

RARITAN TOWNSHIP (Hunterdon County)
**VERY LOW/LOW/MODERATE HOMEOWNER INCOME AFFORDABLE
HOUSING REHABILITATION PROGRAM APPLICATION**

If you are interested in the Township of Raritan's Very Low/Low/Moderate Homeowner Rehabilitation Program, please complete this form with the required documents and return it to: Central Jersey Housing Resource Center (CJHRC), 92 East Main Street, Suite 407, Somerville, NJ 08876. If you would like more information you can email CJHRC at 2cjhrc@gmail.com or call CJHRC at (908) 446-0040 press 3.

This application does not guarantee your acceptance in this program. Assistance will be provided on a first-come, first-serve basis to existing income-eligible homeowners applying for the Rehabilitation Program.

Owner-occupied housing units are eligible to receive funding for rehabilitation provided that the occupants of the units are determined to be very low, low - or moderate-income households and that the units are determined to be substandard. If a structure contains two or more affordable units and an owner, who is not income eligible, occupies one of the units funding may be provided for the rehabilitation of the rest of the units if income-eligible households occupy those units.

The Township of Raritan's Municipal Housing Liaison and Chief Financial Officer determines the awards and will make the determination based upon many requirements, some of which are:

1. The homeowner applying must have and always have owned the property as his/her primary residence since its purchase.
2. The homeowner applying must be in compliance with all rules and regulations.
3. The unit/home applying for the rehabilitation programs must currently be a Township of Raritan home/unit in Hunterdon County and must meet all income and other criteria. Each unit's total household income must fall within the State's income limits for very low, low or moderate based on household size. All documentation must be submitted and a complete application is required before the review process can begin.
4. The Administrative Agent for Township of Raritan, Hunterdon County (CJHRC) will determine whether or not the applicant's household for this program should be considered by the Township as they have proven/met the required criteria.
5. The applicant household must submit by mail or drop box, to the Administrative Agent for Township of Raritan, Hunterdon County (CJHRC) a fully completed application with the required documentation. Utilizing phone counseling a monthly budget may need to be created to document income and expenses of the household. Appointments to do this phone counseling will be offered Monday through Friday from 9am to 4pm but is subject to change.
6. The applicant household must submit and provide documentation and complete a counseling session by phone. This is in order to review all income and expenses and any arrearages, at the time of applying, i.e. sewer/water bill, real estate tax bill (if paid separately) and monthly association fees. With the assistance of documentation and monthly budget, CJHRC will determine that the homeowner is only spending a maximum range of 30-40% of their gross income on future shelter costs to be considered for this rehabilitation program.
7. Once the application and all required documents are received by CJHRC, the budgeting and counseling session has been completed and the application has been reviewed, CJHRC will determine whether or not the household is eligible for the Township of Raritan Rehabilitation Program. CJHRC will submit the application to the Municipal Housing Liaison for Township of Raritan (Hunterdon County) to Raritan Township's Municipal Building, One Municipal Drive, Flemington, NJ 08822. In certain circumstances the information may be scanned and submitted to the Township from CJHRC when appropriate. The applicant(s) will receive an approval or denial from the Township of Raritan usually within 10 business days.

Approval shall only be granted to applicants who demonstrate to the reasonable satisfaction of the Administrative Agent (CJHRC) and the Township of Raritan that there is a very high likelihood that with the receipt of funds from the Township of Raritan Rehabilitation Program, the applicant household will be able to stay current with their Shelter Costs in the future. Eligibility will remain valid for six months. If the applicant has not signed a contract for rehabilitation and a construction agreement within six months of the date of the letter of certifying eligibility, the applicant will be required to reapply.

If denied, a written determination of why funding assistance has been denied will be provided by the Administrative Agent (CJHRC). This determination shall be final and non-appealable.

Specific Income Eligibility Requirements:

1. Recipients of the Township of Raritan Very Low-/Low-/Moderate-Income Homeowner Rehabilitation Program must be very low, low or moderate-income families as determined using annual income limits for NJ Housing Region 3.
2. Households will not be approved for the Rehabilitation Program unless they can show/document the ability to afford the affordable home and related housing costs if the rehabilitation program is approved. Proof of gross annual household income is required from all household members.
3. Any homeowner approved for the Township of Raritan Very Low-/Low-/Moderate-Income Homeowner Rehabilitation Program must be occupied by the named purchaser(s) and must be used as the primary residence at all times.

