



PRELIMINARY APPLICATION FOR ADMISSION

Name (Head of Household): _____

Address: _____

Previous Address: _____

Phone No.: _____ Social Security No.: _____

Date of Birth: _____ Age: _____ Occupation: _____

E-Mail: _____ Application Date: _____

FAMILY COMPOSITION

Household Member: _____ Age: _____ Date of Birth: _____

Social Security No.: _____ Occupation: _____

PRESENT HOUSING INFORMATION

- | | | |
|--|-----|----|
| 1. Are you handicapped? | Yes | No |
| 2. Do you require any special accommodations? | Yes | No |
| 3. Is the Head of Household a Veteran? | Yes | No |
| 4. Have you established a bona fide residence in Secaucus? | Yes | No |
| 5. Do you own an automobile? | Yes | No |
| 6. Do you have any pets? | Yes | No |

If you have answered **yes** to any of the 6 questions, please give an explanation: _____

INCOME/EMPLOYMENT INFORMATION:

Please include all sources of Income, Social Security, Pensions, Annuities, etc.

Employer/Income Source: _____

Employment Address: _____

Employment Telephone No.: _____

Annual Gross Income: _____

Social Security: Monthly Gross Amount: _____ Yearly Gross Amount: _____

Monthly Gross Amount: _____ Yearly Gross Amount: _____

Pension: Monthly Gross Amount: _____ Yearly Gross Amount: _____

Annuities: Current Value: _____ Interest Rate: _____ Distribution Amount: _____

IRAs: Current Value: _____ Interest Rate: _____ Distribution Amount: _____

Other: Please explain _____

ASSETS:

Assets owned (include all Real Estate, Bank Accounts, Stocks, Bonds, Securities, Insurance Policies and any other Income generating assets.)

Real Estate: Current Assessed Value: _____ Equalized Ratio %: _____

Bank Accounts: Current Balance: _____ Interest Rate: _____

Stocks, Bonds, Securities, etc. Current Value: _____

Current Value: _____

Current Value: _____

Current Value: _____

LIABILITIES:

(Include all out-of-pocket health insurance.)

Medicare Amount: _____

Supplemental Insurance Amount: _____

Other Comments or Clarifications:

(Please include any additional information that you feel is relevant to this Application, or clarify any of the items contained in this Application. Use additional paper, if necessary.)

RACIAL AND ETHNIC INFORMATION:

The following information is requested, and not required, for statistical purposes in order that the Department of Housing and Urban Development may determine the degree to which its programs are being utilized by minority groups. You are required by law to provide this information.

- Caucasian
- American Indian
- Asian (Japanese, Korean, Chinese, Filipino)
- African American
- Spanish American
- Other

Authorization, Representations and Certifications

I do hereby authorize the Housing Authority of the Town of Secaucus 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.

WARNING: Title 18, Section 1001 of the U.S. Code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any Department or Agency of the U.S. or the Department of Housing and Urban Development.

NOTICE: Any attempt to obtain Public Housing, any rent subsidy or rent reduction by false information, impersonation, failure to disclose or other fraud, and any act of assistance to such attempt is a crime.

Applicant's Signature: _____

Date: _____

For Secaucus Housing Authority Use Only

Date/Time Received: _____

Priority Code: _____

Comments:

TO: Applicants for Low-Income Housing
 FROM: Secaucus Housing Authority
 RE: Application Instructions

The attached application kit includes all of the materials that are necessary to prepare an application for our low-income housing program. In order for us to place your name on our waiting list, it is necessary to fully complete the enclosed application form and **attach a copy of the following documents.**

Identification

- Birth Certificate, Certificate of Naturalization, Green Card
 Social Security Card
 Valid Driver's License

Proof of Income

- Most recent Social Security Award Letter
 Statements: Pensions, Annuities, 401(k), etc.
 Most recent Federal Tax Return
 Most recent bank statements: Checking, Savings, Certificate of Deposits, IRAs, and Keogh accounts
 Property (Home, Condo, Land) – Submit assessed value along with equalization ratio for property value from your local tax assessor
 Other sources of income not listed above

If you are claiming a Local Preference, please check the box(es) below that apply to your situation and provide the documentation listed next to each specific preference. (Preferences 1-2 cannot be combined, but Preferences 1 or 2 can be combined with 3 to obtain 2 Preference Points)

LOCAL PREFERENCES

1. **Residency Preference:** For families who live in the Town of Secaucus. In order to verify that an applicant is a resident, the HA will require a minimum of 3 of the following documents: rent receipt, lease, utility bills, employer or agency records, drivers licenses, credit card statements, statement from household with who the family is residing.
2. **Working preference:** This preference is available for families with at least one member who is employed in the Town of Secaucus. The HA will require the following documents: A statement from the employer and copies of recent paycheck stubs that indicate the location of the place of employment or third party verification that indicates the place of employment.
3. **Veterans' preference:** This preference is available to current members of the U.S. Military Armed Forces, veterans, or surviving spouses of veterans. The HA will require the veteran's DD-214 form indicating his/her minimum 1-year of service.

A completed application must be returned to the Housing Authority Office for processing. We are not responsible for applications that are delivered to any other office. If your application is deemed qualified, your name will be placed on our waiting list. You will receive a letter that indicates your position on the list and approximate time that you will have to wait before a unit may be offered to you. This letter will serve as a receipt that your name has been placed on the list. It is important that you retain this letter for future reference.

