

PCH Development Corporation

An Affiliate of Princeton Community Housing

One Monument Drive, Lower Level, Princeton, NJ 08540 609-924-3822 609-924-3827 (fax) www.pchhomes.org

Dear Applicant:

Thank you for your interest in Princeton Community Housing and Hopewell Township's affordable housing sales program. We have been engaged by the Township to provide you with affordable housing sales information and guide you through the application process.

There are a variety of opportunities for low and moderate income homes for sale in Hopewell. If you are interested in purchasing an affordable home in Hopewell, please complete the enclosed application with all the required documentation and return the application package to the address listed above. If you wish to speak with someone in person, we encourage you to call and set up an appointment. If you wish to simply drop off the application, please note our office hours below.

Monday 8:30 am to 4:30 pm
Tuesday 8:30 am to 4:30 pm
Wednesday 8:30 am to 4:30 pm
Thursday 8:30 am to 4:30 pm
Friday 8:30 am to 4:30 pm

Within 30 days from when we receive your application, you will receive a letter of determination with regard to your preliminary eligibility for a Hopewell affordable home. Applications will be processed on a "first come, first serve" basis. Please note that all the information requested must be provided. Failure to submit all documents will delay the process. If a complete application with all requested supporting documentation is not received by this office within 45 days of your initial submittal, you shall be required to submit a new application. It is your responsibility to make certain your application is complete and the information provided is true and accurate.

Please see the enclosed application for income requirements and additional information. If you have any questions, please feel free to visit our website at www.pchhomes.org or contact us via phone or email; call us at 609-924-3822, ext. 2 or email: pchdc@pchhomes.org.

Thank you.

PCHDC Administrative Agent, Hopewell



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HOPEWELL TOWNSHIP AFFORDABLE SALES PROGRAM APPLICATION

This application does not guarantee you a housing unit. Selection is made on the basis of numerous criteria, which includes credit/background check, income, household size and available units. The following restrictions apply:

- 1. Purchasers of Hopewell Township Affordable Housing units must be Low and/or Moderate Income households as determined by the N.J. Council on Affordable Housing (COAH) guidelines (see chart below). Proof of gross annual household income is required to assure that you are qualified. You must have a written pre-approval from a lending institution in writing in order to qualify. Your application will not be processed without a written pre-approval.
- 2. Affordable units must be occupied by the named purchaser and must be used as your primary residence. Each purchaser shall certify in writing, that he/she is purchasing said unit for the expressed purpose of primary living quarters and for no other reason beyond what is allowable. Purchasers of affordable units are prohibited from renting or leasing the affordable unit. Only the parties listed on this application may reside in the affordable housing unit.
- 3. At closing you will be required to sign documents that will contain the restrictions of the Affordable Housing Program. These restrictions will be recorded with your Deed and/or Mortgage.
- 4. Purchasers of affordable units have the same rights, privileges, duties and obligations as any other purchasers in Hopewell Township, with the exception of the restrictions in the Hopewell Township Ordinances and Regulations pertaining to Low, Moderate and Middle Income Housing.
- 5. Priority Selection for the affordable purchase units will be made through a random selection process (lottery for units). A random selection is held whenever there are more eligible applicants than units available.
- 6. All applicant information required by PCHDC will be kept confidential. Your income will be determined based on the income information you have provided.

TO BE ELIGIBLE TO PURCHASE AN AFFORDABLE HOPEWELL TOWNSHIP UNIT, YOU MUST MEET THE FOLLOWING INCOME CRITERIA:

HOUSEHOLD SIZE	LOW INCOME	MODERATE INCOME
	INCOME	INCOME
1	\$45,519	\$72,830
2	\$52,022	\$83,234
3	\$58,524	\$93,639
4	\$65,027	\$104,043
5	\$70,229	\$112,367
6	\$75,431	\$120,690

APPLICATION FOR AFFORDABLE PURCHASE UNIT: HOPEWELL TOWNSHIP – (continued)

Authorizations, Representations and Certifications

I do hereby authorize the PCHDC and any owner of any affordable unit in Hopewell Township to obtain a "consumer report" as defined in the Fair Credit Reporting Act, 15 U.S.C. Sec. 1681a(d), seeking information on the credit worthiness, credit standing, credit capacity, general reputation, or mode of living of applicants. I understand that any misrepresentation of information or failure to disclose information requested on this application may disqualify me from consideration for admission or participation, and may be grounds for eviction or termination of assistance.

