ACCEPTING APPLICATIONS FOR WORKFORCE HOUSING

September 25 - October 13, 2023

2 Newly Constructed Four Bedroom Homes **\$507,000**

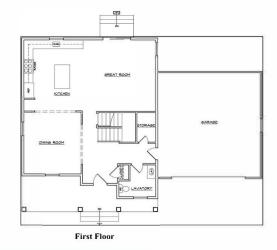
\$3,000-\$3,900/month with tax and insurance

(Down Payment Assistance May Be Available)



HOME FEATURES

4 BEDROOMS
2 1/2 BATHROOMS
1,997 SQUARE FEET
2 CAR GARAGE
.40 acres
UNFINISHED BASEMENT





Second Floor

DOWNLOAD APPLICATION WWW.SOUTHAMPTONHA.ORG

QUESTIONS:

Email: info@southamptonha.org Office: (631) 488-4220 ext. 203



Homes & Community Foundation

Better Communities, Better Lives

501c3 Non-Profit Board of Directors Dear Applicant(s),

Bonnie M. Cannon President On behalf of the CAMPO Brothers, you are invited to participate in a Lottery for one of the 2 newly constructed homes, in a newly developed subdivision located in Hampton Bays New York, Town of Southampton. These two homes are being sold under the Town of Southampton First Time Home Buyer Workforce Housing Program.

Barbara Fair Vice President/ Treasurer

Zach Epley Member

Dan Gasby Member

Curtis E. Highsmith
Executive Director

A formal application and related program documents are enclosed. Please read and carefully examine the program outline to see if you meet all of the requirements. Submission of the application does not guarantee an opportunity to purchase a home. Final selection of a homebuyer will be based on meeting income requirements, ability to secure a mortgage, and meeting all program guidelines. A Lottery will be held to determine the two candidates and establish the waiting list. All completely executed applications and required documents must be received at:

ASCEND Homes and Community
57 Springville Road Unit 34A
Hampton Bays, NY 11946
Attention: The Woods at Hampton Bays

DO NOT FAX OR EMAIL APPLICATIONS OR DOCUMENTS

If you are selected and offered the opportunity to purchase one of the homes, you must continue to meet all program requirements up to the date of closing on the home. ASCEND Homes and Community is not a bank or lender, and will not render credit decisions. Each applicant is responsible for securing financing. Should you have any questions, please contact 631-488-4220 ext. 203

Sincerely;

Curtis E. Highsmith, Jr.

Executive Director/ASCEND







FIRST-TIME HOME BUYER WORKFORCE HOUSING PROGRAM

PROGRAM GUIDELINES

Please read carefully and retain these guidelines as they contain important program information.

APPLICATIONS ARE BEING ACCEPTED COMMENCING 9:00 AM ON SEPTEMBER 25, 2023.

ASCEND Homes and Community, in cooperation with the CAMPO Brothers, is pleased to announce that it is accepting Applications, on a first-come first-served basis, for two newly constructed homes in the Town of Southampton located at 3 & 11 Gateway Court Hampton Bays, New York. Set forth herein are the Program Guidelines with respect to eligibility for the units.

ASCEND is responsible for implementing and administering the application and qualification process for the unit on behalf of the CAMPO Brothers. ASCEND strictly complies with these Program Guidelines and applicants are urged to read them thoroughly. Applications will be reviewed for compliance and completeness. ASCEND staff is available to answer questions or provide any assistance regarding eligibility. If you have any questions regarding any of the Program Guidelines, or need assistance including translation and/or oral interpretation services, please contact **ASCEND** at 631-488-4220 ext. 203 or email **ASCEND** at info@southamptonha.org before applying. Submission of required documentation or determination of income eligibility does not guarantee the purchase of a home. PLEASE BE GUIDELINE S AR E SUBJECT TO CHANGE IN THE

APPLICATIONS MAY ONLY BE SUBMITTED BEGINNING 9:00 AM ON SEPTEMBER 25, 2023. THE SUBMISSION PERIOD WILL END 4:00 PM ON OCTOBER 13, 2023. PLEASE **CONSULT WWW.Southamptonha.org FOR UPDATED INFORMATION.**

NO APPLICATIONS WILL BE ACCEPTED BEFORE SEPTEMBER 25, 2023

Program Description

ADVISED

THAT

THE

PROGRAM NEW REQUIREMENTS ARE ADOPTED BY THE TOWN or SPONSOR.