To be eligible for the Township of Raritan Very Low-/Low-/Moderate-Income Homeowner Rehabilitation Assistance Program, qualified applicants must have total household income for all members of the family residing in the home.

Incomes cannot exceed the below limits as of 4/24/2020:

Family Size	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person
Moderate	\$66,920	\$76,480	\$86,040	\$95,600	\$103,248	\$110,896
Low	\$41,825	\$47,800	\$53,775	\$59,750	\$64,530	\$69,310
Very Low	\$25,095	\$28,680	\$32,265	\$35,850	\$38,718	\$41,586

NOTICE OF DISCLOSURE STATEMENT

This application must be fully completed for it to be accepted and processed. This application is not transferable and the original must be submitted. Once you have completed this application, attached and submitted all required documents Central Jersey Housing Resource Center (CJHRC) will contact you to schedule a counseling appointment.

IT IS YOUR RESPONSIBILITY TO MAKE CERTAIN YOUR APPLICATION IS COMPELTE AND THE INFORMATION PROVIDED IS TRUE AND ACCURATE.

The information in this application and any other information 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 THIS APPLICATION PROCESS WITHOUT YOUR WRITTEN REQUEST OR CONSENT. The information provided in this application will be used solely by Township of Raritan, CJHRC or their Agents for the purpose of qualifying you for rehabilitation funding assistance. The filing of this application constitutes your approval for CJHRC or its agents to certify the information contained herein through credit verification or other necessary means. **“Family” includes all persons living in a single dwelling unit whether or not they are related by blood, marriage or otherwise.**

FOR STATISTICAL PURPOSES: Please indicate your racial/ethnic group below.

Hispanic _____	Yes _____	No _____
Asian _____	American Indian/Alaskan Native _____	
Asian & White _____	American Indian/Alaskan Native & White _____	
Black/African American _____	American Indian/Alaskan Native & Black _____	
Black/African American & White _____	Native Hawaiian/Other Pacific Islander _____	
White _____	Other Multi Race _____	Chose Not to Respond _____

Description of Raritan Township Rehab Assistance Program:

The purpose of the program is to bring substandard housing up to code. Substandard units are those units requiring repair or replacement of at least one major building system. A major system is any one of the following:

1. Water Heater Replacement
2. Furnace
3. Central Air
4. Major building system repairs, include roof, plumbing, heating, electrical, load bearing structural systems, weatherization as well as related work (to the major system repair) such as interior trim, doors, stairs, wall surface repair, painting, etc.

Certification of a substandard building system will be established by a licensed inspector and provided through the Township of Raritan, Hunterdon County.

Water Heater Replacement. Applicants usually cannot apply unless their existing water heater is more than eight years old.

Furnace Replacement. Applicants usually cannot apply unless their existing furnace is more than 12 years old.

Central Air Conditioner Replacement. Applicants usually cannot apply unless their existing air conditioning unit is more than 12 years old.

Other Rehabilitation and Repairs. As listed above in item #4.

A maximum of approximately \$8,300 has been set aside by Raritan Township to cover the repair costs/materials and permits with approximately 20% on top for the administration of the rehab per unit. Raritan Township has set aside a total average of \$10,000 per affordable dwelling unit for owner/occupied affordable housing rehabilitation.

Homeowner's are encouraged to consult with the Township's Administrative Agent, Central Jersey Housing Resource Center, to determine if repairs or replacements needed on their homes qualify as one or more major building systems to confirm eligibility to receive funding for "other rehabilitation and repairs". This program is available to Raritan Township homeowners who meet all criteria.

This program will require three written estimates with detailed information about all costs. All permit fees will need to be included. Homeowners and installers will need to abide by all Township and State Regulations. All repairs and replacements to one or more major building systems will need to be installed by licensed and insured entities that will ensure that all applicable local and state code and safety standards are met.