NOTICE: Any attempt to obtain any subsidy or affordable housing sales unit by false information, impersonation, failure to disclose or other fraud, and any act of assistance to such attempt is a crime.

I understand that this is not a contract and does not bind either party. I/We certify that the information on this application is true and complete to the best of my/our knowledge. I have no objections to inquiries being made for the purpose of verifying the statements made herein.

I understand that this application must be fully completed for it to be accepted and processed. This application is not transferable and the original must be submitted. If you require assistance, please call PCHDC at (609) 924-3822, ext. 2. Once you have completed this application and attached all required documents, please return to: PCHDC, One Monument Drive, Princeton, NJ 08540 SIGNATURE OF APPLICANT SIGNATURE OF APPLICANT DATE SIGNED DATE SIGNED **FOR STATISTICAL PURPOSES:** Please indicate your racial/ethnic group below. Please circle one: American Indian/Alaskan Native Asian American African American Hispanic White/Non-Hispanic Other:

APPLICATION FOR AFFORDABLE PURCHASE UNIT: HOPEWELL TOWNSHIP – (continued) (Fill in entire application. If it does not apply to you, write in "n/a")

1. HOUSEHOLD COMP	OSITION:			
Name of Household Mem	ber filling out this	form		Sex: M/F
Date of Birth	_ Social Security N	Number		
Marital Status:Single _	_ Married Divo	orced Separate _	Widow	
Home Phone ()		Work Phone ()	
Cell Phone ()		Email Address:		<u>.</u> .
Current Address: Street: _				
City:	State:	Zip Code:		County:
Mailing Address (if different	ent)			
Name of Second Adult in	household:			
Marital Status:Single _	_ Married Divo	orced Separate _	Widow	
Date of Birth	_ Social Security N	Number		
Home Phone ()		_ Work Phone ()	·····
Cell Phone ()		Email Address:		
Current Address: Street: _				
City:	State:	Zip Code:		County:
Mailing Address (if different	ent)			
Please list all household m				rm, who will live in the home.
Name	Relations	hip C	Gender	DOB <u>and</u> Social Security #
YOUR PRESENT HOUSIN	<u>NG</u>			
Do you own your own hor	ne or	do you rent?		
What do you currently pay	a month for more	tgage or rent?		
How many persons present How many are less than 1				
How many bedrooms are i	n your present ho	me?		
If you are unable to secure If yes, to where would you				our present residence?
How many bedrooms will	you need for your	family?	_	
	at current address?)		

Othe	r applicable information/comments or spe	cial details about your housing situation:
2. <u>I</u>	APPLICATION FOR AFFORDABLEMPLOYMENT INFORMATION	LE PURCHASE UNIT: HOPEWELL TOWNSHIP – (continued)
Pleas	se provide information for your present en	nployment and any part time employment you may have.
1.	Household Member Name	
		how long at job?
		Phone Number
	•	
2.	Household Member Name	
	Employer Name	
		how long at job?
	Supervisor Name:	Phone Number
	What is Your Job Title?	
3.	Household Member Name	
	Employer Name	
	County:	how long at job?
	Supervisor Name:	Phone Number
	What is Your Job Title?	
4.	Household Member Name	
	Employer Name	
	Employer Address	
		how long at job?
	Supervisor Name:	Phone Number
	What is Your Job Title?	

APPLICATION FOR AFFORDABLE PURCHASE UNIT: HOPEWELL TOWNSHIP – (continued)

3. **INCOME INFORMATION**

Please use a separate income information section for income of any kind.