Campo Brothers are constructing 2 single family detached homes located at 3 and 11 Gateway Court in the Hamlet of Hampton Bays, NY 11946. Each home will be a two-story structure, just under 2,000 square feet of living space, containing four bedrooms, two car garage, unfinished basement and 2 ½ bathrooms. The homes will be sold as new construction, with central A/C and the contractor will provide manufacturer warranties for the products/material installed and a one-year guarantee for workmanship.





Each home will be available to income eligible first-time home buyers with incomes that do not exceed 130% of the Area Median Income (AMI) for Nassau/Suffolk County, adjusted for household size, as determined by the U.S Department of Housing and Urban Development (HUD). Income is verified at the time a Contract of Purchase is signed. Additional eligibility requirements apply as set forth herein.

Purchase Price

The unsubsidized purchase price is estimated to be \$507,000. The subsidized purchase price is estimated to be \$477,000 after factoring in a \$30,000 down payment assistance from Suffolk County HOME Down Payment Assistance. All subsidies are subject to funding availability and program requirements. ASCEND does not administer the subsidy program.

Taxes

Annual taxes are estimated to be approximately \$5,000. Please note that these are estimates as provided by the Town of Southampton only, and is not a guarantee of the required taxes, and the applicant shall independently confirm same with the Town of Southampton.

PROGRAM ELIGIBILITY

In order to be eligible to participate in the Program, a home-buyer must meet all eligibility requirements including income limits, home-buyer contribution requirements and have an acceptable credit history as defined by the standards contained in these guidelines. These standards reflect the objective that the housing being developed is affordable to and sustainable by the homeowner.

Income Guidelines

The <u>minimum</u> combined household income is \$95,000 annually. The maximum permitted total annual **household** income for purchasers in the Program shall not exceed 130% of AMI as determined by HUD at the time of execution of a Contract to Purchase.

Maximum allowable income at 130% AMI*:

| Household Size | Maximum Total Annual Household Income ** |
|----------------|--|
| 1 | \$142,250 |
| 2 | \$162,600 |
| 3 | \$182,900 |
| 4 | \$203,200 |
| 5 | \$219,450 |
| 6 | \$235,700 |
| 7 | \$252,000 |
| 8 | \$268,250 |

2





*Based on 2023 HUD median uncapped income guidelines. Income limits may change annually based on HUD established Nassau/Suffolk median guidelines and for purposes of rounding adjustments.

**Income includes all income — overtime, bonuses, pensions, social security, 401K distributions, tips, etc. Total household income minus allowable exclusions cannot exceed the maximum annual income listed above for your household size. ASCEND must project the income that will be received for the upcoming 12-month period. Tax returns will be required for all household members whose earnings will be used as part of the income qualification.

First Time Home Buyer Requirement

This program is limited to first-time homebuyers only as described below:

- A household that has not owned a home during the three-year period immediately prior to the date of application for assistance is considered to be a first-time homebuyer.
- Applicants may own vacant land or a vacation timeshare provided that they have not received the benefits of the mortgage interest deduction and/or property tax deduction during the prior three years from date of application for assistance.
- Applicants who do not hold title to a home but did receive the benefits of the mortgage interest deduction and/or property tax deduction during the prior three years from date of application are not considered first-time homebuyers.
- Please contact ASCEND with any questions regarding this requirement.

Home Buyer Contribution

Applicants, at time that the application is submitted to ASCEND, must have a minimum of 3% of the purchase price in savings and/or checking accounts (not a gift) or verifiable liquid assets from their own funds to apply towards the down payment. The amount required for a 3% down payment must be shown in the most recent bank statements. The bank statements submitted must show the bank name, account holder's name and account number with a detailed list of transactions. At a minimum, the applicant should expect to need sufficient funds of 5-10% of the sales price for down payment and closing costs.

