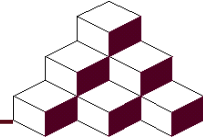


# Piazza & Associates, Inc.



201 Rockingham Row ♦ Princeton Forrestal Village ♦ Princeton, NJ 08540-5758

Dear Applicant,

PLEASE NOTE: The Borough of Morris Plains requires that we provide a preference to applicants who currently reside or work within Region 2, as set forth by the New Jersey Department of Community Affairs. That region consists of Essex, Morris, Union, and Warren Counties. Therefore, applicants who live or work in those counties will be processed prior to applicants who do not.

If you **do not** currently reside or work in Region 2, comprising Essex, Morris, Union, and Warren Counties, there is no need to submit your final application at this time. However, you must contact this office within 7 days of the date on this letter to be placed on the "Conditional Approval" list. If you fail to contact this office in this time frame, your application will be withdrawn, and no further action will be taken.

If you do currently reside or work within Region 2 and are interested in pursuing this affordable housing opportunity, please make sure to comply with the requirements as set forth in the enclosed Final Application. Please make sure to refer to the cover letter for time frames and contact information.

Thank you,

Piazza & Associates  
609-786-1100 Ext 300  
info@housingquest.com

NAME OF APPLICANT: \_\_\_\_\_

(THIS MUST MATCH THE HEAD OF HOUSEHOLD NAME IN THE EMAIL)

**AFFORDABLE HOUSING APPLICATION**

**Read this application carefully and return it with the required documentation. We reserve the right to disqualify applicants who do not submit ALL of the documentation requested in this application packet. Please complete, sign and return this application AND the required documentation to:**

**Piazza & Associates, Inc., 201 Rockingham Row, Princeton, NJ 08540.**



Federal law prohibits discrimination against any person making application to buy or 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 (including Section 8). All household members that intend to reside at the property must be listed on the application. No un-emancipated minor maybe a member of the household unless a parent or legal guardian is also a member of the household. The affordable housing must be the intended primary residence of the applicant. If changes in household composition occur during the application process, the applicant is required to notify Piazza & Associates, Inc. immediately. Applications may be withdrawn if the household composition or sources of income changes after the submission of this application. 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.

**Income Verification:** The affordable homes are provided as a service to low- and moderate- income households. Occupancy is regulated by certain municipal and state statutes that require us to verify the income of every applicant. Your cooperation is appreciated. Applications and supporting documentation are the property of the municipality and cannot be returned.

**Identification.** Please include a photocopy of identification for every person who will reside in the affordable home. Typically, a birth certificate, drivers license or passport will be sufficient. **Verification of Income.** Every applicant must submit a copy of each of the most recent three (3) years of signed state and federal tax returns (1040). Please include all accompanying documents such as W2 form(s), 1099's etc. If the applicant has not filed a return in any of the three (3) previous years, he / she must submit a verification of non-filing letter from the IRS. Every applicant must submit the six (6) most recent statements from every Checking account and three (3) statements from every other bank and financial account (including, Savings, CD's, Money Market Accounts, etc.) to which the applicant is a depositor or signatory. **All sources of income must be verified.** Acceptable forms of verification include... **Salary:** Four (4) most recent pay statements (stubs). **Social Security:** A letter from the Social Security Administration. **Public Assistance:** A letter from the appropriate agency which details the amount and frequency of the benefit. **Alimony and Child Support:** The separation or divorce agreement which details the amount and frequency of child support or alimony received by the applicant. **Pension Plan, IRA, Annuity** and/or other retirement account, plan or service under which the applicant receives an income or financial distribution: The most recent statement for each which clearly indicates the amount and frequency of the distribution. In lieu of a statement, a letter of verification from the appropriate authority will be considered. **Savings Bonds:** A copy of all bonds held by the applicant(s). **Stocks, Bonds, Treasury Bills and Notes or other financial instruments** which are owned in whole or in part by the applicant: The most recent statement which verifies the value of the assets and current dividends (if any). If these are not available, a notarized letter from a Certified Public Accountant or attorney who has access to these records will be considered. **Real Estate:** If the real estate is the current residence of the applicant, and if the applicant intends to sell the real estate, submit one of the following: a certified appraisal, a contract with a real estate broker which sets forth the price of the property, or a signed contract for the sale of the property. If there is a mortgage, a statement from the Mortgage Company or bank which clearly indicates the principal balance of the mortgage(s) must be submitted. If other real estate is owned, in whole or in part by the applicant, and that parcel or parcels of real estate generate(s) income, verification of income must be supplied. In addition, verification of mortgage payments, property taxes and insurance should be submitted. **Business Income:** Equals the sum of gross revenue less expenses (prior to taxes). **Important:** Answer all questions. Please answer "none" in the sections which ask for information about income that you do not have. Enter "n/a" if a question does not apply to you.

If you have any questions, or are in need of further information, please call us:  
(609) 786-1100 ext. 300, or contact us by e-mail at [Info@HousingQuest.com](mailto:Info@HousingQuest.com).

