner agency, Censible House:

Electrification (E.g. HVAC/water heater, kitchen, and laundry appliance replacement)

Weatherization (E.g. air sealing and insulation)

Envelope Restoration (E.g. roof repair, windows/doors replacement, siding)

Describe the modification(s)/repair(s) needed, and any needs beyond those listed above:

Describe how current conditions are impacting the safety/security of you and your family:

ACKNOWLEDGEMENT & AGREEMENT

Please initial each item and sign at the bottom of this section.

The undersigned do hereby acknowledge and agree as follows:

_____ All information provided herein or attached is true and accurate to the best of Applicant's knowledge. Applicant acknowledges that providing false or misleading information on this application or in interview will lead to denial of services.

_____ Applicant will provide additional information and documentation upon request, necessary to determine eligibility and secure assistance from Habitat NYC and Westchester and partner agencies.

_____ **Applicant acknowledges that submission of this application does not guarantee participation in the program and receipt of Home Repair assistance.** Participation is determined by Habitat NYC and Westchester, at their sole discretion, based on program guidelines, eligibility criteria, regulatory requirements, funding availability and scope of Westchester Habitat's abilities to perform scope of work required.

_____ For Repairs that cost over \$5,000 Habitat NYC and Westchester reserves the right to apply a lien to the property. This lien is intended to prevent immediate resale of homes after the work is complete.

_____ Subsequent to application and approval, program participants will be required to complete and execute additional documents and agreements, including, but not limited to, Contract Agreement, disclosures, construction permits and certifications. Failure to do so may terminate Applicant's participation in the program and receipt of assistance.

_____ The scope of repairs, modifications and improvements to be carried out cannot be finalized until the Applicant's eligibility for assistance is determined and approved by Habitat NYC and Westchester.

_____ Habitat NYC and Westchester, its partner agencies, contractors, volunteers and other parties involved in the program will be provided with reasonable access to the property, to carry out repairs and improvements. Normal noise and debris will occur as part of the construction process and will be tolerated by property residents and their neighbors.

_____ Financial assistance is granted at the discretion of the organization based on availability of funds and needs of homeowner. Homeowners may choose to contribute to repair projects financially.

_____ After work is complete, homeowner signs a Certificate of Completion, thereby indicating acceptance of workmanship. Habitat NYC and Westchester offers guarantee of product and workmanship for **30 days** beyond signing of Certificate of Completion.

_____ Applicant will hold harmless Habitat NYC and Westchester and any other agency or organization providing home repair/modification assistance in any way as part of this program, from any liability resulting from services rendered.

As Applicant, I do hereby affirm truth and accuracy in all information provided in this application. I acknowledge all terms of pending agreement between myself as Homeowner and Habitat NYC and Westchester and its representatives.

Print Applicant Name (Homeowner)

Applicant Signature (Homeowner)

Date (mm/dd/yy)

For assistance, email aginginplace@habitatnycwc.org or call 914.240.7003

For the safety of all who participate in the repair project, please initial the following statements. **In order for repairs to be performed, this page must be signed off on by the applicant. Failure to initial and sign will result in Habitat NYC and Westchester being unable to perform repairs requested.**

COVID19 COMPLIANCE AGREEMENT

Please initial each item to indicate agreement.

In order to participate in a repair that is sanctioned by Habitat NYC and Westchester, I agree to the following:

I understand that no members of my household can be experiencing symptoms of COVID-19 while Habitat NYC and Westchester is performing repairs. I will inform _____ Habitat NYC and Westchester or its representatives if anyone is experiencing symptoms so the repair can be rescheduled.

I understand that if any members of my household have had COVID-19 5 days prior to _____ the repair, they must be masked as per CDC recommendations.

I understand that no members of my household will have tested positive with COVID-19 within 5 days of work being performed. I will inform Habitat NYC and _____ Westchester if anyone is positive so the repair can be rescheduled.

I understand that if any members of my household are not vaccinated they must be _____ masked at all times around Habitat NYC and Westchester staff and volunteers.

Please note: As of February 10, 2022, NYS no longer mandates masks for those who are fully vaccinated, including boosters indoors. Mask mandates may be modified at any point in time.

Signature: _____

Print Name: _____

Date: _____

(FOR OFFICE USE ONLY)