Assistance will be provided on a first-come, first-served basis to existing income-eligible homeowners. In addition to homeowner, all owners of 100% affordable developments are also eligible for the program. Assistance will only be provided one-time to the certified applicant household. Assistance will only be provided one-time to the certified applicant household and the home, where repairs and replacements of one or more major building systems are undertaken, which must be the primary residence of the homeowner/applicants (except for 100% affordable developments).

FINANCING:

Financing will be provided to eligible very low, low or moderate income property owners by way of a ten-year, interest free, amortized depreciating loan, with funds from the Township’s Housing Trust Fund. As long as the homeowner resides in his/her unit for the ten-year period after completion of the rehabilitation improvement(s), the loan will be forgiven. If the property is sold and/or title/occupancy changes between years 1 through 10 except for allowable conditions under loan repayment terms section below.

If the owner decides to sell the property, transfer title, or if the owner should die before the terms of the lien expire, the owner, heirs, executors or legal representatives must repay the loan according to the schedule unless a title change as listed below happens.

Exceptions to Loan Repayment Terms above during the lien period:

1. If the loan transfers due to inheritance of low or moderate income family member beneficiary who will take occupancy upon death of program mortgagee and assume the balance of the lien, or
2. If the house is sold at an affordable price pursuant to N.J.A.C. 5:97-9.3 to someone who can be qualified as income eligible, takes occupancy and agrees to assume the program lien for the remaining duration of the lien period, or

3. Loan Repayment Schedule

The amortized depreciating loan is subject to repayment according to the following schedule:

<u>Repayment During Years(s)</u>	<u>Amount of Loan/Grant to be Repaid</u>
1 and 2	100%
3	90%
4	80%
5	65%
6	50%
7	35%
8	20%
9	10%
After 10 years	No Repayment Required

Subordination

The Township of Raritan may agree to subordination of a loan if the mortgage company supplies an appraisal showing that the new loan plus the balance on the old loan does not exceed 80% of the appraised value of the unit. In addition, the household must be recertified as low- or moderate income.

PLEASE SELECT WHICH FORM OF HOMEOWNER ASSISTANCE YOU ARE SEEKING:

Water Heater Replacement _____ Furnace Replacement _____

Central Air Conditioner Replacement _____ Other Rehabilitation & Repairs _____

Comments/Other Info:

If seeking assistance for any of the following: Water Heater, Furnace or Central Air Conditioner Replacement please attach the required three written estimates with detailed information about all costs for each item. Remember all permit fees will need to be included. All Township and State Regulations will need to be abided by.

All replacement items in the Raritan Township Rehabilitation Program will need to be installed by licensed and insured entities that will ensure that the new water heater, furnace and/or Central Air Conditioning system will meet all code and safety standards. All rehabilitation and repair work performed with funding provided through

Township of Raritan 's Very Low-/Low-/Moderate-Income Homeowner Affordable Housing Rehabilitation Program will need to be undertaken by licensed and insured contractors and entities that will ensure that all work, rehabilitation and repairs performed meet all applicable code and safety standards.

HOUSEHOLD COMPOSITION:

Name of Household Member(s) on Deed: _____

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

Date of Birth _____ Last 4 digits of your Social Security Number _____

Best Phone # () _____ Daytime Cell Phone () _____

Email: _____

Address: _____

City: _____ State: NJ Zip Code: _____

Please list all household members, **excluding the person filling out the form**, who live in the low or moderate income unit:

Name (please print)	Relationship (Son, daughter, father-in-law, etc.)	Male (M) or Female (F)	Date of Birth

HOUSING INFORMATION

Please respond to the below questions and attach current written documentation to back up the information below:

1. Price Paid Originally for Affordable Home \$ _____ Date Purchased: _____

2. 1st Mortgage is currently with _____

3. Monthly mortgage payment is \$ _____

4. 2nd Mortgage (or home equity assistance program) is currently with _____

5. 2nd Mortgage (or home equity assistance program) monthly payment is \$ _____

6. Monthly Real Estate Taxes are included Yes / No in the mortgage payment – if not included in mortgage payment list monthly amount and include tax bill/statement \$ _____

7. \$ _____ Sewer/water expenses (specify if monthly or quarterly); attach bill

8. \$ _____ Maintenance Fee (HOA) a month if none write N/A; attach bill

9. Do you own any other real estate? Yes _____ No _____

If you answered yes, please

explain: _____

10. Do you have any other assistance programs or liens on your affordable home? No _____ Yes _____

If you answered yes please, explain and attach documentation.

