

**Readington Township Affordable Housing
Market to Affordable Preliminary Application**

A. Head of Household Information

Last Name : _____	Soc. Sec. No. _____
First Name: _____	Home Phone: _____
Home Address: _____	Cell Phone: _____
City: _____	E-mail: _____
State: _____ Zip: _____	Circle preferred method of contact
Mailing Address (if different):	

B. Household composition and income. List everyone who will live in the unit. List **CURRENT** amounts from **ALL** sources of income, including but not limited to Salary, Dividends, Social Security, Child Support, Mandatory retirement distributions, Alimony & Pensions.

Do not include income from assets listed in Section C.

Full Name (First Middle Last)	Relation To:	Marital status	Date of Birth	Sex	Gross YEARLY Income (Must be Current income)
#1	Head of Household				\$
#2					\$
#3					\$
#4					\$
#5					\$
#6					\$
#7					\$

The total number of members in this household is: _____

Does anyone in the applicant household pay child support or alimony to anyone outside of the household?

Yes _____ No _____ If yes, How much is paid annually? _____

Do you receive child support/alimony? Yes ___ No ___ How much \$ _____ Frequency _____

Note: amount of child support/alimony received must be included in Sect B (above).



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- C. **Assets: Bank Accounts: You must include all accounts you have:** checking, savings, CD's, stocks, bonds, mutual funds, money markets, retirement acct's., etc.

Your application will be considered incomplete if this section is left blank.

Type of Asset (checking, savings, CD, etc.)	Current Value of Asset	Estimated Annual Interest earned	Interest rate

D. Current Situation

Pets: Yes _____ No _____

Do you currently rent? Yes _____ no _____ Current monthly rent you pay? _____

Do you have a Section 8 Voucher: Yes _____ No _____

Do you currently own a home? Yes _____ No _____

Do you have a mortgage? Yes _____ No _____

How much do you have left to pay on your mortgage? \$ _____

What is the current market value of your home? \$ _____

Current Equity in your home? \$ _____ (Your equity equals the market value less any outstanding mortgage principal)

- E. **Number of bedrooms requested:** 1 2 3 (*minimum of one bedroom per person*)

F. Important MUST be signed by everyone 18 years of age and older

I (WE) hereby authorize the Readington Township Housing office, their agents and/or employees to obtain information regarding statements regarding the status of My (Our) credit and to check the accuracy of any and all information in this application. I (We) certify that all of the 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.

THIS APPLICATION IS VOID IF NOT SIGNED

Signed: _____ Date: _____

Signed: _____ Date: _____

3/2021