OWNER'S NAME

NORTH BRUNSWICK HOUSING REHABILITATION PROGRAM Administered by the North Brunswick Housing Corporation

Completed applications may be hand-delivered or mailed to the following address:

Attn: Theresa West

North Brunswick Senior Housing

740 Hermann Road

North Brunswick, NJ 08902

APPLICATION FORM FOR BUILDINGS WITH RENTER-OCCUPIED UNITS

PROPERTY ADDRESS

This application must be completed and returuestions relative to completing the application application should be complete and accommendation it is submitted. There is no benefit to be application, as application numbers will not be complete.	tion, please call Theresa companied by all supported derived from submitting	West at 732-296-7122. t documentation at the ng an incomplete
All information provided shall be kept in strict your eligibility for participation in the North CONTACT INFORMATION (Please provided)	Brunswick Housing Reha	bilitation Program.
or two individuals who we may contact with	respect to the processin	g of your application.)
Name	Home Phone	Cell Phone
Primary E-mail	Smart Phone E-mail	
Name	Home Phone	Cell Phone
Primary E-mail	Smart Phone E-mail	

PROPERTY INFORMATION (Please provide information on the property that is the subject of this application.) How many dwelling units does the building contain? Does the owner reside in one of the dwelling units? Yes No (If the owner of the building does NOT occupy one of the dwelling units, you do NOT need to fill out pages 4-6 entitled "Household Information for Owners Living in the Building".) Estimated Market Value How many mortgages or property liens are there on the home? List all mortgagees and lien holders below and provide the amount of the mortgage or lien: Amount of Annual Real Estate Taxes \$_____ Place a check mark below for all bills where your payments are current: Real Estate Taxes _____ Water____ Sewer ____ Property Insurance _____ How long have you owned the property? Do you know what year the building was constructed? Yes _____ No ____ Constructed in _____ **REQUIRED PROPERTY DOCUMENTATION** (The following information on the property must be provided at the time that you submit the application. Please place a check mark below to indicate that each item has been provided as part of the application package.) --- A Copy of the Deed to the Property --- A Copy of Your Property Insurance Declaration Page

---Form Entitled "Certification That Property Taxes, Water & Sewer Bills, and

Property Insurance Are Current"

LISTING OF RENOVATIONS THAT YOU WOULD LIKE TO HAVE ACCOMPLISHED ON

THE BUILDII	NG (Please list any rend	ovation work that you would like to h	nave accomplished by
violations can	be corrected, as well a	nspected by Township Subcode Offices by a Rehabilitation Specialist who	vill prepare a work
-	sired work that is eligible	vork to be accomplished. Every atter le for funding.)	npt will be made to
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ADDITIONAL PAGES TO BE FILLED OUT (If the owner resides in one of the dwelling units, you MUST fill out pages 4-6, entitled "Household Information for an Owner Living in the Building", in addition to pages 7-19 as needed. If the owner does NOT live in one of the dwelling units, you do NOT need to fill out pages 4-6, and you can proceed to pages 7-9, entitled "Household Information for Tenants Residing in Rental Unit # 1". For a second, third and fourth rental unit, you must fill out pages 10-12, 13-15 and 16-18 respectively.)

Every owner of a building with renter-occupied units must fill out the certification on page 19, entitled "Certification as to Accuracy of Information on Tenants' Household Composition and Income".

HOUSEHOLD INFORMATION FOR AN OWNER LIVING IN THE BUILDING (Fill out this section ONLY if the owner lives in one of the dwelling units in the building.)

NAME, AGE, BIRTH DATE AND TOTAL INCOME FROM ALL SOURCES (Please provide the following information for each person living in the house, including persons who are not related by blood or marriage. Include income from all sources, whether earned or unearned.)

