

**INFORMATION ON AFFORDABLE RENTAL UNITS
IN THE TOWNSHIP OF WARREN, SOMERSET COUNTY
WHISPERING HILLS
Primrose Way, Warren, NJ 07059**

Sixty (60) low and moderate-income apartments are located in the Township of Warren in the Whispering Hills Development. The units are being rented under the NJ Low and Moderate Income Affordable Housing Program. Households cannot be larger than a two-person household for the **one-bedroom** units, a four-person household for the **two-bedroom** units and a minimum of two-person or a maximum of six-person household for the **three-bedroom** units. The breakdown of bedroom size and categories for the affordable units are as follows:

Rental rates based on the Affordable Housing guidelines and regulations and are approximate

| Bedroom Size | Square Feet | # of Low Income Units | # of Moderate Income Units |
|---------------------|--------------------|--|---|
| 1 Bedroom | 616 | 9 units \$1,056 - \$1,174/mo. +utilities | 1 unit \$1,308/mo. +utilities |
| 2 Bedroom | 787 | 16 units \$1,226 - \$1,370/mo. + utilities | 24 units \$1,324 - \$1,596/mo. +utilities |
| 3 Bedroom | 982 | 5 units \$1,394 - \$1,563/mo. +utilities | 5 units \$1,720 - \$1,928/mo. +utilities |

FEATURES

- No maintenance fee – snow removal and garbage removal via dumpster is provided
- No utilities are included. Residents are billed separately for water, sewer, gas and electricity. Sewer fee is \$45.00/month. Utilities cost approximately \$200.00 per month.
- Electric stove and oven
- Refrigerator and Dishwasher
- Washer and electric dryer hookups
- Cable ready
- Central air conditioning with individual thermostats
- Gas heat
- Phone jacks in kitchen, living room and all bedrooms
- Eat in kitchen
- 1 and 2 bedroom units have 1 full bathroom, 3 bedroom units have 2 full bathrooms
- Walk in closet in master bedroom, standard closets in other bedrooms, each unit also has a coat closet
- All units have outdoor patios or decks
- Wall-to-wall carpeting
- Up to 2 spots for parking are provided in a lot (with security lighting) on a first come, first serve basis
- Pets are not permitted
- No basements or attics

REQUIREMENTS

- Units are restricted to **two persons per bedroom** and your household must be income certified/qualified under the NJ Low/Moderate Income Housing Guidelines
- **Lotteries** may be held when necessary. Otherwise affordable units are first come first serve. Priority will be given to residents who live or work in Region 3 (Somerset, Middlesex and Hunterdon Counties).
- This affordable rental complex has a **credit/criminal background policy** that applicants must pass before the household can occupy a unit and should be reviewed prior to applying to make sure you meet the criteria. See credit/co-signor requirements on other side of this page for more details. The credit/background is done with the landlord after CJHRC has processed and approved your application/documentation.

CJHRC has made every effort to provide you with the most current and accurate information.
CJHRC cannot be held responsible for inaccurate, misinterpreted or outdated information contained herein

FOR APPLICATIONS AND DETAILS OF THE PROCESS CONTACT:

- Central Jersey Housing Resource Center (CJHRC) (Hours Monday-Friday 9-5)
92 E. Main St. Suite 407, Somerville, NJ 08876 – Phone: (908) 446-0036
- Whispering Hills, Rental Office (by appointment Mon.–Friday 8:30 am–3:00 pm)
775 Mountain Blvd. Suite 7, Watchung, NJ 07069 – Phone: (908) 668-0284

CREDIT/CO-SIGNOR/OTHER REQUIREMENTS
WARREN TOWNSHIP - SOMERSET COUNTY
WHISPERING HILLS

Contact: Whispering Hills Rental Office, at Chasbob@verizon.net or (908) 668-0284

Credit/Co-signor:

Approved co-signor/s will be accepted when an applicant/s income is too low or poor credit on a case by case basis.

Rental History:

For exact details contact- Whispering Hills Rental Office, at Chasbob@verizon.net or (908) 668-0284

Criminal Background History:

Effective 1/1/22 the Fair Chance in Housing Act was put in effect. This means with limited exceptions, housing providers/landlords who have not made a conditional offer cannot make applicants fill out any type of form that includes questions about their criminal background. Only after approving an applicant and making a conditional offer can a housing provider/landlord ask about criminal history or do a background check. In most cases, you cannot be denied simply for having a criminal record. However, the unit can be rescinded based on the applicant's criminal history in certain circumstances. In those cases, a written notice explaining the decision and reasons must be provided. Applicants then should have a chance to dispute the issue(s) in case of errors or other mitigating factors.

Cost of Credit Check/Background/Landlord:

A charge of \$35.00 is required for each applicant over the age of 18 (this includes the co-signor). There will be a separate landlord application fee of \$25.00. For exact details contact- Whispering Hills Rental Office, at Chasbob@verizon.net or (908) 668-0284

These guidelines represent the requirements of the Management of this individual rental property. Although every effort has been made to provide you with the most accurate, current and clear information possible, The Central Jersey Housing Resource Center (CJHRC) cannot be responsible for inaccurate, misinterpreted or outdated information contained herein.

