To apply online, please visit: www.pchhomes.org Updated: Oct2023



Affordable Housing in Princeton

Princeton Community Housing (PCH)



Affordable Rental Housing Preliminary Application

(Moderate, Low and Very Low Income)

Dear Applicant,

Thank you for your interest in Princeton Community Housing (PCH) affordable rental apartments in Princeton. Your first step toward renting an affordable unit is to complete and submit this Preliminary Application.

Your completed application will be automatically forwarded to each PCH rental office to which you choose to apply. You will be notified as to the status of your preliminary eligibility based on the information that you provide in this application. Some waiting lists will be longer than others as waiting time varies by site and unit types. Please note that the head of household must be age 18 or older.

When an affordable 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.

Please note that social security cards may be required for all members of the household but are not neccessary to join a wait list. Credit and criminal background checks—are a mandatory requirement before being offered an apartment. We strongly recommend that applicants check their credit report and address/resolve any issues—identified to ensure eligibility at the time of interview. If your mailing address, income, family size, and/or phone numbers change, it is your responsibility to contact the rental offices and provide them with the updated information. Contact the rental offices for more information.

ANNUAL UPDATE: In the Spring of every year, applicants on the waitlist will receive a letter to confirm that they are still interested and would like to stay on the waiting list. *Please be sure to respond to keep your place on the waiting list. Applicants who do not respond to this letter will be removed and will need to reapply.

Princeton Community Housing (PCH)

Phone: (609) 924-3822, x1 Address: 1 Monument Drive, Lower Level

Info@pchhomes.org

Please call or email to obtain a PCH paper application.

Please call or email to obtain	та РСН рарег аррисацоп.
Princeton Community Village	<u>Griggs Farm</u>
Phone: (609) 921-1686, x1 Address: 1 Holly House Office	Phone: (609) 924-3824, x1 Address: 1 Monument Drive
Elm Court (Senior Housing)	<u> Harriet Bryan House (Senior Housing)</u>
Phone: (609) 921-0929 Address: 300 Elm Road	Phone: (609) 683-8858 Address: 310 Elm Road

Princeton Rentals and Merwick Stanworth

<u>PCHDC is Administrative Agent Phone:</u> (609) 924-3822, x1 PCHDC Address: 1 Monument Drive, Lower level Updated: Oct2023



PCH Affordable Rental Housing Preliminary Application

a. Head of H	ousehold Information:	OFFICE USE ONLY (date stamp):
Last Name: _		Home Phone:
First Name: _		Cell Phone:
Home Addre	SS:	Email*:
City:		
State:	Zip:	add <u>noreply@realpage.com</u> to your email contacts to ensure you receive our email notifications of vacant units and annual updates.
Please see	PCH Affordable Housing	g Fact Sheet for more information.
	To apply online, please visit: w	ww.pchhomes.org
PAPER AI	PPLICATIONS ONLY - Please ch	eck which units you wish to apply for. You may apply to more than one
Senior	Apartments: Studio and 1-bedro	oom
(+Ser	nior applicants must be Age 62 or ol Applications submitted for senio	lder AT THE TIME OF APPLICATION. or households who are not yet 62 years old will not be accepted.)
	Elm Court – 300 Elm Road, Age	e 62+ and mobility impaired persons of all ages (very low income)
	<u>Harriet Bryan House</u> – 310 Elm	n Road, Age 62+ (very low income)
Single	and Family Apartments: 1-, 2-, 3	- and 4-bedroom
	Princeton Community Village	– off Bunn Drive, (very low-, low- and moderate- income)
	<u>Princeton Rentals</u> - Located th	roughout Princeton (very low-, low- and moderate-income)
	<u>Griggs Farm</u> - off Cherry Valley	y Road (low-income townhouse rental apartments)
	Merwick Stanworth - 122 Sta	nworth Lane (very low-, low- and moderate-income)

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Policies and Requirements

For All Applicants

- This is an equal housing opportunity. Federal law prohibits discrimination against any person making application to rent a home with regard to age, race, religion, national origin, sex, handicapped or familial status. State law prohibits discrimination on the basis of race, creed, color, national origin, ancestry, nationality, marital or domestic partnership or civil union status, familial status, sex, gender identity or expression, affectional or sexual orientation, disability, source of lawful income or source of lawful rent payment.
- This affordable 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 each rental office 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, regular contributions or gifts received from organizations or from persons not residing in the dwelling, business income, and actual or imputed earnings from assets (which include bank ac- counts, certificates of deposit, stocks, bonds, or other securities), and real estate.
- If you own a home or other real estate, you need to report this to the rental office. The value of your real estate will be subject to a maximum appraised value limit, which, when exceeded, may disqualify you from the rental program.
- ♦ 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.