ATTACH THE FOLLOWING REQUIRED DOCUMENTS: (Also see attached Checklist)

- A. Copies of State and Federal tax returns for the previous 3 years, including copies of all W-2 forms
- B. Copies of pay stubs (four (4) current and consecutive) and/or proof of income from all other sources
- C. Attach recent documentation to confirm all income from items listed below (i.e., recent bank statement, statements from other assets, etc., copies of six (6) months of recent checking and savings account statements (All pages)

4. **INCOME SOURCES**

Please state the amount of your current annual projected gross income from each applicable source.

	Adult #1		Adult #2
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			\$

5. 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			Projected Annual Interest Income		

Total Projected Interest Ir	ncome from this section	ı:	\$

APPLICATION FOR AFFORDABLE PURCHASE UNIT: HOPEWELL TOWNSHIP – (continued)

Please list all stocks, bonds and all other sources of investment income. Name of Assets Number of shares Current Value Projected Annual Income.				
Name of Assets	Trumber of shares	Current value	1 Tojected All	muai meome
Total Projected Income from	om this section:		\$	
Do you own a business or	tate?		No	
Do you receive income/m	is asset?	Yes	No	
If you own a business wha	at is the monthly gross inco	ome and expenses (prov	ide 4 months of c	lata) \$
Do you have any other so	arces of income? If so, ple	ease describe:		
TOTAL HOUSEHOLD (Combination of Section				
7. GENERAL				

If yes, please attach information regarding all real estate owned by and if applicable, any of the persons who shall occupy the unit. Applicants owning real estate must provide documentation of a market value appraisal and outstanding mortgage debt. The difference will be treated as monetary value of the asset and the imputed interest will be added to the income. In addition to the appraisal, please provide copies of: the deed, most recent tax bill and latest mortgage statement. Will you be selling the home or renting it out? More documentation will be required, see item # 6 on the application checklist for details.

Do you own a home or other real estate?

03/04/2024



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1		Completed a	pplication			<u>Sign</u>	ed by eve	ryone over 18	years old	
		Numbers 2	through 11: P	rovide all req	uired do	cuments	as applic	able for all ho	ousehold meml	bers
2		Students – p	roof is require	d if a househo	d membe	er is a full	time stud	ent over 18 yea	ars old.	
3								years (with all a		
									□ W-2's 1099 or	
		Federal:	2021	2020		2019			1098	
		State:	2021	2020		2019			2019 - 2021	
4							<u>ch</u> house	hold member o	ver 18 years old	d or
_		•		er with gross a						
5		Copies of <u>six</u>	<u>k (6) months</u> (of recent check	king and s	savings ac	ccount sta	itements (all pa	ages – all accou	ints)
6					-		•	licable sources	S:	
				t statements t				sion Company.		
		•	-					ial Security che	ecks/stubs	
						-		-	statements from	I
		Or copies o The payee Letter mus t	of 6 current of property of the state of the notarized.	payments in a amount paid,	form of ch how ofter	necks, stu n paymen	bs or rec t is made			
	_							·	f of last 6 paym	ents.
	L		ds and other F		•			tements includ	-	
		Any other so	urces of incon	ne must be do	cumented	, written p	proof is re	quired.		
7									tgage statemen	
8			=	ı will need a r	otarized	letter (pl	ease cont	act your local r	nunicipal offices	s for
	Г	a notary pub	•							
	-		t earn any inco ot file tax return		above no	oted pleas	se reques	t a from to be o	completed & not	arized
		If you do no	t own a bank o	checking accou	ınt, or sav	ings acco	ount		p.:0.000 000	
	_			divorce (addit				,		
									<i>onventional loai</i> nust have nam	
9		of all applic		.01 01410 1110 4		oy are in	9			
		Valid forms	of ID for ever	ry household	member	are requi	ired:			
		1. Soci	al Security car	rd		•				
10				rtificate or Alie ilitary ID or Sta				able		