<u>Full Name</u>		<u>Age</u>	Birth Date	<u>Income</u>
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nvestment accounts an	d bank accounts held by any Investment Account or Bank Account Name	y household m	ember.) <u>Value</u> /\$	Estimated Annual Income
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Name		Socia	I Security #	
Annual Income \$				
Name		Socia	I Security #	
Annual Income \$	Employ	er's Name		
Name				
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Type of Documentation		<u>Included</u>	<u>NA</u>
Federal & State Income Tax Returns for the Most I	Recent 3 Years		
Four Consecutive Current Pay Stubs			
A Social Security Award Letter or Check			
A Pension Letter			
A Workman's Compensation Letter or Check for D	isability Income		
An Unemployment Benefits Letter	•		
A Welfare Award Letter or Check			
An Award Letter for Alimony and/or Child Support			
Letters Documenting Payments from Retirement F	unds		
Copies of Most Recent Statements from All Investi	ment Accounts		
Copies of Most Recent Statements from All Bank A	Accounts		
I/We hereby certify that information on household in this application is true and accurate to the best certify that income information has been provided receive income, except those who are full-time study. I/We are aware that if any of the information is fo be denied.	d composition and income p of my/our knowledge and b d for all members of the hou udents working less than 35	provided by pelief. I/V usehold wh hours per	y me/us Ve io week.
I /We understand that this application does not ob program, but rather is being utilized only to determ	•	ard with th	ıe
Print Full Name (all persons named on the deed)	<u>Signature</u>	<u>D</u>	<u>ate</u>

HOUSEHOLD INFORT	MATION FOR TENANTS	RESIDING IN	I RENTAL UNI	IT # 1
Unit Address or Apartm	ent #	F	Rent \$	per month
NAME, AGE, BIRTH [DATE AND TOTAL INCO	ME FROM AL	. L Sources (F	Please provide
	n for each person living in t		-	·
ŭ	riage. Include income from		.	
				,
Full Name		<u>Age</u>	Birth Date	<u>Income</u>
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	JNTS AND BANK ACCO	· ·		tion on all
		,	,	Estimated
Account Owner's Name	Investment Account or	Account #	<u>Value</u>	Annual
	Bank Account Name			<u>Income</u>
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Name		Socia	I Security #	
Annual Income \$				
Name		Socia	I Security #	
Annual Income \$				
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Annual Income \$	Emplo	yer's Name		
Name		Socia	I Security #	
Annual Income \$	Emplo	yer's Name		
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Type of Documentation	<u>Included</u>	<u>NA</u>
Federal & State Income Tax Returns for the Most Recent 3 Years		
Four Consecutive Current Pay Stubs		
A Social Security Award Letter or Check		
A Pension Letter		
A Workman's Compensation Letter or Check for Disability Income		
An Unemployment Benefits Letter		
A Welfare Award Letter or Check		
An Award Letter for Alimony and/or Child Support		
Letters Documenting Payments from Retirement Funds		
Copies of Most Recent Statements from All Investment Accounts		
Copies of Most Recent Statements from All Bank Accounts		

HOUSEHOLD INFORI	MATION FOR TENANTS	RESIDING IN	I RENTAL UNI	IT # 2
Unit Address or Apartm	nent #	R	Rent \$	per month
	DATE AND TOTAL INCO			•
· ·	on for each person living in t		.	
related by blood or mar	riage. Include income from	all sources, wh	nether earned o	r unearned.)
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Name		Socia	I Security #	
Annual Income \$				
Name		Socia	I Security #	
Annual Income \$	Emplo	yer's Name		
Name		Socia	I Security #	
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Type of Documentation	<u>Included</u>	<u>NA</u>
Federal & State Income Tax Returns for the Most Recent 3 Years		
Four Consecutive Current Pay Stubs		
A Social Security Award Letter or Check		
A Pension Letter		
A Workman's Compensation Letter or Check for Disability Income		
An Unemployment Benefits Letter		
A Welfare Award Letter or Check		
An Award Letter for Alimony and/or Child Support		
Letters Documenting Payments from Retirement Funds		
Copies of Most Recent Statements from All Investment Accounts		
Copies of Most Recent Statements from All Bank Accounts		

