

ACCEPTING APPLICATIONS FOR WORKFORCE HOUSING

September 25 – October 13, 2023

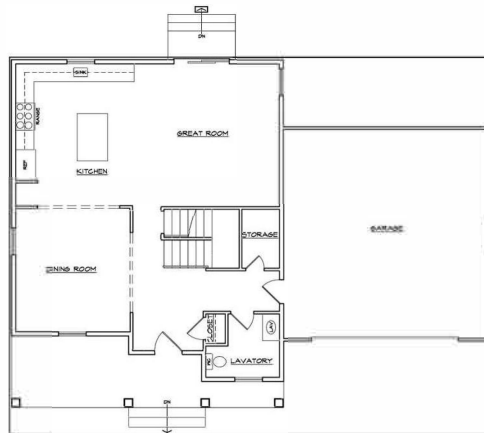
2 Newly Constructed Four Bedroom Homes
\$507,000

\$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



DOWNLOAD APPLICATION
WWW.SOUTHAMPTONHA.ORG

QUESTIONS:
Email: info@southamptonha.org
Office: (631) 488-4220 ext. 210



Homes & Community Foundation

Better Communities, Better Lives

501c3 Non-Profit
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Curtis E. Highsmith
Executive Director

Dear Applicant(s)

On behalf of the CAMPO Brothers, you are invited to submit a formal application to qualify for one of the 2 newly constructed homes, in a new subdivision located in Hampton Bays, NY, under the Town of Southampton's First-Time Home Buyer Affordable Housing Program.

Enclosed please find the Formal Application and related program documents. Please read and carefully examine the enclosed documents to see if you meet all the program 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 limit requirements, ability to secure a mortgage and meeting all program guidelines.

Applications will be accepted on a First-Come First Served basis. Complete and sign the application and provide all the required documents to:

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

DO NOT FAX OR EMAIL APPLICATION AND DOCUMENTS

If you are offered the opportunity to purchase a home through this program, you must continue to meet all program requirements up to the date of closing on the home and you must also be able to qualify for a mortgage. Should you have any questions please contact 631-488-4220 ext. 203.

Sincerely;

**Curtis E. Highsmith, Jr.
Executive Director/ASCEND**





FIRST-TIME HOME BUYER AFFORDABLE HOUSING PROGRAM

PROGRAM GUIDELINES

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

**FIRST-COME FIRST-SERVED 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 assist with the application, 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 call 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 ADVISED THAT THE PROGRAM GUIDELINES ARE SUBJECT TO CHANGE IN THE EVENT NEW REQUIREMENTS ARE ADOPTED BY THE VILLAGE CDA.

APPLICATIONS ARE REVIEWED ON A FIRST-COME FIRST-SERVED BASIS.

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 ASCEND WEBSITE FOR UPDATED INFORMATION.

NO APPLICATIONS WILL BE ACCEPTED BEFORE SEPTEMBER 25, 2023

Program Description

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 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, 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 minimum 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



*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 ASCEND 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 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.

FIRST-COME FIRST-SERVED APPLICATION PROCESS

To be considered for the Program, applicants must submit an **Application**, together with all required documentation. Applications will be reviewed on a first-come first-served basis in the order in which they are received until the waitlist is exhausted or a qualified buyer closes on the purchase of the property whichever occurs first.

Applications are available on 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 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 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 Southampton 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 Town Zip

Home Telephone # _____ Cell Phone # _____

Work Telephone # _____ E-mail _____

Date Moved to This Address: ____/____/____ Primary Language: _____

b) **Co-Applicant Name:** _____
First M.I. Last

Address _____
Street Address Town Zip

Home Telephone # _____ Relationship to Primary Applicant: _____

Cell Phone # _____ E-mail _____

Will you and all household members occupy the house as your primary residence? ☐ Yes ☐ No

Are you a first-time homebuyer? ☐ Yes ☐ No

Do you presently own a home and/or other real property?

Primary Applicant: ☐ Yes ☐ No Co-Applicant: ☐ Yes ☐ No

If either primary applicant or co-applicant answered, "YES" to the above question, please explain the circumstances under which you currently own a home. Please keep in mind this is a first-time homebuyer program:

_____.



Have you owned a home and/or other real property within the last three (3) years?