11. How long have you lived at current address? _____

As of today, the maximum resale price of your affordable home is \$_____ (CJHRC will supply this to you upon request if you are in a deed restricted affordable unit –request this by email).

EMPLOYMENT INFORMATION

Please provide information for each household member who receives income from present employment and is 18 years of age or over. (Also include any part-time employment)

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

2. Household Member Name _____
 Employer Name _____
 Employer Address _____
 County: _____ How long at job? _____
 Immediate Supervisor _____ Phone # and extension _____
 What is Your Job Title _____

INCOME SOURCES

Please state the amount of your current annual projected gross income from each applicable source. **Please complete a separate calculation for every household member who is 18 years of age or over and receives income of any kind. Use additional pages if more that two adults have income or if any adults have additional employment (work more than one job).**

	<u>Adult #1</u>	<u>Adult #2</u>
Gross Salary or Wages	\$ _____	\$ _____
Pension	\$ _____	\$ _____
Social Security	\$ _____	\$ _____
Unemployment Compensation	\$ _____	\$ _____
Child Support received (added to income)	\$ _____	\$ _____
Child Support paid (deducted from income)	\$ _____	\$ _____
Disability Payment	\$ _____	\$ _____
Welfare	\$ _____	\$ _____
Tips/Commissions	\$ _____	\$ _____
Alimony	\$ _____	\$ _____
Other _____	\$ _____	\$ _____
Sub-Totals	\$ _____	\$ _____ =

TOTAL OF ADULT INCOMES \$ _____

OTHER INCOME/ASSET 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.

Name and Address of Financial Institution	Account Number	Current Balance/Value	Projected Annual Interest Income

Total Projected Interest Income from this section: \$ _____

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

TOTAL HOUSEHOLD GROSS ANNUAL INCOME FROM ALL SOURCES
\$ _____

IN ADDITION TO THIS COMPLETED APPLICATION, YOU WILL NEED TO SUBMIT THE FOLLOWING REQUIRED DOCUMENTS WITH THIS APPLICATION. ANYTHING THAT IS NOT APPLICABLE YOU WILL STATE THAT ON THE APPLICATION BY WRITING N/A.

1. Copy of all bills/expenses and proof of monthly income so a budget with income and expenses can be created based on the documentation supplied during a phone counseling session.
2. Copy of current mortgage statement.
3. Copy of current home equity or line of credit statement
4. Copies of Federal tax returns for the previous 3 years for all applicable household members.
5. Copies of pay stubs (4 current and consecutive) and proof of income from all other sources for all household members. Examples: Social Security, Pension, Unemployment, Alimony/Child Support, etc..

6. Attach recent documentation to confirm all income from items listed below (i.e., two months recent bank statements (all accounts), statements from other assets (IRA's, Retirement Accounts, etc....)).
7. Proof of any other sources of income must be documented, written proof is required.
8. Circumstances when you will need a notarized letter and back up documentation:
 - a) Do not earn income
 - b) Did not file tax returns
 - c) Do not own a checking or savings account
 - d) Alimony or Child Support paying or received that is not going through the court
9. Copy of the current deed to the property.
10. Proof that property taxes and water and sewer bills are current.
11. Proof of property insurance, including liability, fire and flood insurance where necessary.

CERTIFICATION

I hereby certify that all information contained in this application and herein is true and accurate to the best of my knowledge. I understand that the Administrative Agent (CJHRC) and the Township of Raritan in the County of Hunterdon are relying on this information to determine whether I qualify for Township of Raritan Very Low-/Low-/Moderate-Income Homeowner Rehabilitation Program.

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 authorize the Administrative Agent (CJHRC), the County of Hunterdon 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