

**INFORMATION ON AFFORDABLE RENTAL UNITS
IN FLEMINGTON, TOWNSHIP OF RARITAN, HUNTERDON COUNTY, NJ
FLEMINGTON SOUTH GARDENS
Affordable Senior Apartments (62 years & older)**

Ninety-six (96) low and moderate-income age restricted apartments. There are 12 low and 12 moderate efficiency units and 36 low and 36 moderate one bedroom units. The units are being rented under the NJ Low and Moderate Income Affordable Housing Program. Households cannot be larger than a two-person household for the one-bedroom units or a one person household for the efficiency units. **Monthly rental rates are based on Affordable Housing guidelines and regulations and are approximate.**

FEATURES

- Garbage pickup and snow removal
- On-site laundry facilities, on-site community recreation room
- There are provisions for tenant to install air conditioner units
- Stove and refrigerator included, wall to wall carpet
- Within walking distance to grocery stores, restaurants, shopping
- Close to Hospital and Senior Community Center
- Link Transportation System – Front door pickup with service throughout Hunterdon County
- Gas, electric and water are paid by tenant
- One cat or one dog is allowed per apartment. The tenant will be required to sign a Pet Permission Agreement and pay a \$100.00 non-refundable pet deposit prior to taking possession of the apartment

REQUIREMENTS

- You must meet the income requirements
- The units are restricted to a **maximum** of two persons per household
- You must be income certified/qualified under the NJ Low/Moderate Income Housing Guidelines

For details of the process or more information contact:

Flemington South Gardens 908-788-3816 for directions to complex
and to schedule an appointment to see an available apartment.

OR

Central Jersey Housing Resource Center (CJHRC)
92 East Main Street, Suite 407, Somerville, NJ 08876
Telephone: 908-446-0040 Press 5 (Hours: Monday-Friday 9-5)

CREDIT/CO-SIGNOR/OTHER REQUIREMENTS
RARITAN TOWNSHIP - HUNTERDON COUNTY
FLEMINGTON SOUTH GARDENS

This is a senior age restricted rental complex, age 62 years and older.
Children must be 19 years of age or older.

Contact: Kathy Deluca at 908-788-3816

Credit:

Applicants must pass a credit check with Flemington South Garden and have an acceptable credit history.

Rental History:

Applicant understands that Flemington South Gardens may contact current and /or previous landlord to inquire into rental history.

Co-signor:

In certain situations a co-signor may be accepted with approval by the Landlord. The co-signor must pass the same credit application and screening process as the applicant.

Cost of Credit Check:

The cost of a credit check is \$30.00 per applicant and /or co-signor. This fee is non-refundable should the applicant be denied.

Pet Policy:

One cat or one dog is allowed per apartment. The tenant will be required to sign a Pet Permission Agreement and pay a \$100.00 non-refundable pet deposit prior to taking possession of the apartment.

These guidelines represent the requirements of the Management of this individual rental property. Although every effort has been made to provide you with the most accurate, current and clear information possible, The Central Jersey Housing Resource Center (CJHRC) cannot be responsible for inaccurate, misinterpreted or outdated information contained herein.

Directions to Central Jersey Housing Resource Center (CJHRC) office

Appointment are encouraged prior to coming. Call 908-446-0036

CJHRC is convenient located in downtown Somerville: 92 E. Main St. (Rt. 28) Suite 407. Our suite is located in the four floor. During business hours of 9:00 AM to 5:00 PM ring the bell in the welcome desk JUST ONCE and give us a few minutes to meet you and let you in for your appointment.

FROM THE NORTH: Take Route 287 South to Exit 17. Landmark: Pass Bridgewater Commons Mall on left; stay to right. Turn right onto Route 22 East. Immediately after the 2nd overpass, turn right onto Grove Street (just past Kentucky Fried Chicken). Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE SOUTH (Via Route 287): Take Route 287 North to Route 22 West. Landmarks: Pass Bank of America on the right. Immediately after the 1st overpass, turn right (see sign for Somerville). Bear right, go up over the overpass; this leads to Grove Street. Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE SOUTH (Via Route 206): Take Route 206 North. Landmark: On Route 206 North approaching Somerville, look for a low stone wall on left (Duke Gardens). Shortly past this wall, turn right onto Bridge Street (Somerville). At 2nd traffic light, turn right onto East Main Street. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE EAST: Take Route 22 West. Go under Route 287 overpass in Bridgewater. Landmarks: Pass Bank of America on the right. Immediately after the next overpass, turn right (see sign for Somerville). Bear right, go up over the overpass; this leads to Grove Street. Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE WEST: Take Route 22 East into Somerville Landmark: Pass Ethicon Inc. on left. Immediately after the 2nd overpass, turn right onto Grove Street (just past Kentucky Fried Chicken). Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

