

## Application Instructions



### **1. PLEASE READ CAREFULLY**

- Applications will be processed in order of date and time received.
- There is a \$50 application fee\* for each applicant, which must be submitted with a completed application in the form of a **Money Order or Certified Bank Check**.
- Incomplete applications or applications not accompanied by the appropriate documentation or fees will not be processed and will be returned.

\* Application fee is waived for applicants that are currently participating in the Section 8 and/or Public Housing Program.

### **2. COMPLETE ALL AREAS**

If an item does not apply to you, answer "N/A" to that question or mark with a "0" if it is a dollar amount line or section. Answer all questions; **do not leave any questions blank**. Do not cross out or use white out on the application.

- a) All sources of earned income **must** be reported for all household members.
- b) All unearned income and assets **must** be reported for all household members.

### **3. SIGNATURES**

Signatures are required for all adult applicants.

### **4. PLEASE PROVIDE COPIES OF THE FOLLOWING WITH THE APPLICATION**

- a. Valid Driver's License or other government issued ID for adult household members age 18 and older.
- b. Social Security cards for all household members.
- c. Most recent Tax Return; along with all W-2's and 1099's.

**The following information will be required when you are called into the office for an interview to continue the application process:**

- a. Valid Driver's License or other government issued identification for adult household members age 18 and older;
- b. Birth Certificates for all household members;
- c. Social Security cards for all household members;
- d. Name, address and phone number of current employer; and
- e. Income verification:
  1. Social Security award letter;
  2. Four (4) current consecutive pay stubs; however, eight (8) paystubs will be required if Landlord is unable to verify income;
  3. Bank name, address, and phone number; along with 6 most recent bank statements for all checking and savings account(s); (all pages)
  4. Most recent Tax Return; along with all W-2's and 1099's;
  5. Real Estate documents if you owned or sold a home within the past two years;
  6. Child Support Award Letter;
  7. All asset information; (e.g. Cash held in savings and/or checking accounts, safe deposit boxes or at home, etc., trusts, equity in real estate or other capital investments, stocks, bonds, treasury bills, certificate of deposits (CD's) money market accounts);
  8. Pension benefits award letter; 401K, IRA, Annuities, or any retirement account(s);
  9. Life Insurance policies,
  10. Welfare/public assistance documents, AFDC Documentation;
  11. Workers compensation award letter;
  12. Disability award letter and;
  13. Unemployment award letter or four (4) consecutive unemployment check stubs

### **5. PLEASE RETURN APPLICATION AND MAKE MONEY ORDER OR CERTIFIED BANK CHECK PAYABLE TO:**

**The Place at Sayreville**  
**100 Blaszkas Terrace, Sayreville, NJ 08872**

Should you have any questions, please feel free to contact our office at: (732) 525-3297



# Application for Affordable Housing

This is an application for housing at:	Community: <b>The Place at Sayreville</b>
Please complete this application and return to:	100 Blaszkas Terrace Sayreville, NJ 08872

**Applications are placed in order of date and time received. An applicant may be interviewed only after the receipt of this tenant application. All questions must be answered, or application will be considered incomplete and returned.**

**Please print clearly. If a section doesn't apply, write N/A. Do not cross out.**

## A. GENERAL INFORMATION

Applicant Name(s): \_\_\_\_\_

Address: \_\_\_\_\_  

Street
Apt.#
City
State
ZIP

Daytime Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_

• 1 BEDROOM    • 2 BEDROOM    • 3 BEDROOM

No. of Bedrooms Requested: \_\_\_\_\_ (circle one)      Do you require a handicap apartment?  Yes  No  
(Limited by Household size)

Amount of current monthly rental or mortgage payment: \_\_\_\_\_

If owned, do you receive monthly rental income from property?       Yes       No (circle one)

Circle utilities paid by you:    Heat       Electricity       Gas       Other (specify) \_\_\_\_\_

Approximate monthly cost of utilities paid by you (excluding phone and cable TV):      \$ \_\_\_\_\_