B. Household Composition (documents may be required):

Full Name (First, Middle & Last) List everyone who will occupy the unit	Relation To	Date of Birth	Social Security or TIN number	Sex	Disabled?
#1	Head of Household				
#2					
#3					
#4					
#5					
#6					
#7					
#8					
Do you <u>LIVE</u> in one of these NJ Counties?	Mercer	Monmouth	Ocean	No	
Do you WORK in one of these NJ Counties?	Mercer	Monmouth	Ocean	No	

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Gross Annual Income (meaning before taxes or other deductions) for all household members: includes payment from employers, business income from self-employment, social security, disability, unemployment, child support, alimony, pensions, welfare, and regular contributions or gifts received from organizations or from persons not residing in the dwelling:

Household Member Name	Employer/Source of Income	How Long? (years/months)	Gross Annual Income
#1			
#2			
#3			\$
#4			\$
#5			\$
#6			\$
Total Household Annual Gross Incon	ne (Before taxes and deductions):	<u> </u>	

D. 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):

Type of Asset	Current Market Value of Asset	Estimated Annual Income	Interest Rate
	\$	\$	%
	\$	\$	%
	\$	\$	%
	\$	\$	%

E. Additional Information:
1. Do you own your home? Yes \square No \square
2. Do you rent? Yes \square No \square If renting, give name, address, phone number and email of Landlord:
3. Do you have a Section 8 Voucher or rental assistance? Yes \(\sqrt{\text{No}} \sqrt{\text{If yes, explain}} \)
4. Do you have another source of subsidy? Yes \square No \square If yes, explain
5. Have you been evicted in the last 7 years? Yes \(\square \) No \(\square \) When/ Where?
6. Do you own a pet? Yes ☐ No ☐
7. Do you own a service animal? Yes \square No \square
8. Is any member of your household an active U.S. military or a U.S. military veteran? Yes \Box No \Box
9. Current monthly rent \$ Does rent include utilities? Yes \Boxed No \Boxed
10. Do you or anyone in your household have special needs as defined by Section 223 of Social Security Act?
Yes \square No \square If yes, please describe:
11. Have you or anyone in the household been the victim of domestic violence, dating violence or stalking?
Vec*** No ***If Vec: Please contact property management office for Violence Against Women Act Policy



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DRIVER'S LICENSE #1	State	Head of Household			
DRIVER'S LICENSE #2	State	Other Adult (over 18)			
DRIVER'S LICENSE #3	State	Other Adult (over 18)			
Emergency Contact (Required)					
Last Name:	F	irst Name:			
Street Address:	P	Phone:			
City:	S	hone: Zip:			
F. Was this application completed by someone other than If yes, please list the name of the person who complete					
belief are true, correct, and complete. I have no object Furthermore, I give permission for the Landlord to understand that providing false statements or incompl 18, Section 1001 of the U.S. Code, states that a personal state of the U.S. Code, states the U.S. Code, s	ion to inquiries being r perform a credit, land lete information may r on is guilty of a felony	examined by me and to the best of my knowledge and nade for the purpose of verifying the facts herein stated. Blord, and criminal check as part of this application. I esult in punishment under Federal law. WARNING: Title of for knowingly and willingly making false or fraudulent busing and Urban Development and is punishable under			
as defined in the Fair Credit Reporting Act, 15 U.S.C. S such information may include, but is not limited to, of employment/salary details, vehicle records, licensing Landlord, and any procurer or furnisher of information information, and understand that my application information.	Sec. 1681a(d), for the peredit history, civil and records, and/or any conference with the providing	dit report, and any other information it deems necessary ourpose of evaluating my application. I understand that I criminal information, records of arrest, rental history, other necessary information. I hereby expressly release atsoever in the use, procurement, or furnishing of such ded to various local, state, and/or federal government ssion and, if admitted, will be grounds for eviction. I ication to be deemed complete. If there are blanks, the t a section does not apply to me, I will mark it N/A.			
I understand that the filing of this application does not	, in any way, bind the L	andlord to reserve or assign an apartment to me.			
Signature of Applicant:		Date:			
OPTIONAL: Please check which of the following b (for NJ Division of Civil Rights and (A) American Indian/Alaskan Native	HUD statistical purpo Asian				
☐ Native Hawaiian/Other Pacific Islander	☐ White	☐ Other			
(B) Hispanic or Latino	☐ Non-Hispanio	c or Latino			
Attachments to the application – printed copies ma - Attachment #1 – NJ FCHA Disclosure Statemen - Attachment #2 – Supplemental Form 92006 – Optional Contact Person (name, address, phor	nt Optional Contact Perso	on			



NEW JERSEY'S FAIR CHANCE IN HOUSING ACT Disclosure Statement

New Jersey's Fair Chance in Housing Act, N.J.S.A. 46:8-52 to 64 (FCHA), limits a housing provider's ability to consider a person's criminal history in deciding whether to extend an offer or whether to rent a home after extending an offer.

Before making a conditional offer of housing, property management may consider only whether an applicant has a conviction for the manufacture or production of methamphetamine on the premises of federally assisted housing, or whether an applicant has a lifetime registration requirement under a State sex offender registration program. property management will not consider, or request from an applicant or any other person or entity, any other information about an applicant's criminal history as part of the application process until and unless a conditional offer of housing has been made.