Gift Letter

ASCEND will allow a gift letter from an immediate family member stating that the money provided is in the form of a gift and will not have to be repaid. This letter must be signed, notarized and submitted with the Application. This gift contribution **cannot** be used towards meeting the required minimum 3% home buyer down payment contribution referenced above.





Principal Residence Requirement

Applicants must occupy the property as their Principle Residence.

Affordability/Re-Sale & Recapture Restrictions

Restrictions may apply as determined by Suffolk County.

Citizenship

Each applicant must be either a U.S. Citizen or a Qualified Alien, as defined at 8 USC 1641.

Pre-Purchase Home Ownership Counseling

Eligible applicants are required to attend homebuyer pre-purchase home ownership counseling. Certified counselors will conduct the counseling. There is no charge for the counseling. Please do not make an appointment for counseling until you receive a formal letter from the credit agency ASCEND selects, that you are eligible for the program.

Mortgage Ability

Applicants must have adequate resources and credit to qualify for a home mortgage, if applicable. ASCEND can assist qualified applicants in securing a mortgage. However, it is the sole responsibility of the applicant to secure a mortgage. Applicants must submit to ASCEND all standard documentation required for mortgage processing, including signed copies of the last three years of their Federal Income Tax Returns, W-2 forms, 1099 statements, four (4) most recent consecutive pay stubs, two (2) most recent, consecutive months bank statements (all pages) and investment accounts showing assets needed for down payment and closing costs.

This documentation is required for all household members age 18 and over. Applicants should also have a good credit record and stable earnings history. ASCEND is not a bank or lender, but will conduct a mortgage ability analysis to assess an applicant's ability to obtain a mortgage and to sustain homeownership. Factors to be considered in this analysis include income, employment, down payment, credit history and adherence to Program Guidelines. All loans to finance the purchase of the home will be reviewed to ensure that they meet program guidelines.





Affordability

Affordability of the unit will vary depending on income, sales price, insurance requirements, interest rates, property taxes, and buyer down payment. To purchase the home, applicants must have:

- Sufficient income to pay the monthly mortgage payment, including property taxes, common charges, and insurance premiums. Applicants must also have sufficient funds for a down payment and closing costs estimated at 5-10% of the sales price; and
- The ratio of total monthly housing cost (i.e. mortgage payments, property taxes, insurance premiums plus other debt (e.g. credit cards, car payments, school loans, etc.) to monthly household income may not exceed 45%.

Credit History Standards

The following credit history standards will be analyzed in conjunction with income limits to determine program eligibility:

- Applicants must have an overall good pattern of credit behavior including a history of timely payments
 for rent, automobile and installment loans, credit cards and revolving loans as described below. If
 a good payment pattern has been maintained, isolated cases of slow/late payments may not
 disqualify an applicant for program eligibility.
 - Applicant must not have been late on rental payments in the last 12 months.
 - Payments on automobiles and installment loans should reflect no late payments in recent 24 months.
 - Payments on revolving loans or credit cards should not have any late payments in recent 24 months.
- Applicants must have a satisfactory income, credit and employment history.
- At a minimum, a bankruptcy must have been discharged at least three years from date of application and credit re-established.
- At a minimum, a foreclosure sale or a transfer of title in a deed in lieu of foreclosure must be at least three to five years old from date of application.
- No outstanding collection accounts or judgments.
- As part of the credit history and mortgage ability review, ASCEND will utilize the middle credit score of all borrowers from three national credit repositories. At a minimum this credit score must be at least 580. (Higher credit scores may be required by lenders).
- The credit standards listed above are to determine program eligibility and do not represent a mortgage approval. The applicant is responsible for securing a mortgage approval through a responsible lending institution.