Do you receive rental assistance? (Example: Section 8 or any other type of voucher)       Yes       No (circle one)

Is any member of the applicant household a Lifetime Sex Offender Registrant?       Yes       No (circle one)

Please list any states where you have previously resided: \_\_\_\_\_

**Were you displaced by Superstorm Sandy?** \_\_\_\_\_ **Do you have a FEMA Registration Number, if so, please provide.** \_\_\_\_\_

**Verified Sandy victims will be prioritized for the first three (3) months of leasing.**

How did you hear about us? (Please be specific.): \_\_\_\_\_

## B. HOUSEHOLD COMPOSITION

List ALL persons who will live in the house. List the head of household first.

	Name	Relationship to head	Marital Status M-married D-divorced S-single E-estranged L-legal separation	Birth Date	Age	SS#	Student Y/N
Applicant							
Co-Applicant							
3.							
4.							
5.							
6.							

Will any of the persons in the household be or have been full-time students during five calendar months of this year or plan to be in the next calendar year at an educational institution (other than a correspondence school) with regular faculty and students?       Yes       No (circle one)

**IF YOU CIRCLED YES, ANSWER THE FOLLOWING QUESTIONS:**

**Circle Yes or No**

Are any full-time student(s) married and filing a joint tax return?	◆ Yes	◆ No
Are any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act?	◆ Yes	◆ No
Are any full-time student(s) a TANF or a title IV recipient?	◆ Yes	◆ No
Are any full-time student(s) a single parent living with his/her minor child who is not a Dependent on another's tax return?	◆ Yes	◆ No



Do you anticipate any additions to the household in the next twelve months? ♦ Yes ♦ No (circle one)	
If yes, explain:	

<b>C. INCOME</b>		
List ALL sources of income as requested below. If a section doesn't apply, write N/A.		
Household Member Name	Source of Income	Gross Monthly Amount
	Social Security	\$
	Social Security	\$
	SSI Benefits	\$
	SSI Benefits	\$
	Pension (list source)	\$
	Veteran's Benefits (list claim #)	\$
	Unemployment Compensation	\$
	Unemployment Compensation	\$
	Title IV/TANF	\$
	Title IV/TANF	\$
	Full-Time Student Income (18 & Over Only)	\$
	Full-Time Student Income (18 & Over Only)	\$
	Interest Income (source)	\$
	Interest Income (source)	\$
	Other _____	\$
	Other _____	\$

Household Member Name	Source of Income	Gross Monthly Amount
	<b>Employment amount</b>	\$
	Employer:	
	Position Held	
	How long employed:	
	<b>Employment amount</b>	\$
	Employer:	
	Position Held	
	How long employed:	
	<b>Alimony</b>	
	Are you <b>entitled</b> to receive alimony?	♦ Yes ♦ No (circle one)
	If yes, list the amount you are <b>entitled</b> to receive.	\$
	Do you receive alimony?	♦ Yes ♦ No (circle one)
	If yes, list amount you receive.	\$
	<b>Child Support</b>	
	Are you <b>entitled</b> to receive child support?	♦ Yes ♦ No (circle one)



	If yes, list the amount you are <b>entitled</b> to receive.	\$
	Do you receive child support?	◆ Yes ◆ No (circle one)
	If yes, list the amount you receive.	\$
	<b>Other Income:</b>	\$
	<b>Other Income:</b>	\$
<b>TOTAL GROSS ANNUAL INCOME</b> (Based on the monthly amounts listed above x 12)		\$
TOTAL GROSS ANNUAL INCOME FROM <b>PREVIOUS</b> YEAR		\$
Do you anticipate any changes in this income in the next 12 months? (Circle One)		◆ Yes ◆ No
If yes, explain:		

