

# **Preliminary Application for Affordable Housing**

**Borough of North Haledon  
Passic County, New Jersey**

**This is a Preliminary Application only. Do not send supporting documentation at this time. You will be notified as to the status of your preliminary eligibility based on the information that you provide in this application. When an affordable home becomes available, eligible candidates will be contacted. At that time, we will provide you with a list of documentation required to support and verify the information submitted in this application. We can not and do not guarantee housing based on the approval of this Preliminary Application. All of the affordable housing in North Haledon is privately owned. Application services are provided by Piazza & Associates, Inc., an affordable housing services corporation. This is an Equal Housing Opportunity. This program is subject to municipal and state affordable housing regulations, but no guarantee can be made that these homes are affordable to all applicants. This program is subject to availability. Prices, terms and conditions are subject to change without notice.**

**Piazza & Associates, Inc. ♦ Affordable Housing Services**

201 Rockingham Row ♦ Princeton Forrestal Village ♦ Princeton, NJ 08540

Telephone: 609-786-1100 ♦ Facsimile: 609-786-1105 ♦ E-mail: [NorthHaledon@HousingQuest.com](mailto:NorthHaledon@HousingQuest.com)



# Affordable Housing Policies and Requirements

## Borough of North Haledon

New Jersey

### **For All Applicants**

This is an equal housing opportunity. Federal law prohibits discrimination against any person making application to buy or rent a home with regard to race, color, national origin, religion, sex, familial status, and disability. State law prohibits discrimination on the basis of race, creed, color, national origin, ancestry, nationality, marital or domestic partnership or civil union status, sex, gender identity or expression, disability, affectional or sexual orientation, family status or source of lawful income or source of lawful rent payment. Piazza & Associates, Inc. complies with all provisions of the New Jersey Law Against Discrimination (“LAD”) N.J.S.A. 10:5-1 to -49 as applicable to any real property or for any program related to real property. Piazza & Associates, Inc. administers in New Jersey. Any person who believes a violation of the LAD has occurred may contact the New Jersey Division on Civil Rights at 866-405-3050 or 973-648-2700 or online at [www.NJCivilRights.gov](http://www.NJCivilRights.gov).

- ◆ The affordable home must be the primary residence of all household members. All household members who intend to reside at the affordable homes must be listed in the Preliminary Application. If changes in household composition, income or address, the applicant is required to notify Piazza & Associates, Inc. in writing, immediately.
  - ◆ Applications must be truthful, complete and accurate. Any false statement makes the application null and void, and subjects the applicant to penalties imposed by law.
  - ◆ Annual Income includes, but is not limited to, salary or wages, alimony, child support, social security benefits, unemployment 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.
  - ◆ Households who live or work in Bergen, Hudson, Passaic and Sussex housing region may be given preference for sales and rental units constructed within that housing region. Applicants living outside the housing region will have an equal opportunity for units after regional applicants have been initially serviced.
  - ◆ If you own a home in which you are currently residing and which you intend to sell prior to living in an affordable home, compute your income from this asset by taking the market value of your home, subtracting the mortgage principal, and multiplying the balance by the current “Passbook Savings Rate” published by HUD. Income from other real estate holdings is determined by the actual income you receive from the asset (less expenses, but not less your mortgage principal payment). If you have no outstanding mortgage debt, the value of your home will be subject to a maximum appraised value limit, which, when exceeded, may disqualify you from this affordable housing program.
  - ◆ Specific documentation to verify income and assets will be required at a later date, during the final portion of the application process.
  - ◆ Please understand that the pricing and rental rates for this affordable housing are established and governed by Federal, State and / or municipal regulations. Although consideration is made for low- and moderate- categories of household incomes, sales prices and rental rates do not fluctuate on the basis of each individual applicant's income. Therefore, we can not and do not guarantee that any home, for sale or rent, will be affordable to YOU or YOUR household.
  - ◆ The owners and managers of affordable apartments will set forth additional requirements, including, but not limited to an application fee, a lease agreement, security deposit and minimum credit standards.
  - ◆ Once leased, rents will NOT be adjusted to accommodate fluctuations in household income. Rental rate increases may occur annually, but are subject to limitations.
  - ◆ We do not provide financing to purchase affordable homes.
  - ◆ If you need assistance completing this application, please contact us at 609-786-1100.
  - ◆ DO NOT SEND SUPPORTING DOCUMENTATION WITH THIS APPLICATION.
- Please mail your application to the address, below, or fax it to us at 609-786-1105.

**Piazza & Associates, Inc.**

201 Rockingham Row - Princeton, NJ 08540



# Preliminary Application for Affordable Housing



Borough of  
North Haledon

New Jersey

## A. Head of Household Information

|                                |                         |
|--------------------------------|-------------------------|
| 1. Last Name: _____            | Soc. Sec. No: _____     |
| 2. First Name: _____           | Home Phone: _____       |
| 3. Home Address: _____         | Work Phone: _____       |
| 4. P.O. Box or Apt. No.: _____ | County: _____           |
| 5. City: _____                 | State: _____ ZIP: _____ |

## B. Household Composition and Income (List ALL sources of income, including, but not limited to Salary, Dividends, Social Security, Child Support, Alimony & Pensions. DO NOT include income from Assets listed in Section C.)

| Full Name (First, Middle & Last)<br>List everyone who will occupy the apartment. | Relation To       | Date of Birth | Sex | Gross Annual Income |
|--|-------------------|---------------|-----|---------------------|
| #1   | Head of Household |               |     | \$                  |
| #2   |                   |               |     | \$                  |
| #3   |                   |               |     | \$                  |
| #4   |                   |               |     | \$                  |
| #5   |                   |               |     | \$                  |
| #6   |                   |               |     | \$                  |

The total number of members in this household is: \_\_\_\_\_  
 Do you currently receive tenant -based Section 8 or SRAP Rental Assistance?: \_\_\_\_\_  
 Do you current own you home? \_\_\_\_\_ If yes, do you have a mortgage? \_\_\_\_\_

## C. Assets (Bank Accounts, Certificates of Deposit, Mutual Funds, Real Estate, Etc. If you own the home in which you live, clearly indicate BOTH the market value & your equity in the home Your equity equals the market value less any outstanding mortgage Principal.)

| Type of Asset | Current Value of Asset | Estimated Annual Income | Interest Rate |
|---------------|------------------------|-------------------------|---------------|
|               |                        |                         | %             |
|               |                        |                         | %             |
|               |                        |                         | %             |
|               |                        |                         | %             |

## D. Areas of Interest

Check **all** of the housing opportunities that apply.

- Rentals  
 Sales

## E. Preferences

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

- One?  
 Two?  
 Three?

Do you require a handicap-accessible home?: \_\_\_\_\_

## F. Important Information (Must be signed by everyone over the age of 17.)

I(We) hereby authorize the Borough of North Haledon, Owners and Managers of Apartments referenced herein and/or Piazza & Associates, Inc., their agents and/or 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, the application is null and void, and I(we) may be subject to penalties imposed by law. Void if not signed.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Please use back of application for additional information.**