



AFFIDAVIT AND DISCLOSURE FORM

I/We understand and agree to the following conditions and guidelines regarding the distribution of affordable homes.

1. The annual total gross household income for my family Does Not Exceed the allowable limits as follows:

2024 DALTON AREA MEDIAN INCOME LIMITS 80%

Household Size	1	2	3	4	5	6
Maximum Allowable Household Income	\$63,000	\$72,000	\$81,000	\$90,000	\$97,200	\$104,400

***INCOME FROM ALL FAMILY MEMBERS MUST BE INCLUDED
INCOME LIMITS SUBJECT TO CHANGE BASED ON HUD UPDATES***

2. I/We have not individually or jointly owned a single-family home, townhome, condo, or co-op within the past three (3) years, including homes in a trust.
The following exceptions apply:
 - a. "Displaced homemakers" – defined as an adult who has not worked full-time, full-year in the labor force for a number of years but has, during such years, worked primarily without remuneration to care for the home and family. While a homemaker, they owned a home with his or her partner or resided in a home owned by the partner;
 - b. "Single parent" – an individual who owned a home with his or her partner or resided in a home owned by the partner and is now a single parent (is unmarried or legally separated from a spouse and has custody or joint custody of one or more children or is pregnant);
 - c. Households where at least one household member is 55 or over;
 - d. Households that owned a principal residence not permanently affixed to a permanent foundation in accordance with applicable regulations; and
 - e. Households that owned a property that was not in compliance with state, local, or model building codes and cannot be brought into compliance for less than the cost of construction of a permanent structure.

A home owned by one of the above exceptions must be sold prior to closing on an affordable home.

3. I/We certify my/our total household assets do not exceed the \$75,000 asset limit and understand additional asset guidelines will be provided if we have an opportunity to purchase. I/We understand that assets divested at less than full market value at least two years prior to application will be counted at full market value in determining eligibility.
4. The household size listed on the application form includes all the people who will be living in the house.
5. I/We understand being selected in the lottery does not guarantee I/we will be able to purchase a home. I/We understand that all application data will be verified, and additional financial information may be required prior to purchasing a home.

6. I/We authorize Central Berkshire Habitat for Humanity to verify any and all assets, income, and other financial information and to verify all household, resident, and workplace information. I/We further direct our employer, landlord, or financial institution to release any information to Central Berkshire Habitat for Humanity and consequently the project's monitoring agent for the purpose of determining eligibility.
7. I/We understand that if selected I/we will/may be offered a specific home. I/We will have the option to accept the available home or to reject the available home. If I/we reject the available home, I/we will move to the bottom of the waiting list and will likely not have another opportunity to purchase an affordable home at this development.
8. Program requirements are established by the Executive Office of Housing and Livable Communities (EOHLC), Mass Housing, HUD, and the host community. I/We agree to be bound by program changes which may be imposed at any time throughout the process. If any program conflicts arise, I/we agree that any determination made by the monitoring agent is final.
9. I/we certify that no member of our family has a financial interest in the project.
10. I/We understand this is a deed-restricted home and acknowledge it has been recommended we consult an attorney.

I/We certify all data supplied on the application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/we understand providing false information will result in disqualification from further consideration. It is understood the signing applicant has communicated all information to all parties that may be included with the application.

Applicant Signature _____

Date: _____



Applicants will not be discriminated against on the basis of race, color, national origin, disability, age, ancestry, children, familial status, genetic information, marital status, public assistance reciprocity, religion, sex, sexual orientation, gender identity, veteran/military status, or any other basis prohibited by law.