Primary Applicant: ☐ Yes ☐ No Co-Applicant: ☐ Yes ☐ No

If either primary applicant or co-applicant answered, "YES" to the above question, please explain the circumstances under which you no longer own a home:

HOUSEHOLD INFORMATION

a) Total number of household members that will occupy the new home: _____

Complete the following information for each household member that will occupy the home being purchased:

Name (Last, 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*
1.	Applicant						
2.							
3.							
4.							
5.							
6.							
7.							
8.							

INFORMATION FOR HUD MONITORING PURPOSES

This question is being asked for statistical purposes to comply with equal opportunity requirements and to assure that no discrimination occurs. Responses to columns above with * are optional. Your answer will not affect, in any way, your selection for the program. See below for details on how to complete the chart above.

Ethnicity

Are household members Hispanic or Latino? On the chart above enter yes or no for each household member.

Race

On the above chart, enter the number that corresponds to the race of each household member listed

11 White

12 Black/ African American

13 Asian

14 American Indian or Alaska Native

15 Native Hawaiian or Other Pacific Islander

16 American Indian/ Alaskan Native and White

17 Asian and White

18 Black/ African American and White

19 Amer. Indian/ Alaskan Native and
Black/African American

20 Other Multi-Racial

21 Asian/Pacific Islander



b) Citizenship

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?

☐ Yes

☐ No

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) Current Employment: List any and all current employers for each wage earner over “18” years 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? YES / NO Please circle your choice
	Date Hired:	
Name:	Employed by:	Gross Annual Income: \$
	Location Address:	Employer Telephone:
	Job Title:	Full Time employee? YES / NO Please circle your choice
	Date Hired:	
Name:	Employed by:	Gross Annual Income: \$
	Location Address:	Employer Telephone:
	Job Title:	Full Time employee? YES / NO Please circle your choice
	Date Hired:	



- 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.

<u>INCOME SOURCE</u>	Household Member Name			
	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 **any household member(s) age 18 or older** and send copies of **all pages** of the last two **(2) months'** bank/financial statements for each account listed below. Please list **all accounts** and include 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 Account:			
Bank Name:			
Account Number:			
Current Balance (as of today's date):			
Check Account Type:	Savings		
	Checking		
	Other		

Name(s) on the Account:			
Bank Name:			
Account Number:			
Current Balance (as of today's date):			
Check Account Type:	Savings		
	Checking		
	Other		

Name(s) on the Account:			
Bank Name:			
Account Number:			
Current Balance (as of today's date):			
Check Account Type:	Savings		
	Checking		
	Other		

Name(s) on the Account:			
Bank Name:			
Account Number:			
Current Balance (as of today's date):			
Check Account Type:	Savings		
	Checking		
	Other		

Name(s) on the Account:			
Bank Name:			
Account Number:			
Current Balance (as of today's date):			
Check Account Type:	Savings		
	Checking		
	Other		

Name(s) on the Account:			
Bank Name:			
Account Number:			
Current Balance (as of today's date):			
Check Account Type:	Savings		
	Checking		
	Other		

Will you be able to obtain a gift if you do not have adequate funds to cover closing costs? Yes ____ No ____

If yes, *

Amount: _____ From Whom: _____

***Please provide a letter from an immediate family member (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 assisted 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.

CERTIFICATIONS:

1) I/WE CERTIFY THAT I/WE HAVE READ AND UNDERSTAND THE PROGRAM 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.

DISCLAIMER: 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 <input type="checkbox"/>	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
Authorization to obtain a credit report form.	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Notarized Gift Letter.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	N/A <input type="checkbox"/>
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 <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Documentation evidencing income from Social Security (2023 award letter), Pension, Unemployment & Alimony/Maintenance	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
2022 w2 Statement(s) and 1099 statement(s)	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Signed 2021 Federal Tax returns w/required schedules	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Signed 2020 Federal Tax returns w/required schedules	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
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 <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Documents showing balance and/or value of all stocks, bonds, treasury bills, certificate of deposits, etc.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
School transcripts for full time students over 18 years.	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Legal separation agreement/stipulation of settlement or divorce decree.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	N/A <input type="checkbox"/>
Permanent Residency ID Card.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>