APPLICATION PROCESS

In order to ensure a fair and impartial selection process, each applicant who submits an application will be selected through a lottery. To be considered for the Program, the applicant(s) must submit an **Application**, together with all required documentation. Following the submission deadline, all of the names of the applications received within the deadline will participate in a lottery. Names will be pulled and allocated a number based on the order in which they are selected, until all names have been chosen and a complete waiting list is established. Applicants one (1) and two (2) on the waiting list will have 10 days to present a mortgage pre-qualification or pre-approval prior to entering into a purchase contract. If an applicant is unable to secure lending, the next number off of the waiting list is selected chronologically until the wait-list is exhausted or a qualified buyer closes on the purchase of the property whichever occurs first.

Applications are available on the website at https://www.southamptonha.org/housingresources. Applications may also be requested by calling Southampton Housing Authority at 631-488-4220 ext. 203 or by emailing info@southamptonha.org.





If the required documentation is not submitted by such date, the applicant will be deemed ineligible for the Program.

The Application and required documentation can ONLY be submitted:

- (1) by mail to ASCEND's offices at 57 Springville Road Unit 34A Hampton Bays, NY 11946, ATTN: The Woods at Hampton Bays;
- (2) by hand-delivery to ASCEND's office at 57 Springville Road Unit 34A Hampton Bays, NY 11946

REVIEW PROCESS

As an applicant's name is reached on the waitlist, ASCEND will review the file to determine if all required documentation was submitted. If not, then ASCEND will send notice to the applicant, by email or regular mail if no email is available, indicating what documentation is missing. The missing documentation must be received by ASCEND within ten (10) business days of the notice date. If the documentation is not received within such 10-day period, the applicant will be deemed ineligible and ASCEND will move on to the next person on the waitlist. Should applicants be deemed ineligible, ASCEND will notify applicants by email or regular mail if no email is available and will move on to the next name on the Waitlist.

Documentation shall be deemed received by ASCEND as follows: (1) if sent by mail, then on the date of actual receipt by ASCEND (not the postmarked date); (2) if received in person, then on the date of receipt by ASCEND.

If all documentation is received within the timeframe, ASCEND will then conduct an eligibility review to determine if the applicant meets all Program Guidelines. A letter from ASCEND detailing eligibility will be sent to the applicant after a full review of the Application has been completed. An applicant who is determined to be eligible will be offered the home to purchase. The applicant must, subsequently, begin the home buying process with the CAMPO Brothers. Should the applicant be deemed ineligible or, if eligible, elect not to move forward in purchasing the home, ASCEND will move on to the next name on the waitlist.

FAIR HOUSING AND NON-DISCRIMINATION

ASCEND is committed to promoting fair housing, equal opportunity, and non-discrimination in compliance with all federal, state and local laws, including, but not limited to, the Fair Housing Act, as amended by the Housing for Older Americans Act, the Americans with Disabilities Act, the Civil Rights Act, and the New York State Human Rights Law and all Fair Housing Laws will be followed. The ASCEND staff is available to assist with the application, and answer questions about eligibility requirements. In furtherance of this policy, ASCEND shall not discriminate on the basis of race, creed, color, national or ethnic origin, sex, sexual orientation, gender identity, familial status, source of income, religion, disability, veterans' status, age, or any other basis prohibited by law.

LIMITED ENGLISH PROFICIENCY AND ACCOMMODATIONS

Applications and Program Guidelines are available in English and Spanish and will be made available in other languages as requested. ASCEND will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) and persons who need assistance or who have a limited ability to speak, read, or write English, will have meaningful access and an equal opportunity to participate in the Program. Interpreters, translators and other aids needed to comply with this policy shall be provided as reasonably necessary. If you have any questions regarding the guidelines, or need assistance including translation and/or oral interpretation services, please call ASCEND at 631-488 4220 ext. 203 or contact the Southamton Housing Authority at info@SouthamptonHA.org.





Disclaimer: It is understood that this is not an offer and that terms and conditions may be changed at any time. It is further understood that notices by the ASCEND Homes and Community., and Affiliates may be made in such manner as ASCEND Homes and Community, and Affiliates may determine, including solely by advertisement or email. It is also understood that entry into the program is not a guarantee that you meet all program requirements to purchase a home.