Application services provided by Piazza & Associates, Inc., an affordable housing services corporation. This is an Equal Housing Opportunity. All housing is subject to applicable affordable housing regulations and availability. The terms and conditions of this affordable housing opportunity are subject to change without notice. We cannot guarantee that an affordable home will be available to you. All homes meet certain criteria for "affordable housing," but the sales prices and rental rates are **not** adjusted to meet any specific household income or financial situation. Therefore, we cannot and do not represent that these homes will be affordable to any individual applicant.

**DO NOT FAX OR EMAIL YOUR FINAL APPLICATION!**  
**YOU MUST MAIL OR DROP IT OFF AT OUR OFFICE**

*Piazza & Associates, Inc., 201 Rockingham Row, Princeton, NJ 08540.*

**PLEASE CALL US IF YOU NEED CLARIFICATION OR FURTHER INSTRUCTIONS: (609) 786-1100.**ATTENTION: ALL SECTIONS OF THIS APPLICATION MUST BE COMPLETED AND SIGNED BY EVERYONE 18 YEARS OF AGE AND OLDER.  
FAILURE TO COMPLETE ALL SECTIONS MAY RESULT IN LOSING YOUR PRIORITY.**A. Head of Household Information** (Please verify the information below and make corrections if necessary.)

1. Last Name: _____	5. Soc. Sec. No: _____
2. First Name: _____	6. Home Phone: _____
3. Home Address: _____	7. Work Phone: _____
4. City/State/ Zip: _____	8. County: _____
	9. Email: _____

**B. Household Composition** (Every person who will occupy the affordable home must be listed.)

Name (First and Last)	Relation To	Date of Birth	Sex	Social Security Number
#1				
#2				
#3				
#4				
#5				
#6				

**C. Current Situation**

- |  |  |
|--|--|
| 1. Do you currently: ___ Rent ___ Own ___ Other                        | 5. What is your monthly rent or mortgage payment?                  |
| 2. Do you currently reside in an affordable home?<br>Yes ___ or No ___ | \$ _____   |
| 3. How long at the address above? _____ Years                          | 6. If you currently own your home, what is the value of this home? |
| 4. Previous address: _____   | \$ _____   |
| City: _____  | 7. What is the Principal Balance of your mortgage?                 |
| State: _____ Zip Code: _____   | \$ _____   |

**D. References**

**If you rent**, please check "Landlord" and list the name and address of your landlord below. **If you own** your home, please check "Mortgage Co." and list the name and address of the mortgage company and account number below.

- Name of \_\_\_ Landlord or \_\_\_ Mortgage Co.: \_\_\_\_\_
- Address: \_\_\_\_\_
- City, State and Zip Code: \_\_\_\_\_
- Telephone Number: \_\_\_\_\_
- Mortgage Account No.: \_\_\_\_\_

**If you own** your home, please attach documentation verifying the value of the home and mortgage principal amount.

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**E. Salary** (Please list GROSS salary for every person over 18 years of age who will reside at the affordable home.

Attach the 4 most recent pay statements (stubs) to this application. Please include overtime in calculation.)

Name (First and Last) Repeat Employee's Name if applicant has more than one employer. Use additional pages for additional jobs.	Occupation	Gross Salary per Pay Period	Pay Period (Bi-Weekly, Weekly, etc.)	Annual Gross Salary
Name of Employee:  Name of Employer: Date First Employed: Immediate Supervisor:  Address:  Telephone:		\$		\$
Name of Employee:  Name of Employer: Date First Employed: Immediate Supervisor:  Address:  Telephone:		\$		\$
Self-Employment (1099, Voucher, Misc.) :		\$ Annual Gross Salary	Expenses	\$ Annual Net Income
Name of Business:  Address:  Telephone:				

**F. Additional/Benefits Income:** Financial Support, Social Security, Pension, Disability, Welfare, Public Assist., IRA's, Annuities, Child Support, Alimony, Retirement, etc. (Include all sources which currently provide direct income. Provide documentation.)

Type of Income (From List Above)	Source (Specify name of Bank, Fund, Agency, etc.)	Client / Account Number	Gross Monthly Benefit	Gross Annual Benefit
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$

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**G. Assets: Financial Institutions** (Checking Account, Savings Accounts, Certificates of Deposit, Money Market Funds, Mutual Funds or other assets held by financial institutions. Provide documentation. Refer to Instructions.)

Type of Asset or Account	Financial Institution	Account Number	Current Market Value of Asset	Interest Rate	Annual Income
			\$	%	\$
			\$	%	\$
			\$	%	\$
			\$	%	\$
			\$	%	\$
			\$	%	\$
			\$	%	\$

**H. Assets: Directly Held** (Stocks, Bonds, Income-Producing Real Estate, Business or other directly held assets. Provide documentation. To determine the Annual Income from Real Estate or Business, refer to the Instructions.)