APPLICATION FOR INCOME CERTIFICATION TO RENT AN AFFORDABLE UNIT AT FLEMINGTON SOUTH GARDENS APARTMENTS Senior Complex (At least one applicant must be 62 or older)

**COMPLETE THIS APPLICATION AND RETURN WITH ALL THE REQUIRED DOCUMENTS TO:
Central Jersey Housing Resource Center: 92 E. Main St. Suite 407, Somerville, NJ 08876**

NOTICE OF DISCLOSURE STATEMENT - AFFORDABLE RENTAL UNITS AT FLEMINGTON SOUTH GARDEN APARTMENTS, RARITAN TOWNSHIP, HUNTERDON COUNTY, NJ

1. Flemington South Gardens units are being rented under the NJ Low and Moderate Income Affordable Housing Program. Proof of income is required, so that gross annual household income can be calculated, to assure an applicant household is qualified and be able to afford and maintain the unit.
2. Affordable units must be occupied by the named applicants. Each renter/tenant shall certify in writing that he/she is renting the affordable unit for the express purpose of their primary residence and for no other reason beyond what is allowable.
3. Renters of affordable units have the same rights, privileges, duties and obligations as any other renters in Raritan Township with the exception of the restrictions in the Township of Raritan's Ordinances and Regulations pertaining to Low and Moderate Income Housing. Selection of participants in the Raritan Township Affordable Housing Program is made on the basis of income, household size and available units.

PLEASE NOTE: FLEMINGTON SOUTH GARDENS MAY ALLOW A CO-SIGNER APPROVED BY LANDLORD.

If you would like more information regarding rental units in Raritan Township, please contact Flemington South Gardens at (908) 788-3816 or the Central Jersey Housing Resource Center at 2cjhrc@gmail.com or (908) 446-0040 press 5.

TO BE ELIGIBLE TO RENT A UNIT, YOU MUST MEET THE FOLLOWING INCOME CRITERIA:

HOUSEHOLD SIZE	LOW INCOME*	MODERATE INCOME*
1	\$41,825	\$66,920
2	\$47,800	\$76,480

*Maximum income limits per Household size and category. These limits were adopted on 4/24/20 and to date have not changed.

I have read the contents of this Notice of Disclosure Statement and I understand it. I know that I have an obligation to notify the Central Jersey Housing Resource Center (CJHRC) immediately (in writing) of any change in my household or household income. I know I, as well as any other member of my household who filed tax returns, must supply copies of my Federal and State Income Tax Returns for the last three years as well as any other required documentation. I know that all information must be completed on all pages of this application or "not applicable" will be written if it does not apply to my household. Failure to fully complete this application and submit the required documentation will result in the inability for it to be processed thus jeopardizing your household being offered an affordable apartment. I realize CJHRC may ask for additional information, if necessary. By signing this form, I give CJHRC the authority to verify all information contained in my application. **(All adults who will be on the lease must sign this page)**

SIGNATURE OF APPLICANT

SIGNATURE OF CO-APPLICANT

Date signed

Date signed

NOTICE OF DISCLOSURE STATEMENT FOR AFFORDABLE RENTAL UNITS AT FLEMINGTON SOUTH GARDENS APARTMENTS, RARITAN TOWNSHIP, NJ

This application is not transferable and the original document must be submitted. Please call the Central Jersey Housing Resource Center (CJHRC) at (908) 446-0040 press 5 if you have any questions about this application. If your application is complete and you are qualified to rent an affordable unit, you will be contacted by CJRHC. **IT IS YOUR RESPONSIBILITY TO MAKE SURE THE INFORMATION PROVIDED IS TRUE AND ACCURATE.**

The information in this application and any other information required by the Township of Raritan will be kept confidential. **NO PART OF THIS APPLICATION OR YOUR APPLICATION FILE WILL BE GIVEN TO ANY PERSON, ENTITY OR BUSINESS NOT RELATED TO THE TOWNSHIP OF RARITAN, OR THEIR AGENTS, WITHOUT YOUR WRITTEN REQUEST OR CONSENT.**

“Household” includes all persons living in a single housekeeping unit whether or not they are related by blood, marriage or otherwise. **The information requested includes information about all persons intending to reside in the Unit.**

ONLY those households who have been certified by the Central Jersey Housing Resource Center and pass the credit check and landlord criteria will be able to rent an affordable unit.