HOUSEHOLD INFORM	MATION FOR TENANTS	RESIDING IN	I RENTAL UNI	T#3
Unit Address or Apartm	ent #	R	Rent \$	per month
NAME, AGE, BIRTH [DATE AND TOTAL INCO	ME FROM AL	L SOURCES (F	Please provide
the following informatio	n for each person living in t	the house, inclu	uding persons w	ho are not
related by blood or marr	riage. Include income from	all sources, wh	nether earned o	r unearned.)
<u>Full Name</u>		<u>Age</u>	Birth Date	<u>Income</u>
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#6				
#7			- 	
#8				
	JNTS AND BANK ACCO d bank accounts held by an	,		tion on all
investment accounts and	a bank accounts field by an	y nouschold m	citiber.)	Estimated
Account Owner's Name	Investment Account or	Account #	Value	Annual
	Bank Account Name			Income
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/	, 	/	/\$	/\$
/	, 	/	/\$	/\$
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Name		Socia	I Security #	
Annual Income \$			-	
Name		Socia	I Security #	
Annual Income \$				
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Annual Income \$	Emplo	yer's Name		
Name		Socia	I Security #	
Annual Income \$	Emplo	yer's Name		
				VIII:
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Type of Documentation	<u>Included</u>	<u>NA</u>
Federal & State Income Tax Returns for the Most Recent 3 Years		
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A Pension Letter		
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An Unemployment Benefits Letter		
A Welfare Award Letter or Check		
An Award Letter for Alimony and/or Child Support		
Letters Documenting Payments from Retirement Funds		
Copies of Most Recent Statements from All Investment Accounts		
Copies of Most Recent Statements from All Bank Accounts		

HOUSEHOLD INFORM	MATION FOR TENANTS	RESIDING IN	I RENTAL UNI	IT # 4
Unit Address or Apartm	ent #	F	Rent \$	per month
NAME AGE RIPTH F	DATE AND TOTAL INCO	ΜΕ ΕΡΩΜ ΔΙ	I SUIDCES (E	Dlassa nrovida
	n for each person living in		•	•
· ·	riage. Include income from		٠.	
elated by blood of filant	lage. Include income from	i ali sources, wi	lettier earried o	i uneameu.)
Full Name		<u>Age</u>	<u>Birth Date</u>	<u>Income</u>
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#6				
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	JNTS AND BANK ACCO	•		ntion on all
investinent accounts and	a bank accounts new by an	y nousenoid in	ember.)	Estimated
Account Owner's Name	Investment Account or	Account #	Value	Annual
isocum o mor o manno	Bank Account Name	<u> </u>	<u>value</u>	Income
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Name		Socia	I Security #	
Annual Income \$	Emplo	yer's Name		
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Type of Documentation	<u>Included</u>	<u>NA</u>
Federal & State Income Tax Returns for the Most Recent 3 Years		
Four Consecutive Current Pay Stubs		
A Social Security Award Letter or Check		
A Pension Letter		
A Workman's Compensation Letter or Check for Disability Income		
An Unemployment Benefits Letter		
A Welfare Award Letter or Check		
An Award Letter for Alimony and/or Child Support		
Letters Documenting Payments from Retirement Funds		
Copies of Most Recent Statements from All Investment Accounts		
Copies of Most Recent Statements from All Bank Accounts		

CERTIFICATION AS TO ACCURACY OF INFORMATION ON TENANTS' HOUSEHOLD COMPOSITION AND INCOME (All household members whose names appear on the deed MUST sign the certification below.)

I/We hereby certify that the information on tenants' household composition and income provided by me/us on pages 7-18 of this application is true and accurate to the best of my/our knowledge and belief. I/We certify that I/we have attempted to secure all applicable income information for all members of tenants' households, except those who are full-time students working less than 35 hours per week. I/We are aware that if any of the information is found to be willfully false, the application will be denied.

Print Full Name (all persons named on the deed) Signal	ature Da	ate