THE WOODS at HAMPTON BAYS Workforce Housing Program Formal Application - Non-Age Restricted

APPLICANT INFORMATION

| a) | Primary Applicant Name: | | |
|--------|------------------------------|---------------------------------|---|
| | | First M. | .I. Last |
| | Address | | |
| | Street Address | То | wn Zip |
| | Home Telephone # | Cell Phone | # |
| | Work Telephone # | E-mail | |
| | Date Moved to This Address: | /Primary Lar | nguage: |
| b) | Co-Applicant Name: | | |
| | First | M.I. | Last |
| | Address | | |
| | Street Address | То | wn Zip |
| | Home Telephone # | Relationship to Prima | ry Applicant: |
| | Cell Phone # | E-mail | |
| Will y | ou and all household members | s occupy the house as your prim | nary residence? Yes No |
| Are yo | ou a first-time homebuyer? | Yes | □No |
| Do yo | u presently own a home and/c | or other real property? | |
| Prima | ry Applicant: 🔲 Yes 🗌 No | Co-Applicant: Yes |] No |
| circun | | • | above question, please explain the keep in mind this is a first-tim |



1. 2. 3. 4. 5. 6. 7.

13 Asian

14 American Indian or Alaska Native

15 Native Hawaiian or Other Pacific Islander

16 American Indian/ Alaskan Native and White



| Have you owned a | a home and/or o | ther real | property with | in the last thre | e (3) years? | | |
|---------------------------------------|-------------------------------|---------------------------|------------------------------|----------------------------|---------------------------|------------------------|--------|
| Primary Applicant | : Yes No | Co- | Applicant: | Yes No | | | |
| | | | 1 //> | -6" | | | |
| If either primary a circumstances und | | | | :S" to the abo | ove question, p | lease expla | in the |
| on campianees and | aci illion you ne | 71011861 | | | | | |
| | | | | | | | · |
| HOUSEHOLD INFO | ORMATION | | | | | | |
| | | | | _ | _ | | |
| a) Total num | ber of househol | d memb | ers that will oc | cupy the new | home: | _ | |
| Complete the following | ng information for e | ach house | hold member tha | t will occupy the | home being purch | nased: | |
| Name .ast, First, MI) | Relationship to the Applicant | Sex* (M /F / Other) | Birth Date (mm, dd, yyyy) | Full-Time Student (Y/N) | Social Security Number | Ethnicity* Yes / No | Race |
| | Applicant | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | INFORM | IATION F | OR HUD MON | ITORING PURI | POSES | | |
| This question is be | | | | | | requiremen | ts and |
| to assure that no | | | • | | • | | |
| will not affect, in a chart above. | any way, your sel | ection fo | or the program. | See below for | r details on how | v to comple | te the |
| chart above. | | | | | | | |
| Ethnicity | | | | | _ | | |
| Are household me member. | embers Hispanic | or Latino | o? On the chart | above enter y | es or no for ea | ch househo | ld |
| Race On the above cha | rt, enter the num | nber that | corresponds to | o the race of e | ach household | member lis | sted |
| <u>11</u> White | | | 17 A | sian and Whit | e | | |
| 12 Black/ African | American | | | | merican and W | /hite | |

2

19 Amer. Indian/ Alaskan Native and

Black/African American

20 Other Multi-Racial

21 Asian/Pacific Islander





b) <u>Citizenship</u>

| Each applicant must be either a U.S. Citizen or a Qualified Alien (as defined at 8 USC 1641). | | | | | |
|--|--------|--|--|--|--|
| Is the Primary Applicant a U.S. Citizen or Qualified Alien? Is the Co-Applicant a U.S. Citizen or Qualified Alien? | Yes No | | | | |
| If you are a Qualified Alien, please submit proof of Qualified Alien status with this application. | | | | | |

ECONOMIC PROFILE

a) <u>Current Employment:</u> List any and all <u>current</u> employers for <u>each</u> wage earner over <u>"18" years</u> old listed as a household member. Do not list past employers. Please include a separate sheet if additional space is needed.