After extending a conditional offer of housing, property management intends to review and consider an applicant's criminal record in determining whether to rent a home, in accordance with the FCHA and its accompanying rules.

Property management will not, either before or after the issuance of a conditional offer, evaluate or consider any of the following criminal records:

- (1) arrests or charges that have not resulted in a criminal conviction;
- (2) expunged convictions;
- (3) convictions erased through executive pardon;
- (4) vacated and otherwise legally nullified convictions;
- (5) juvenile adjudications of delinquency; and
- (6) records that have been sealed.

Property management may consider, after the issuance of a conditional offer, a criminal record that:

- Resulted in a conviction for murder, aggravated sexual assault, kidnapping, arson, human trafficking, sexual assault, endangering the welfare of a child in violation of N.J.S.2C:24-4(b)(3);
- Resulted in a conviction for any crime that requires lifetime state sex offender registration;
- Is for any 1st degree indictable offense, or release from prison for that offense, within the past 6 years;
- Is for any 2nd or 3rd degree indictable offense, or release from prison for that offense, within the past 4 years; or
- Is for any 4th degree indictable offense, or release from prison for that offense, within the past 1 year.

For more information about how these rules apply, please refer to the resources at https://www.njoag.gov/about/divisions-and-offices/division-on-civil-rights-home/fcha/.

Property management may withdraw a conditional offer based on your criminal record only if property management determines, by a preponderance of the evidence, that the withdrawal is necessary to fulfill a substantial, legitimate, and nondiscriminatory interest.

If property management utilizes any vendor or outside person/entity to conduct a criminal record check on their behalf, property management will take reasonable steps to ensure that the vendor or outside person/entity conducts the criminal record check consistent with the requirements of the FCHA and rules. Specifically, if property management receives a criminal history inquiry conducted by a vendor or outside person or entity that is conducted in violation of the FCHA in that it reveals a record that is not permitted to be considered under the FCHA, property management must show that it did not rely on that information in making a determination about your tenancy.

If you are subjected to the withdrawal of a conditional offer of housing due to criminal history, you have the right to request and receive the materials relied upon by property management in making this determination.

You have the right to dispute, within ten (10) days of receiving this statement, the relevance and accuracy of any criminal record, and to offer evidence of any mitigating facts or circumstances, including but not limited to your rehabilitation and good conduct since the criminal offense. You may also provide evidence demonstrating inaccuracies within aspects of your criminal record which may be considered under the FCHA, or evidence of rehabilitation or other mitigating factors to property management at any time, including after the ten days.

Any action taken by property management in violation of the process laid out in this statement may constitute a violation of the FCHA. If you believe that any owner, agent, employee, or designee of property has violated any of the above requirements, you may contact the New Jersey Division on Civil Rights at www.NJCivilRights.gov 1-866-405-3050). A complaint must be filed with DCR within 180 days of the allegedly discriminatory conduct. You cannot be subjected to retaliation for filing a complaint or for attempting to exercise your rights under the FCHA.

DCR has several fair housing fact sheets available at https://www.nj.gov/oag/dcr/housing.html, or available for pickup in any of DCR's four (4) regional offices.

- 31 Clinton Street, 3rd Floor, Newark, NJ 07102
- 5 Executive Campus, Suite 107, Bldg. 5, Cherry Hill, NJ 08002
- 1601 Atlantic Avenue, 6th Fl., Atlantic City, NJ 08401
- 140 East Front Street, 6th Floor, Trenton, NJ 08625

FOR INFORMATION QUIPPlemental and Optional Contact Information for HUD-Assisted Housing Applicants

NOTIFY THE OFFICE IF YOU HAVE AN OPTIONAL CONTACT PERSON OR ORGANIZATION SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING

This form is to be provided to each applicant for federally assisted housing

Instructions: Optional Contact Person or Organization: You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

Applicant Name:			
Mailing Address:			
Telephone No:	Cell Phone No:		
Name of Additional Contact Person or Organization:			
Address:			
Telephone No:	Cell Phone No:		
E-Mail Address (if applicable):			
Relationship to Applicant:			
Reason for Contact: (Check all that apply) Emergency Unable to contact you Termination of rental assistance Eviction from unit Late payment of rent	Assist with Recertification P Change in lease terms Change in house rules Other:	rocess	
Commitment of Housing Authority or Owner: If you are apprarise during your tenancy or if you require any services or special issues or in providing any services or special care to you.			
Confidentiality Statement: The information provided on this for applicant or applicable law.	rm is confidential and will not be discl	osed to anyone except as permitted by the	
Legal Notification: Section 644 of the Housing and Community requires each applicant for federally assisted housing to be offere organization. By accepting the applicant's application, the housin requirements of 24 CFR section 5.105, including the prohibitions programs on the basis of race, color, religion, national origin, sex age discrimination under the Age Discrimination Act of 1975.	d the option of providing information ng provider agrees to comply with the s on discrimination in admission to or	regarding an additional contact person or non-discrimination and equal opportunity participation in federally assisted housing	
Check this box if you choose not to provide the contact	information.		
Signature of Applicant		Date	

The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in HUD's assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.