<b>D. ASSETS</b>			
If your assets are too numerous to list here, please request an additional form. <b>If a section doesn't apply, write N/A.</b>			
Checking Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
Savings Accounts	#	Bank	Balance \$
	#	Bank	Balance \$
Trust Account	#	Bank	Balance \$
Certificates of Deposit	#	Bank	Balance \$
	#	Bank	Balance \$
Credit Union	#	Bank	Balance \$
Savings Bonds	#	Maturity Date	Value \$
Life Insurance Policy	#		Cash Value \$
Mutual Funds	Name:	#Shares:	Interest or Dividend \$ Value \$
Stocks	Name:	#Shares:	Dividend Paid \$ Value \$
Bonds	Name:	#Shares:	Interest or Dividend \$ Value \$
Investment Property			Appraised Value \$

Real Estate Property: <b>Do you own any property?</b> (circle one)	◆ Yes ◆ No
If yes, Type of property:	
Location of property:	
Appraised Market Value:	\$
Mortgage or outstanding loans balance due	\$
Amount of annual insurance premium	\$
Amount of most recent tax bill	\$

Have you sold/dispensed of any property in the last 2 years? (circle one)	◆ Yes ◆ No
If yes, Type of property	
Market value when sold/dispensed	\$
Amount sold/dispensed for	\$
Date of transaction	
Have you disposed of any other assets in the last 2 years (Example: Given away money to relatives, set up Irrevocable Trust Accounts)? (circle one)	◆ Yes ◆ No
If yes, describe the asset	
Date of disposition	
Amount disposed	\$

Do you have any other assets not listed above (excluding personal property)? (circle one)	◆ Yes ◆ No
If yes, please list:	



**E. ADDITIONAL INFORMATION**

Have you or any member of your household ever been evicted from any housing? <i>If yes, describe</i>	(circle one)	◆ Yes	◆ No
Have you ever filed for bankruptcy? <i>If yes, describe</i>	(circle one)	◆ Yes	◆ No
Will you take an apartment when one is available? <i>Briefly describe your reasons for applying:</i>	(circle one)	◆ Yes	◆ No

**F. REFERENCE INFORMATION**

Current Landlord	Name:		
	Address:		
	Home Phone:		
	Bus. Phone:		
	How Long?		
Prior Landlord	Name:		
	Address:		
	Home Phone:		
	Bus. Phone:		
	How Long?		
<b>Credit Reference #1:</b>			
Address:			
Account #:		Phone #:	
<b>Credit Reference #2:</b>			
Address:			
Account #:		Phone #:	
<b>Personal Reference #2:</b>			
Address:			
Relationship:		Phone #:	
<b>Personal Reference #3:</b>			
Address:			
Relationship:		Phone #:	

**G. VEHICLE & PET INFORMATION (if applicable)**

List any cars, trucks, or other vehicles owned. Parking will be provided for only one vehicle.

Type of Vehicle:	License Plate #:
Year/Make:	Color:
Type of Vehicle:	License Plate #:
Year/Make:	Color:
Do you have any pets? (circle one) • Yes • No	<i>If Yes, Describe:</i>



**PLEASE READ ALL TERMS CAREFULLY ON THIS FORM AND SIGN BELOW**

**THE PLACE AT SAYREVILLE** complies with all state and federal statutes which prohibit discrimination in the rental of dwellings. This application is subject to **THE PLACE AT SAYREVILLE** and may without designating cause, be disapproved by them. I understand that this application creates no obligation for **THE PLACE AT SAYREVILLE** or applicant. This application may be made part of my lease. I understand that the truth of the information contained herein is essential. If **THE PLACE AT SAYREVILLE** deems any answer or statement herein to be false, or misleading, any lease granted by virtue of this application may be canceled at their option.