The Disclosure Statement is a part of this application. Please read the Statement for important information. You may wish to consult with an attorney of your choice with respect to the Disclosure Statement, the Affordable Housing Plan or the Application for Certification.

Your income certification to rent an affordable unit in Raritan Township, Hunterdon County in the FLEMINGTON SOUTH GARDENS Apartment Complex qualifies you for an affordable unit that may become available for rent in your specific category. Your category is determined by your income and household size. Your certification letter may provide information on units available at that time. If no available units are available in your category at the time you apply, then you will be placed on a waiting list.

Priority selection for the affordable rental units may need to be made through a random selection process (lottery for units). A random selection is held whenever there are more eligible applicants than units available. Only valid and income certified applicants that complete and pass the landlord credit and other requirements will be included in the random selection process.

REGIONAL PREFERENCE: Those households that live or work in the West Central Housing Region, Group 3 (Hunterdon, Somerset, and Middlesex counties) may receive a preference for the affordable housing units in Raritan Township. You must document proof of residence or employment in this region. Please photocopy and attach some form of valid government issued identification (driver’s license, municipal ID card, passport, pay stubs, etc.) of where you live and work.

(Please complete each line below. If it does not apply to you, write in “not applicable or n/a”)

1. HOUSEHOLD COMPOSITION:

Name of Household Member filling out this form: _____ Sex: M/F

Marital Status: _____ Married _____ Single _____ Divorced _____ Widowed _____ Legally Separated

Date of Birth: _____ Age: _____ Last 4 digits of Social Security Number: _____

Home Phone: () _____ Work Phone: () _____

Cell Phone (): _____ Email Address: _____ --

Current Address: Street: _____ --

City: _____ State: _____ Zip Code: _____ County: _____

Mailing Address (if different): _____

(Please complete each line below. If it does not apply to you, write in "not applicable or n/a")

Name of Second Adult in household: _____ Sex: M/F

Date of Birth: _____ Age: _____ Relationship: _____

Last 4 digits of Social Security Number: _____

Home Phone: () _____ Work Phone () _____

Cell Phone: () _____ Email Address _____

Current Address: Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

Mailing Address (if different) _____

2. CURRENT STATUS

Do you currently _____ Rent _____ Own your own home _____ Other _____

How long at the address above? _____ Years _____ Months

What was your previous address? _____ City _____ State _____ Zip _____

What is your monthly rent or mortgage payment \$ _____ Have you ever owned a home? Yes _____ No _____

If you currently own your home, what is the value of this home? _____ What is the Principal Balance of your Mortgage? _____ If you owned a home in the past but no longer do, please explain in detail on separate piece of paper.

If you own your own home, please attach documentation verifying the value of the home. Attach proof of the mortgage principal amount (you can attach a current mortgage statement).

How many people will live with you if you are offered a unit? _____ How many are under 18 years of age? _____

**Please note that Flemington South Gardens only has efficiency or one-bedroom apartments.*

OTHER:

Other applicable information/comments or special details about your housing situation:

(Please complete each line below. If it does not apply to you, write in "not applicable or n/a")

3. EMPLOYMENT INFORMATION

Please provide information for each household member who receives income from present employment and is 19 years of age or over. (Also include any part-time employment) – Please attach another page if you need more room.

1. **Household Member Name** _____
 Employer Name _____
 Employer Address _____
 County: _____ How long at job? _____
 Immediate Supervisor _____ Phone Number _____
 What is Your Job Title? _____

2. **Second Household Member Name** _____
 Employer Name _____
 Employer Address _____
 County: _____ How long at job? _____
 Immediate Supervisor _____ Phone Number _____
 What is Your Job Title? _____

4. INCOME SOURCES

Please state the amount of your current monthly projected gross income from each applicable source. Use additional pages if more than three adults have income. Please use a separate income information section for every household member who is 18 years of age or over and receives income of any kind.

	<u>Adult #1</u>		<u>Adult #2</u>
	First Name _____		First Name _____
Monthly Gross Salary or Wages	\$ _____		\$ _____
Pension	\$ _____		\$ _____
Social Security	\$ _____		\$ _____
Unemployment Compensation	\$ _____		\$ _____
Child Support received (add)	\$ _____		\$ _____
Child Support paid (deduct)	\$ _____		\$ _____
Alimony received (add)	\$ _____		\$ _____
Alimony paid (deduct)	\$ _____		\$ _____
Disability Payment	\$ _____		\$ _____
Welfare	\$ _____		\$ _____
Tips/Commissions/Self Employment Income	\$ _____		\$ _____
Rental Income	\$ _____		\$ _____
Other _____	\$ _____		\$ _____
Sub-Totals	\$ _____	+	\$ _____

