

PRELIMINARY APPLICATION FOR AFFORDABLE HOUSING

Complete on-line at www.affordablehomesnewjersey.com or submit the information below. Incomplete or illegible preliminary applications will not be processed. Please do not send more than one application.

1 HEAD OF HOUSEHOLD INFORMATION

First Name:		Last Name:			
Street Address:	City:	State:	Zip Code:	County:	
Email Address:	Primary Phone Number:		Alternate Phone Number:		

2 HOUSEHOLD COMPOSITION AND INCOME (LIST ALL PERSONS TO LIVE IN HOME)

Name (First and Last)	Relation To Head of Household	Date of Birth	Gender M/F	Current Gross Annual Income*

***Income includes, but is not limited to:**
Gross wages, salaries, tips, commissions, overtime, alimony, child support, pensions, and social security, unemployment and disability benefits.

3 Additional Information

<p>A. Approximately how much do you have for a down payment? _____</p> <p>B. What is your marital status? <input type="checkbox"/> Single/ <input type="checkbox"/> Married/ <input type="checkbox"/> Divorced/ <input type="checkbox"/> Separated</p> <p>C. Does anyone in your household require a barrier-free/ADA accessible home? <input type="checkbox"/> Yes/<input type="checkbox"/> No</p> <p>D. What County do you work in? _____</p> <p>E. Do you have a Section 8 Voucher? <input type="checkbox"/> Yes/<input type="checkbox"/> No</p> <p>F. Will a family member/friend provide assistance with your rental payments? <input type="checkbox"/> Yes/<input type="checkbox"/> No</p> <p>G. How much do you pay in monthly rent? _____</p> <p>H. Do you live in substandard or overcrowded housing? <input type="checkbox"/> Yes/<input type="checkbox"/> No</p> <p>I. Do you own a house, apartment or rental property? <input type="checkbox"/> Yes/<input type="checkbox"/> No</p> <p>J. Are you or a household member permanently disabled? <input type="checkbox"/> Yes/<input type="checkbox"/> No</p> <p>K. How many people will be in your household including yourself? _____</p>

4 Which towns are you interested in?

FAMILY RENTAL			
<input type="checkbox"/> Allamuchy , Warren	<input type="checkbox"/> Franklin/Somerset , Somerset	<input type="checkbox"/> Lyndhurst , Bergen	<input type="checkbox"/> Ocean Twp , Ocean
<input type="checkbox"/> Berlin , Camden	<input type="checkbox"/> Freehold Twp , Monmouth	<input type="checkbox"/> Maplewood , Essex	<input type="checkbox"/> Voorhees , Camden
<input type="checkbox"/> East Windsor , Mercer	<input type="checkbox"/> Holmdel , Monmouth	<input type="checkbox"/> Montgomery , Somerset	<input type="checkbox"/> Woodbridge , Middlesex
<input type="checkbox"/> Edgewater , Bergen	<input type="checkbox"/> Howell , Monmouth		
FAMILY OWNERSHIP			
<input type="checkbox"/> Freehold Twp , Monmouth	<input type="checkbox"/> Howell , Monmouth	<input type="checkbox"/> Old Bridge , Middlesex	<input type="checkbox"/> Springfield , Burlington
<input type="checkbox"/> Glen Rock , Bergen	<input type="checkbox"/> Mansfield , Burlington	<input type="checkbox"/> Union Twp , Union	<input type="checkbox"/> Stafford/Manahawkin , Ocean
<input type="checkbox"/> Highland Park , Middlesex	<input type="checkbox"/> Marlboro , Monmouth	<input type="checkbox"/> Wanaque , Passaic	
<input type="checkbox"/> Holmdel , Monmouth	<input type="checkbox"/> Montgomery , Somerset		
AGE RESTRICTED RENTAL			
<input type="checkbox"/> Berlin , Camden	<input type="checkbox"/> Hillsborough , Somerset	<input type="checkbox"/> Montgomery , Somerset	<input type="checkbox"/> Woodbridge , Middlesex
AGE RESTRICTED OWNERSHIP			
<input type="checkbox"/> Howell , Monmouth	<input type="checkbox"/> Stafford/Manahawkin , Ocean	<input type="checkbox"/> Union Twp , Union	<input type="checkbox"/> Wanaque , Passaic
<input type="checkbox"/> Marlboro , Monmouth			

Once you are chosen in the random selection process, you will be asked to verify your household income & provide a valid mortgage pre-qualification and/or proof of cash assets. All income will be verified.

I certify that the information provided herein is true and complete and that any misrepresentation of income or household size reported herein shall be cause for program disqualification. I also understand that this information is to be used only for determining my preliminary eligibility for referral to an affordable housing unit and does not obligate me in any way.

PRINTED NAME OF HEAD OF HOUSEHOLD**SIGNATURE****DATE**

Complete on-line at www.affordablehomesnewjersey.com or fax completed applications to: 609-664-2786 or mail to CGP&H, 101 Interchange Plaza, Suite 301, Cranbury, NJ 08512, or email to homes@cgph.net