| Name: | Employed by: | Gross Annual Income: \$ |
|-------|-------------------|------------------------------------|
| | Location Address: | Employer Telephone: |
| | Job Title: | Full Time employee? |
| | Date Hired: | YES / NO Please circle your choice |
| Name: | Employed by: | Gross Annual Income: \$ |
| | Location Address: | Employer Telephone: |
| | Job Title: | Full Time employee? |
| | Date Hired: | YES / NO Please circle your choice |
| Name: | Employed by: | Gross Annual Income: \$ |
| | Location Address: | Employer Telephone: |
| | Job Title: | Full Time employee? |
| | Date Hired: | YES / NO Please circle your choice |

3





b) Check the box for each income source of each household member age 18 and older. Sources of income include earned income from employment as well as income from trusts, social security, pensions, dividends, alimony, etc.

| INCOME SOURCE | | Household Member Name | | | | |
|-------------------|--------------|-----------------------|--------------|----|--|--|
| IIVEONIE SOOKEE | a. Applicant | b. Co-Applicant | c. Household | d. | | |
| Self-Employment | | | | | | |
| Alimony | | | | | | |
| Investment Income | | | | | | |
| Pensions | | | | | | |
| Social Security | | | | | | |
| Unemployment | | | | | | |
| Taxable Interest | | | | | | |
| IRA Distributions | | | | | | |
| SSI | | | | | | |
| SSDI | | | | | | |
| Child Support | | | | | | |
| Other Income | | | | | | |





ASSETS

Please provide current information for each bank account held by <u>any household member(s) age 18 or older</u> and send copies of <u>all pages</u> of the last two (2) months' bank/financial statements for each account listed below. Please list <u>all accounts</u> and include a separate sheet for any other financial information. Also include any retirement accounts, such as 401-K accounts, stocks, bonds, money market accounts, IRA accounts, certificates of deposits (CD accounts), etc.

| Name(s) on the A | Account: | | Name(s) on the | Account: | | | |
|---------------------|-----------------|-----------------------|---------------------------------------|----------------|------|-------|----|
| Bank Name: | | Bank Name: | | | | | |
| Account Number: | | Account Number | r: | | | | |
| Current Balance | (as of today's | date): | Current Balance | (as of today's | da | te): | |
| Check Account | Savings | | Check Account | Savings | | | |
| Type: | Checking | | Туре: | Checking | | | |
| | Other | | | Other | | | |
| | | | | | | | |
| Name(s) on the A | Account: | | Name(s) on the | Account: | | | |
| Bank Name: | | | Bank Name: | | | | |
| Account Number | r: | | Account Numbe | r: | | | |
| Current Balance | (as of today's | date): | Current Balance | (as of today's | s da | te): | |
| Check Account | Savings | | Check Account | Savings | | | |
| Type: | Checking | | Type: | Checking | | | |
| | Other | | | Other | | | |
| | | | | | | | |
| Name(s) on the A | Account: | | Name(s) on the | Account: | | | |
| Bank Name: | | | Bank Name: | | | | |
| Account Number | r: | | Account Number: | | | | |
| Current Balance | (as of today's | date): | Current Balance (as of today's date): | | | | |
| Check Account | Savings | | Check Account | Savings | | | |
| Type: | Checking | | Type: | Checking | | | |
| | Other | | | Other | | | |
| Will you be able to | o obtain a gift | if you do not have ad | equate funds to co | ver closing co | sts | ? Yes | No |
| | | | | | | | |
| If yes, * | | | | | | | |
| Amount: | | From Whom: | | | | | |
| | | | | | | | |

*Please provide a letter from an <u>immediate family member</u> (Parents, Siblings, Grandparents) stating that the money provided is in the form of a gift and will not have to be returned.