**AGREEMENT, AUTHORIZATION AND CONSENT FOR RELEASE OF BACKGROUND INFORMATION**

I understand that in conjunction with my application for tenancy, **THE PLACE AT SAYREVILLE** may use the services of an outside agency to research and verify the information I have provided on my application for housing including my personal background, work history and qualifications. I therefore authorize **THE PLACE AT SAYREVILLE**, CIS, CIS Management Inc., or Yardi Resident Screening (or any authorized entity hired for this purpose) to verify any information provided by me in this tenancy application and any supplemental attachments, including but not limited to: criminal conviction record, current and former employers, credit reports, and personal references and I agree, authorize and consent to the release and disclosure of any and all information including but not limited to the above to **THE PLACE AT SAYREVILLE**, CIS, CIS Management Inc., Yardi Resident Screening and any authorized reporting agency.

I further agree, authorize and consent to **THE PLACE AT SAYREVILLE**, CIS and/or CIS Management Inc. to obtain a consumer report as well as a criminal and sexual offender report from Yardi Screening Reports (or any other entity hired for this purpose) and/or investigative consumer report, which may contain information about my credit worthiness, credit standing, credit capacity, and criminal background.

In accordance with the Fair Credit Reporting Act, I will be notified by **THE PLACE AT SAYREVILLE**, CIS and/or CIS Management Inc. if my tenancy is denied because of information obtained from a consumer reporting agency. I further understand that I may request a copy of the report from the consumer reporting agency having conducted the background investigations.

By signing this application, I hereby expressly release **THE PLACE AT SAYREVILLE** and any agent, procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies.

**SIGNATURE(S)**

\_\_\_\_\_  
(Signature of Tenant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Co-Tenant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Co-Tenant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Co-Tenant)

\_\_\_\_\_  
Date

<sup>1</sup>For the purpose of this Application for Housing, the term THE PLACE AT SAYREVILLE refers to THE PLACE AT SAYREVILLE, LLC and its successors, assigns, divisions, affiliated or related entities, owners, partners, officers, directors, management and parent companies, including CIS and CIS Management Inc.



**ACKNOWLEDGMENT OF APPLICATION FOR HOUSING PROCEDURE**

A completed, signed, dated application along with the required application fee is required to be considered for housing at THE PLACE AT SAYREVILLE. The Application will be time and date stamped upon receipt. Depending on availability the application will be logged in the waitlist book and processed or placed on the waiting list to be processed when an appropriate size unit becomes available. Once an application has been submitted, it cannot be altered or modified to add or remove members. Management will conduct a background screening (credit and criminal, including federal sex offender registry) on all adult members of the applicant household. An application may be denied or rejected based upon information obtained and an applicant household will be notified in writing.

If the application has been accepted based upon the background screening, management will then request documents from you to verify information in the rental application to ensure that the household will meet the requirements of the LIHTC program. Management will verify all sources of income and will calculate it in accordance with applicable LIHTC program guidelines. You will be given a date and time for an interview to collect the documents. At this interview, you will need to bring the documentation listed in the application, as well as the required deposit (if applicable). If you are deemed unqualified at any time during the application process, this deposit will be returned to you. However, if you are deemed income qualified and decide to back out of taking an apartment, this deposit will not be refunded to you (this is because the income qualification process takes a lot of time and effort on the part of staff). Once staff collects all the necessary paperwork from you, they will send out 3<sup>rd</sup> party verifications as needed to determine your income. The length of this process varies and depends mostly on how quickly the 3<sup>rd</sup> parties' complete requests. It may be determined during this process that the application requires additional information to process, which must be submitted by the applicant within 48 hours of being notified. Failure to respond may be cause for the application to be denied.

Based upon this review, management will determine if the file is suitable to be presented to NJHMFA. In the event the file is determined not to be suitable, the applicant will receive written notification and their deposit will be returned. Upon review and verification of the application, NJHMFA may still request additional information that must be presented to management for submission to NHHMFA within 48 hours. Failure to provide the documents requested and or based upon the information submitted the application for housing may be rejected or denied. An offer for housing will only be offered after management has received NJHMFA approval. Management is not responsible if an applicant gives notice or vacates their home prior to management receiving NJHMFA approval.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co-Tenant

\_\_\_\_\_  
Date

