Creative Property Management of New Jersey, Inc. Affordable Housing Application

80 West Grand street, Elizabeth, NJ 07202	
Phone: (908) 3S4-3040 • Fax: (908) 354-2665	Date of Application:

Dear Applicant,

Thank you for your interest in our rental units. There are a variety of one-, two-, three- and four bedroom apartments in Union County. There are also a number of apartments available at the HUD Fair Market Rent (FMR) level for the area.

If you are interested in applying for any variety of rental apartments in Union County, New Jersey, please complete the attached Preliminary Application as soon as possible and mail it directly to us, at: Creative Property Management, Inc. 80 West Grand Street, Elizabeth, NJ 07202.

PLEASE KEEP THE FIRST TWO PAGES FOR YOUR RECORDS

Preliminary Application

Rental Properties

Union 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 apartment 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 cannot and do not guarantee housing based on the approval of this Preliminary Application. 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.

PLEASE NOTE: HOUSING APPLICATIONS ARE ONLY VALID FOR ONE YEAR FROM DATE OF APPLICATION. TO BE KEPT ON OUR WAITLIST YOU MUST RE-APPLY ANNUALLY.

Rental Housing Policies and Requirements

- It is unlawful to discriminate against any person making application to rent a home with regard to age, race, religion, national origin, sex, handicapped or familial status.
- This housing must be the intended primary residence of the applicant.
- All household members who intend to reside at the affordable apartment must be listed in the Preliminary Application. If changes in household composition occur during the application process, or if there is a change of address, the applicant is required to notify Creative Property Management of New Jersey, 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
- Specific documentation to verify income and assets will be required at a later date, during the final portion of the application process, during which no changes will be allowed.
- Please understand that the rental rates for any rental unit are established and governed by State and / or municipal regulations. Although consideration is made for low- and moderate- categories of household incomes, rental rates do not fluctuate on the basis of each individual applicant's income. Therefore, we cannot and do not guarantee that any apartment for 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.

If you need assistance completing this application, please contact us at 908-354-3040 and ask to speak with the Real Estate Accounting Department

DO NOT SEND SUPPORTING DOCUMENTATION WITH THIS APPLICATION.

Please mail your application to the address below or fax it to us at 908-354-2665.

Creative Property Management of New Jersey, Inc.

80 West Grand street, Elizabeth, NJ 07202

Preliminary Application

A. Head of Household Information

Date of Ap	plication:	

Last Name:	Address:	Home Tel:
First Name:	P.O Box or Apt. No.:	Cell Ph.:
Soc. Sec, No. (Please Provide a Copy)	City:	Work Tel.:
127	County:	
Drivers Lic. No (Please Provide a Copy)	Zip: State:	
Vehicle Make/Model:		
Vehicle Plate/State Issued:		

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

	Full Name (First, Middle & Last) List everyone who will occupy the apartment.	Relation To	Date of Birth	Sex	Gross Annual Income	Social Security Number
#1	67	Head of Household		- 1	\$	
#2					\$	
#3					S	
#4					s	
#5					s	

C. Assets (Bank Accounts, Cert. 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.)

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Type of Asset	Current Market Value of Asset	Estimated Annual Income	Interest Rate					
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D. Additional Information

1.	Do you receive any rental assistance such as Section8? Tyes No
	If yes, please provide the name of the Housing Authority that administers the voucher:
2.	Do you pay or receive alimony and/or child support to/from someone outside the household? Yes No
	If yes, how much do you pay/receive per month? \$
3+	Have you ever been convicted of a felony? Yes No
	If yes, please explain:
4.	Have you ever been evicted from an apartment for any reason? Yes No
	That is you only considered when an appropriate any second
	If yes, please explain (provide dates):
5.	
5.	If yes, please explain (provide dates):



1.]	Numb	per of bedrooms needed. (Choose ONE. Limited by number in household)	
		One?	
		Two?	
		Three?	
		Four?	
2. Do you require Handicap Accessibility? Yes No			
	If yes	es, please explain:	

F. Address History (Must Be Completed For the Last 5 Years)

E. Preferences

	Previous Address	Monthly Rent	Years of Occupancy	Landlord/Sup. Name	Telephone No.	Reason for Moving
#1	*					
#2						The state of the s
#3						
#4	and the same of th	-				
#5			A employee			
		-1			Carlo San Landar	and the second s

G. Employment

Address	Length Employed	Position	Annual Salary	Telephone Number
Address	Length Employed	Position .	Annual Salary	Telephone Number
			Constitution of Parliament of Parliament (1991)	
The same times		The company of the co		
				Address Length Fourboard Position

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

I(We) hereby authorize Creative Property Management of New Jersey, Inc. its 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:	



