



“We Help With Housing”

Donna M. Blaze
Chief Executive Officer

Preliminary Application

1. This is Preliminary Application for rental housing with the Affordable Housing Alliance. It will be used to determine if you are eligible to be considered for an affordable rental unit. **THIS IS NOT THE FINAL APPLICATION AND DOES NOT SATISFY YOUR APPLICATION REQUIREMENTS**
2. Please understand that the rental rates for affordable housing are established and governed by Federal, State and / or municipal regulations. Although consideration is made for low and moderate income households, rental rates do not fluctuate on the basis of household income. We cannot guarantee that any apartment, for rent, will be affordable to YOU or YOUR household.
3. Annual Income includes, but is not limited to, salary or wages, alimony, child support, social security benefits, pensions, business income, and actual or imputed earnings from assets (which include bank accounts, certificates of deposit, stocks, bonds, or other securities), and real estate. The household's total gross annual income cannot exceed program guidelines. These guidelines vary according to individual properties.
4. Once it has been determined that you are eligible to rent a unit, you will be mailed a complete application package when an apartment is available for you that meets your income category and/or appropriate bedroom size. When your completed application package and all supporting documentation has been submitted and reviewed for program eligibility you will be offered an available unit, if you meet the screening criteria (income/household size).
5. If you need assistance completing this application, please contact the Alliance at (732) 389-2958.
6. After you have completed this application, sign it, detach it from these instructions and mail it directly to: **Affordable Housing Alliance 3535 Route 66, Building 4, Neptune, NJ 07753**
7. Please allow **two (2) weeks** for your application to be processed. Once your application has been reviewed, you will be notified in writing regarding your **PRELIMINARY** eligibility status for the affordable housing program administered by the Alliance.



OFFICE USE ONLY Date Received: _____ Time: _____ Application #: _____
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Preliminary Rental Application for Affordable Housing

A. Head of Household Information:

Last Name: _____	Soc. Sec. No: _____--____--_____
First Name: _____	Home Phone: () _____--_____
Home Address: _____	Work Phone: () _____--_____
PO Box or Apt. No.: _____	County: _____
City: _____	State: _____ ZIP: _____
Email address: _____	

B. Household Composition & Income (ALL sources of income, including, but not limited to Salary, Dividends, Social Security, Pensions, Alimony, Business, Fellowships and support. DO NOT include income from Assets listed in Section C, or tuition awards.) The total number of persons in the Household is: _____

First Name & Last Name of <i>everyone</i> to occupy housing. (Please Print)	Relation To	Full-time Student? (Yes/No)	Birth of Date	Sex	Gross Annual Income	Social Security Number
1.					\$	
2.					\$	
3.					\$	
4.					\$	
5.					\$	
6.					\$	
7.					\$	
8.					\$	

C. Assets (Checking & Savings Accounts, CD's, Money Market, Real Estate, Etc.):

Type of Asset	Current Market Value of Asset	Estimated Annual Income	Annual Interest
1.	\$	\$	%
2.	\$	\$	%
3.	\$	\$	%
4.	\$	\$	%

D. Current Household Situation:

Do you currently:

Rent Own

Other (specify) _____

E. Preferences:

No. of Bedrooms (limited by number in household):

One Two Three Four

Do you require a handicap-accessible unit? Yes No

Do you require a handicap accessible unit? _____ First floor only?

F. Please indicate which facility you are applying for. You may apply for more than one, but do not write in any area other than those listed. The properties on this application are the only ones that you may indicate.

Properties Owned/Managed by AHA:

- Carver Inn Apartments (must be 55+) - Efficiencies and 1 Bedroom**
312 Myrtle Avenue, Neptune
- Beacon Place Condominium - 1, 2 and 3 Bedrooms**
Highway 36, Belford (Middletown)
- Monmouth Highland Apartments - 1 Bedroom units**
37 Navesink Avenue (Highway 36), Highlands
- Viking House - Single Room Occupancy (shared baths, all utilities included, furnished)**
109 Main Street, Keansburg
- Millstone House - Single Room Occupancy (shared baths, all utilities included, furnished)**
25 Burnt Tavern Road, Millstone Twp (Clarksburg)
- Park Road Apartments - 2 Bedroom Townhouses**
615 Park Avenue, Port Monmouth (Middletown)
- Single Family Home – 2 Bedrooms**
154 James Park Boulevard, Red Bank
- Single Family Home – 2 Bedrooms**
6 Novad Court, Millstone Twp (Clarksburg)
- Oceanport Manor – 1, 2 and 3 Bedrooms**
25 Main Street, Oceanport
- Grandview Apartments – 1, 2 and 3 Bedrooms**
104 Carr Avenue, Keansburg
- Warren Avenue Apartments – 1 and 2 Bedrooms**
Warren Avenue, Spring Lake

Properties Administrative Agent by AHA:

- Lafayette Condos – 2 and 3 Bedrooms**
Lafayette Street, Rumson
- Unity Square – 3 Bedroom Single Family Homes**
Various locations, New Brunswick
- 95 First Avenue, Atlantic Highlands**
1 Bedroom Garden Apartment
- 84 Memorial Drive, Atlantic Highlands**
1 Bedroom Apartment
- Ocean Port Center, Ocean Port**
1, 2 & 3 Bedroom Garden Apartments
- Red Bank – Affordable Rentals (Scattered Sites)**