WORKFORCE HOUSING HOMEOWNERSHIP PROGRAM ACKNOWLEDGMENT, CERTIFICATIONS AND DISCLAIMERS

ACKNOWLEDGMENT:

I/We understand that the ASCEND Home and Community is relying on this information to prove my/our household's eligibility for housing assistance under the program. I/We certify that all information and answers to the questions are true and complete to the best of my/our knowledge. If any of the information provided in this application changes prior to closing, it is my/our responsibility to notify the ASCEND in writing so that an updated determination can be made regarding my eligibility status. If I/we have not closed on a house within six (6) months of the date qualified, I/we understand that I/we may be required to resubmit current financial information and documentation to determine that I/we still meet the eligibility requirements of the program. Program eligibility must be maintained from the point of application to the awarding of all grant assistance at the closing. I/We understand that we may be required to submit updated, additional and/or clarifying documentation to determine eligibility and that the information provided may be verified.

I/We understand that in compliance with the FAIR CREDIT REPORTING ACT the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information I/we provided, including procuring consumer reports from consumer credit reporting agencies and obtaining credit information from other credit institutions. I/We understand that after review of my/our financial status, ASCEND may determine that I/we do not qualify based on my/our ability to qualify for and/or carry the mortgage required.

<u>CERTIFICATE PROGRAM</u> GUIDELINES FOR THE AFFORDABLE HOUSING HOMEOWNERSHIP PROGRAM AND UNDERSTAND THAT THE PROPERTY IS SUBJECT TO CERTAIN RESALE AND PURCHASE PRICE RESTRICTIONS. SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE ELIGIBILITY AND ELIGIBILITY IS SUBJECT TO COMPLIANCE WITH ALL PROGRAM GUIDELINES AND THE OFFERING PLAN (IF APPLICABLE FOR THIS DEVELOPMENT).

2) I/WE CERTIFY THAT I/WE HAVE BEEN PROVIDED WITH A CHECKLIST OF DOCUMENTS AND INFORMATION REQUIRED TO BE PROVIDED TO BE CONSIDERED FOR ELIGIBILITY FOR THE AFFORDABLE HOUSING HOMEOWNERSHIP PROGRAM. I/WE UNDERSTAND THAT FAILURE TO PROVIDE SUCH DOCUMENTS AND INFORMATION WILL MAKE ME/US INELIGIBLE FOR SUCH PROGRAM.





3) I/WE CERTIFY, UNDER THE PENALTIES AND PROVISIONS OF U.S.C. TITLE 18 SECTION 1001, AND OTHER APPLICABLE FEDERAL, STATE AND LOCAL LAWS, THAT THE INFORMATION SUBMITTED HAS BEEN EXAMINED BY US AND APPROVED AND IS TRUE, CORRECT, AND COMPLETE. I/WE ALSO UNDERSTAND THAT APART FROM THE PENALTIES AND PROVISIONS OF U.S.C. TITLE 18, SECTION 1001, AND ANY OTHER APPLICABLE LAWS, FALSIFICATION OF ANY ITEM IN THIS APPLICATION MAY BE A CRIMINAL OFFENSE.

<u>DISCLAIMER</u>: It is understood that this is not an offer and that ASCEND, the Sponsor and/or the municipality may change the terms and conditions at any time. It is further understood that notices may be made in such manner as ASCEND may determine, including solely by advertisement or email. ASCEND is not responsible to any party for any damage(s) caused or which may be caused as a result of the information collected for this application. ASCEND reserves the right to reject any application for any non-discriminatory reason. Decisions by ASCEND are final.

ALL HOUSEHOLD MEMBERS 18 AND OVER MUST SIGN BELOW:

| Primary Applicant's Name (Please Print) | Signature | Date |
|---|-----------|----------|
| Co-Applicant's Name (Please Print) | Signature | Date |
| Household Member 18 and over (Please Print) | Signature | Date |
| Household Member 18 and over (Please Print) | Signature | Date |
| Household Member 18 and over (Please Print) | Signature | Date |

FAIR HOUSING AND NON-DISCRIMINATION

ASCEND is committed to promoting fair housing, equal opportunity, and non-discrimination in compliance with all federal, state and local laws, including, but not limited to, the Fair Housing Act, as amended by the Housing for Older Americans Act, the Americans with Disabilities Act, the Civil Rights Act, and the New York State Human Rights Law. The ASCEND staff is available to assist with the application, and answer questions about eligibility requirements. In furtherance of this policy, ASCEND shall not discriminate on the basis of race, creed, color, national or ethnic origin, sex, sexual orientation, gender identity, familial status, source of income, religion, disability, veterans' status, age, or any other basis prohibited by law.