If you have any questions concerning the preparation of your application, please feel free to call our office.

Low Rent Application

Things You Should Know

Don't risk your chances for federally assisted housing by providing false, incomplete, or inaccurate information on your application and recertification forms.

Purpose This is to inform you that there is certain information you must provide when applying for assisted housing. There are penalties that apply if you knowingly omit information or give false information.

Penalties for Committing Fraud

The United States Department of Housing and Urban Development (HUD) places a high priority on preventing fraud. If your application or recertification forms contain false or incomplete information, you may be:

- Evicted from your apartment or house;
- Required to repay all overpaid rental assistance you received;
- Fined up to \$10,000.00
- Imprisoned for up to 5 years; and/or
- Prohibited from receiving future assistance.

Your state and local governments may have other laws and penalties as well.

Asking Questions

When you sit down with the person who fills out your application, you should know what is expected of you. If you do not understand something, say so. That person can answer your questions or find out what the answer is.

Completing the Application

When you give your answers to application questions, you must include the following information:

Income

- All sources of money you and any member of your family receive (wages, welfare, payments, alimony, social security, pension, etc.);
- Any money you receive on behalf of your children (child support, social security for children, etc.);
- Income from assets (interest from a savings account, credit union, or certificate of deposit; dividends from stocks, etc.);
- Earnings from second job or part-time job;
- Any anticipated income (such as a bonus or pay raise you expect to receive).

Assets

- All bank accounts, saving bonds, certificates of deposit, stocks, real estate, etc., that are owned by you and any adult member of your family/household who will be living with you.
- Any business or asset you sold in the last 2 years of less than its full value, such as your home to your children.

Family/Household Members

- The names of all the people (adults and children) who will actually be living with you, whether or not they are related to you.

Signing the Application

- Do not sign any forms unless you have read it, understand it, and are sure everything is complete and accurate.

- When you sign the application and certificate forms, you are claiming that they are complete to the best of your knowledge and belief. You are committing fraud if you sign a form knowing that it contains false or misleading information.
- Information you give on your application will be verified by your housing agency. In addition, HUD may do computer matches of the income you report with various Federal, State, or private agencies to verify that it is correct.

Recertifications

You must provide updated information at least once a year. Some programs require that you report any changes in income or family/household composition immediately. Be sure to ask when you must recertify. You must report on recertification forms:

- All income changes, such as pay increases or benefits, change of job, loss of job, loss of benefits, etc. For all adult family/household members.
- Any family/household member has moved in or out.
- All assets that you or your family/household members own and any asset that was sold in the last 2 years for less than full value.

SECAUCUS HOUSING AUTHORITY

700 COUNTY AVENUE

SECAUCUS, NEW JERSEY

Authorization to Release information

PLEASE READ ALL TERMS CAREFULLY AND SIGN BELOW:

Applicant's Name: _____

Applicant's Address: _____

Landlord's Name: _____

Landlord's Address: _____

Landlord's Telephone #: _____

Applicants Previous Address: _____

I hereby authorize the Housing Authority of the Town of Secaucus to obtain any and all information it deems necessary in the processing of my application for low-income housing. This authorization includes, but is not limited to credit reports, civil and criminal actions, rental history, employment/salary information, police and vehicle reports, and any other relevant information. I release all employees and its agents from all liability from any damage whatsoever incurred in furnishing or obtaining such information.

Applicant's signature

Date

Co-applicant's signature

Date



RENTAL HISTORY

The following person(s) has/have recently applied for residency in **the Secaucus Housing Authority**, and have indicated to us that they were tenants on your property located at _____

Applicant(s) _____

Signature(s) _____

We would appreciate your cooperation in providing the following information.

1. How long did the above named person(s) reside on your property? _____
2. Monthly rent? _____ Size _____
3. Was the resident(s) ever delinquent in their rent payment? _____
4. Did the resident(s) maintain the unit? i.e. Cleanliness? _____
5. Report maintenance needed _____
6. Did the Resident(s) disrupt the community? _____
7. Would you rent to this/these individual(s) in the future? _____
8. If not, why?

Signature of person(s) filling out this form _____

Title _____

Date _____

Thank you for your time and cooperation.

Disclosure Statement

You have made an application for housing in a property owned or managed by the Secaucus Housing Authority (“SHA”) This application is considered a “pre-application” at present. The SHA must wait until a unit is available to make a formal offer of a unit. You are currently on a waiting list for housing. The purpose of this disclosure is to advise you of the procedure that will follow at the time you name moves to the top of the waiting list.

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, the SHA 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. You may be asked to provide information about these charges, including producing documents related to the same. The SHA will not consider, or request from an applicant or any other person or entity, any other information about an applicant’s criminal history except for the two items listed above, as part of the application process until and unless a conditional offer of housing has been made.

After extending a conditional offer of housing, the SHA 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.

The SHA 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.

The SHA 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/>.

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

If the SHA utilizes any vendor or outside person/entity to conduct a criminal record check on their behalf, The SHA 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 the SHA 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, The SHA 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 The SHA 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 The SHA at any time, including after the ten days. You may be asked to submit additional documents during this review.

Any action taken by the SHA 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 The SHA 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

Housing Provider Signature

Date

Prospective Tenant Signature

Date