The following minimum/maximum income requirements (does not apply to Single Room Occupancy rentals):

Household Size	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
Moderate	\$51,864	\$59,273	\$66,682	\$74,091	\$80,019	\$85,946	\$91,873	\$97,801
Very Low	\$22,690	\$25,931	\$29,173	\$32,414	\$35,008	\$37,601	\$40,194	\$42,787

Previous Rental History or Ownership History:

What is your current address? _____
 How long have you lived here? _____ years _____ months
 Reason for leaving? _____
 Name, address and telephone number of your Present Landlord: _____

What was your previous address? _____
 How long did you live there? _____ years _____ months
 Reason for leaving? _____
 Name, address and telephone number of your Previous Landlord: _____

Have you ever been evicted? Yes No If yes, explain _____

G. Subsidy Information

Do you have a Section 8 Voucher? Yes No
 Do you have another source of subsidy? If yes, please describe: _____

H. Current Employment History:

Head of Household

Employer Name:	Number of Years Employed:	Supervisor Name:	Supervisor Telephone Number:

Spouse or co-Head of Household

Employer Name:	Number of Years Employed:	Supervisor Name:	Supervisor Telephone Number:

I. Important Information (Must be signed by every household member over the age of 18).

I hereby authorize the Affordable Housing Alliance and/or their employees to obtain information regarding the status of my (our) credit, and to check the accuracy of any and all statements and representations made in this application. I (We) certify that all information in this application is accurate, complete and true. I (We) understand that if any statements made are willingly false, this application is null and void, and I (we) may be subjected to penalties imposed by law. Void, if submitted without the signature of the applicant(s).

Signed: _____ Date: _____

Signed: _____ Date: _____

National Tenant Network

First Name: _____ **MI:** _____ **Last Name:** _____

Social Security # _____ **Date of Birth:** _____

Present Address: _____

How long have you lived at the address: _____

Former Address: _____

How long have you lived at this address: _____

Do you have a criminal record: **YES** or **NO**

If yes, where and when? _____

Have you ever lived out of state of New Jersey in the past 12 years? _____

I hereby grant the Affordable Housing Alliance the right to process this Credit Report Application for the purpose of obtaining a rental lease. In compliance with the fair credit reporting act, this notice is to inform you that the processing of this application includes but is not limited to making inquiries deemed necessary to verify the accuracy of the information herein, including procuring information from consumer reporting agencies, obtaining credit information from other credit institutions and criminal background checks from appropriate law enforcement and additional information about the nature of this investigation. The undersigned agrees that this application shall remain the property of the apartment complex landlord, regardless if the rental lease is granted.

Applicant's Signature: _____ **Date:** _____

MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

The **New Jersey Law Against Discrimination**, *N.J.S.A. 10:5-1 to -49*, makes it unlawful to discriminate in the sale or rental of housing based on a person's race, creed, color, national origin, ancestry, nationality, affectional or sexual orientation, disability, gender, marital status, familial status (whether you have a child, a parent-child relationship with a minor, or you are pregnant), lawful source of income or rental subsidy used for rental payments

The **New Jersey Division on Civil Rights** is the State agency that is authorized to enforce the Law Against Discrimination. Under the Division's **Multiple Dwelling Reporting Rules**, *N.J.A.C. 13:10-1.1 to -2.6*, the Division requires landlords to collect and record information about applicants for apartment rentals and tenants in apartment complexes throughout New Jersey. The **Multiple Dwelling Reporting Rule** requires landlords to provide a summary of this information to the Division and to retain the information on this form. **The information is used to prevent and eliminate discrimination in housing.** Your cooperation in filling out this form will assist the Division in enforcing the Law Against Discrimination.

Please note that, although landlords must record certain information about the race and ethnicity of applicants and tenants, it is unlawful to record or ask applicants or tenants about other characteristics such as religion, gender, marital status or affectional or sexual orientation.

If you feel you have been denied housing or treated differently for one of the reasons listed above, you may contact the Division on Civil Rights at (609) 984-3138 for referral to a local Division office for additional information or assistance. Visit the Division on Civil Rights Web site at: www.NJCivilRights.org

Tenants/applicants: Fold & tear along dotted line and retain top portion for your records

MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

If the tenant/applicant chooses not to complete this form, the landlord or the landlord's representative is required to conduct a visual observation of the tenant or applicant and then complete this form as accurately as possible.

This form is not intended to be a part of the rental application process and must be kept separate and apart from rental records.

Tenant Applicant Name: _____
Address: _____
City: _____ State: _____ Zip code: _____ Phone Number: _____

Race/Ethnicity: Please check all that apply to leaseholders (tenants) or applicants.

- Black or African American:** a person having origins in any of the original peoples of Africa
- Hispanic or Latino:** a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish origin or culture, or a person having a Spanish surname
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- American Indian or Alaska Native:** a person having origins in any of the original peoples of North or South America
- Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White or Caucasian:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Date: _____ Completed by: **Tenant Applicant Landlord**

If you have any questions regarding this inquiry please contact the Division on Civil Rights, Multiple Dwelling Unit at 609-984-3138 between the hours of 9:00 to 5:00 Monday through Friday, or e-mail the MDRR unit at

DCRMDRR@njcivilrights.org
[DCR/HIU/MDRR/LS2005](#)