TOTAL OF ADULT MONTHLY INCOMES = \$ _____ x 12 = \$ _____ Annual Gross Income

(Please complete each line below. If it does not apply to you, write in "not applicable or n/a")

5. FINANCIAL INFORMATION

Please list all **Checking and Savings accounts**, CD's, Money Market Funds, Mutual Funds and any other assets held by financial institutions below, whether or not you gain any interest from them, for all household members. **We must receive the entire bank statement, all pages, blank or not.**

Name of Financial Institution	Account Number Last 4 Digits	Current Balance/Value	Projected Annual Interest Income

Total Projected Interest Income from this section: \$ _____

6. OTHER INCOME/ASSET INFORMATION

Please list all stocks, bonds and all other sources of investment income.

Name of Assets	Number of shares	Current Value	Projected Annual Income

Total Projected Income from this section: \$ _____

Do you own a business or income producing real estate? Yes _____ No _____

Do you receive income/monies/rent receipts from this asset? Yes _____ No _____

If you own a business, you may wish to request the "Self Employed Info Sheet from CJHRC.

What is the monthly gross income and expenses (provide at least the most current 4 months of data – usually a profit and loss statement dated and signed by a 3rd party) \$ _____

Do you have any other sources of income? If so, please describe: _____

7. FOR STATISTICAL PURPOSES: Please indicate your racial/ethnic group below by circling what applies to your household:

- Ethnicity of household:** Hispanic Not Hispanic
- Single Race:** American Indian/Alaskan Native Asian Black/African American
- Native Hawaiian or Other Pacific Islander White
- Multi-Race:**
- American Indian or Alaskan Native and White Asian and White Black or African American and White
- American Indian or Alaskan Native and Black/African American Other – Multi Race Choose not to Respond

THE FOLLOWING DOCUMENTS ARE REQUIRED WITH THIS APPLICATION:

Please submit separate income information for every household member who is 19 years of age or over and receives income of any kind.

1. **Copy of documentation showing proof of age, some examples:** (Driver’s license or state identification card, hospital birth record, naturalization/immigration paper (if age is shown), military discharge paper (if age is shown), passport
3. **Copies of State and Federal tax returns for the previous 3 years** (do not send W-2’s)
4. **Copies of pay stubs (4 current and consecutive)** and proof of income from all other sources.
5. **Copies of two months current bank statements (all pages)** from all accounts that you have. Statement must show name of account holder and institution name.
6. **Documentation to confirm income from any other applicable sources: Pension** (4 statements or written proof from pension company), **Social Security – recent benefit letter**, Unemployment (need to see how much is awarded each month as well as how much is left in unemployment benefit for that person
7. **Documentation to confirm the following possible sources of income:** Copies of Section 8 voucher, child support court documents, divorce decree or separation agreement and custody verification with signatures. Copy of Alimony and/or child support payments received or paid (need copy of court decree) – if applicable. All separated applicants must provide a settlement agreement, divorce decree or division of assets signed and notarized by both parties. If you get child support we need documentation/ proof of payments to count it as income. If you pay child support we need documentation/ proof of payments to deduct it from your gross income if you choose this option.
8. **Documentation to confirm interest income/proof of assets** – recent statements including IRA, savings bonds and other retirement accounts including 401K’s
9. **Any other source of income must be documented.** Written proof is required.
10. **Circumstances when you need a notarized letter:** If you do not earn an income, did not file tax returns for one of the most recent 3 years, do not own a checking or savings account, if you are a full time student (over 19 years of age) we need a letter and proof of enrollment in school.

CERTIFICATION

I hereby certify that the above information concerning my Household size, actual gross income as well as all other information contained herein is true and accurate to the best of my knowledge. I understand that CJHRC and the Township of Raritan are relying on this information to determine whether I qualify for an affordable housing unit.

I further certify that the copies of the documents attached to this application are true and accurate copies of the originals of such documents. I understand this application with any and all documents submitted will become the property of Raritan Township and **will not be returned.**

I further certify that I intend to personally occupy the unit as my primary residence except for reasonable periods of vacations and illnesses. I know that it would be illegal to rent or sublet the unit. I understand that only the parties listed on this application may reside in the affordable housing unit.

I authorize CJHRC, the Township of Raritan and their agents to check for accuracy on any and all statements and representations made in this application. This may include calls to employers to verify income, contact with banks, etc.

Signature of APPLICANT

Signature of CO-APPLICANT

Date signed

Date signed