LIMITED ENGLISH PROFICIENCY AND ACCOMMODATIONS

Applications and Program Guidelines are available in English and Spanish and will be made available in other languages as requested. ASCEND will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) and persons who need assistance or who have a limited ability to speak, read, or write English, will have meaningful access and an equal opportunity to participate in the Program. Interpreters, translators and other` aids needed to comply with this policy shall be provided as reasonably necessary. If you have any questions regarding the guidelines, or need assistance including language assistance such as translation and/or oral interpretation services, please contact the Southampton Housing Authority at info@southamptonha.org





THE WOODS at HAMPTON BAYS by CAMPO Brothers

WORKFORCE HOUSING HOMEOWNERSHIP PROGRAM CHECKLIST OF REQUIRED DOCUMENTS

(COPIES ONLY, NO ORIGINALS)

| | APPLICANT | CO-APPLICANT | 18 AND OVER |
|---|-------------|--------------|-------------|
| Completed, signed and Dated application | Yes □ | Yes □ | N/A □ |
| Authorization to obtain a credit report form. | Yes □ | Yes □ | Yes □ |
| Notarized Gift Letter. | Yes □ N/A □ | Yes □ N/A □ | N/A □ |
| Four (4) most recent, consecutive paystubs that indicate year-to-date gross income. If year-to-date is not included on paystub, a letter from employer on company stationery is required. The employer letter must state the title/position, start date, rate of pay, hours worked per pay period, frequency of pay and year to date gross income. If you are currently unemployed, provide a notarized letter stating status of employment and provide documents of source of income if any. | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 |
| Self-employed applicants must provide a letter from a CPA or attorney indicating the amount you expect to receive for the next 12 months or must provide a notarized YTD profit and loss statement | Yes N/A | Yes 🗆 N/A 🗆 | Yes N/A |
| Documentation evidencing income from Social Security (2023 award letter), Pension, Unemployment & Alimony/Maintenance | Yes □ N/A □ | Yes □ N/A □ | Yes □ N/A □ |
| 2022 w2 Statement(s) and 1099 statement(s) | Yes □ N/A □ | Yes □ N/A □ | Yes □ N/A □ |
| Signed 2022 Federal Tax returns w/required schedules. Sign second page of your federal tax returns where it says "sign here". If you cannot locate your federal tax returns, you may go to the IRS website and printout the tax return transcript and wage and income transcript. | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 |
| Signed 2021 Federal Tax returns w/required schedules | Yes □ N/A □ | Yes □ N/A □ | Yes □ N/A □ |
| Signed 2020 Federal Tax returns w/required schedules | Yes □ N/A □ | Yes □ N/A □ | Yes □ N/A □ |
| Two (2) months most recent consecutive bank statements with all pages for all accounts or 60 days printout of transactions for all accounts. Statement/printout must show the name of the bank, account holder's name, running balance and the last four digits of the account number. If you do not own any bank account, provide a notarized letter. | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 |
| Most recent retirement and/or investment account with all pages. The statement/printout must show the name of the institution, account holder's name and the last four digits of the account number. | Yes N/A | Yes 🗆 N/A 🗆 | Yes 🗆 N/A 🗆 |
| Documents showing balance and/or value of all stocks, bonds, treasury bills, certificate of deposits, etc. | Yes N/A | Yes 🗆 N/A 🗆 | Yes N/A |
| School transcripts for full time students over 18 years. | N/A □ | N/A □ | Yes □ N/A □ |
| Legal separation agreement/stipulation of settlement or divorce decree. | Yes □ N/A □ | Yes □ N/A □ | N/A □ |
| Permanent Residency ID Card. | Yes □ N/A □ | Yes □ N/A □ | Yes □ N/A □ |