Type of Asset	Name of Asset	Number of Shares	Current Market Value	Annual Income
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$

**I. Marital Status:** \_\_\_ Married; \_\_\_ Single; \_\_\_ Divorced; \_\_\_ Widowed; \_\_\_ Legally Separated

**J. Additional Information** (Please include any information which will assist us in serving you such as special needs, accessibility requirements, etc.) \_\_\_\_\_

**Applicant's Certification and Authorization:** The undersigned hereby states that all the information provided in connection with this Affordable Housing Application is true and complete. I/We am/are aware that, if any statements made by me/us are willingly false, the application is null and void, and I/we may be subject to penalties imposed by law. Piazza & Associates, Inc. or its agents are hereby authorized to contact references to verify the information provided in these applications, and to make other inquiries regarding income, assets, credit status, employment, and residency history for the purpose of determining my/our eligibility for this affordable housing program. Further, I/we understand that there is no obligation at this time on my/our part to enter into a sales or rental agreement if the application is approved. **Void if not signed by all Applicants 18 years of age and over.**

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

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## APPLICANT QUESTIONNAIRE

This questionnaire must be filled out and signed by all applicants over the age of 17.

Applicant/Tenant Names: \_\_\_\_\_

**Applicant/Tenant: Please check "yes" or "no" for each line**

**Yes No Check "Yes" if the answer applies to one or more applicants.**

\_\_\_\_\_ I am entitled to file a tax return.....

To request tax transcripts call IRS- (800)-829-1040

\_\_\_\_\_ I am currently a student - (please circle below):.....

(a) Full Time (b) Part Time

\_\_\_\_\_ I am presently employed and receive wages/tips/commissions..

\_\_\_\_\_ I am presently employed at more than one job (NOT self employed)

\_\_\_\_\_ I am self employed.....

\_\_\_\_\_ I own a business.....

\_\_\_\_\_ I currently am on leave of absence from work.....

\_\_\_\_\_ I currently receive unemployment benefits.....

\_\_\_\_\_ I have a savings account (including cash app, etc.).....

\_\_\_\_\_ I have a checking account.....

\_\_\_\_\_ I have a money market account.....

\_\_\_\_\_ I own a certificate of deposit (CD).....

\_\_\_\_\_ I own stocks/bonds. (NOT held in a retirement plan).....

\_\_\_\_\_ I own real estate or I am in the process of selling real estate.....

\_\_\_\_\_ I have sold or gifted property or other assets in the past 2 years

\_\_\_\_\_ I have an IRA. (NOT yet receiving income).....

\_\_\_\_\_ I have a pension plan at work (NOT yet receiving income).....

\_\_\_\_\_ I receive Social Security Income.....

\_\_\_\_\_ I receive income from a pension/annuity/retirement fund.....

\_\_\_\_\_ I receive money periodically from my family, church, friends, etc.

\_\_\_\_\_ I am entitled to receive child support.....

\_\_\_\_\_ **I am currently paying child support.**.....

\_\_\_\_\_ I am entitled to receive alimony.....

\_\_\_\_\_ **I am currently paying alimony.**.....

\_\_\_\_\_ I receive AFDC/TANF.....

\_\_\_\_\_ I receive assistance from a Public Housing Authority.....

\_\_\_\_\_ I receive Supplemental Social Security (SSI).....

\_\_\_\_\_ I receive Workman's Compensation.....

\_\_\_\_\_ I have a Trust Fund.....

\_\_\_\_\_ **Valid form of ID for every household member is required!**

Signature

Date:

Signature

Date:

Signature

Date:

Signature

Date:

**&**

## DOCUMENT CHECKLIST

Rev. 11/24/06

### IMPORTANT

**If you answer yes, you must submit a COPY of all of the required documents!**

(√) **Place check mark if enclosed!**

\_\_\_\_\_ 3 most recent federal & state tax returns

\_\_\_\_\_ ... with all attachments (w-2 forms, etc.)

\_\_\_\_\_ Current transcript or letter from school

\_\_\_\_\_ 4 most recent pay statements...

...for every job held by everyone over 17.

\_\_\_\_\_ Schedule "C" and tax returns

\_\_\_\_\_ Current Profit and Loss statements

\_\_\_\_\_ Letter from employer to verify status

\_\_\_\_\_ 6 most recent statements from agency

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ 6 most recent statements from each acct

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ Market value and mortgage statements

\_\_\_\_\_ What was sold, the value and sale price

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ Most recent benefit letter from SS Admin

\_\_\_\_\_ 3 most recent statements from each acct

\_\_\_\_\_ Letter detailing the amount & frequency

\_\_\_\_\_ 3 most recent statements from source

\_\_\_\_\_ Proof of last 6 payments

\_\_\_\_\_ 3 most recent statements from source

\_\_\_\_\_ Proof of last 6 payments

\_\_\_\_\_ Most recent benefits letter

\_\_\_\_\_ Most recent benefits letter

\_\_\_\_\_ Most recent benefits letter

\_\_\_\_\_ 3 most recent statements from source

\_\_\_\_\_ 3 most recent statements from source

\_\_\_\_\_ birth cert., driver's license or passport