Whispering Hills Rental Office, 775 Mountain Blvd, Suite 7, Watchung, NJ 07069 (908) 668-0284

Business hours of 9:00 AM to 3:00 PM Monday- Friday, call to schedule an appointment.

Directions to Central Jersey Housing Resource Center (CJHRC) office

CJHRC is conveniently located in downtown Somerville: **92 E. Main St. (Rt. 28) Suite 407 (4th Floor)**

Call **908-446-0036**. Business hours are 9:00 AM to 5:00 PM.

FROM THE NORTH: Take Route 287 South to Exit 17. Landmark: Pass Bridgewater Commons Mall on left; stay to right. Turn right onto Route 22 East. Immediately after the 2nd overpass, turn right onto Grove Street (just past Kentucky Fried Chicken). Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE SOUTH (Via Route 287): Take Route 287 North to Route 22 West. Landmarks: Pass Bank of America on the right. Immediately after the 1st overpass, turn right (see sign for Somerville). Bear right, go up over the overpass; this leads to Grove Street. Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE SOUTH (Via Route 206): Take Route 206 North. Landmark: On Route 206 North approaching Somerville, look for a low stone wall on left (Duke Gardens). Shortly past this wall, turn right onto Bridge Street (Somerville). At 2nd traffic light, turn right onto East Main Street. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE EAST: Take Route 22 West. Go under Route 287 overpass in Bridgewater. Landmarks: Pass Bank of America on the right. Immediately after the next overpass, turn right (see sign for Somerville). Bear right, go up over the overpass; this leads to Grove Street. Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

FROM THE WEST: Take Route 22 East into Somerville Landmark: Pass Ethicon Inc. on left. Immediately after the 2nd overpass, turn right onto Grove Street (just past Kentucky Fried Chicken). Go straight until East Main St. and make a left. Entrance to parking deck is on the right side. Park in the deck and enter to the building. Use elevator to 4th Floor. Our office is on the right.

APPLICATION FOR INCOME CERTIFICATION TO RENT AN AFFORDABLE UNIT AT WHISPERING HILLS APARTMENTS

COMPLETE THIS APPLICATION AND RETURN WITH ALL THE REQUIRED DOCUMENTS TO
(see Application Checklist handout or page 6 of this document)

Whispering Hills Rental Office, 775 Mountain Boulevard, Suite 7, Watchung, NJ 07069 (908) 668-0284
-All items submitted are kept confidential and will NOT BE RETURNED -

NOTICE OF DISCLOSURE STATEMENT

AFFORDABLE RENTAL UNITS AT WHISPERING HILLS - WARREN TOWNSHIP, NJ

1. Renters of Warren Township Affordable Housing units must be Low and Moderate Income Households as determined by the NJ Affordable Housing guidelines. Proof of monthly income, so that gross annual household income can be calculated, is required to assure an applicant household is qualified. Households must also demonstrate that their income is adequate to be able to afford and maintain the unit.
2. Affordable units must be occupied by the named applicants. Each renter/tenant shall certify in writing that he/she is renting the affordable unit for the express purpose of being your primary residence and for no other reason beyond what is allowable.
3. Renters of affordable units have the same rights, privileges, duties and obligations as any other renters in Warren Township with the exception of the restrictions in the Township of Warren’s Ordinances and Regulations pertaining to Low and Moderate Income Housing. Selection of participants in the Warren Township Affordable Housing Program is made on the basis of income, household size and available units.

PLEASE NOTE: WHISPERING HILLS will allow a co-signer on a case by case basis.

If you would like more information regarding rental units in Warren Township, please contact the Whispering Hills Rental Office at Chasbob@verizon.net or (908) 668-0284.

YOUR GROSS ANNUAL HOUSEHOLD INCOME NEEDS TO BE AT/OR UNDER THE FOLLOWING INCOME LIMITS

| HOUSEHOLD SIZE | LOW INCOME* | MODERATE INCOME* |
|----------------|-------------|------------------|
| 1 | \$50,015 | \$80,024 |
| 2 | \$57,160 | \$91,456 |
| 3 | \$64,305 | \$102,888 |
| 4 | \$71,450 | \$114,320 |
| 5 | \$77,166 | \$123,466 |
| 6 | \$82,882 | \$132,611 |

*Maximum income limits per Household size and category. These limits were adopted 5/26/23

I/we have read the contents of this Notice of Disclosure Statement and I understand it. I/we know that I have an obligation to notify the Central Jersey Housing Resource Center (CJHRC) immediately (in writing) of any change in my household or household income. I know I, as well as any other member of my household who filed tax returns, must supply copies of my/our Federal and State Income Tax Returns for the last three years as well as any other required documentation. I/we know that all information must be completed on all pages of this application or “not applicable” will be written if it does not apply to my household. Failure to fully complete this application and submit the required documentation will result in the inability for it to be processed thus jeopardizing your household being offered an affordable apartment. I/we realize CJHRC may ask for additional information, if necessary. By signing this form, I/we give CJHRC the authority to verify all information contained in my application. **(All adults who will be on the lease must sign this page).**

SIGNATURE OF APPLICANT

SIGNATURE OF CO-APPLICANT

Date signed

Date signed

**NOTICE OF DISCLOSURE STATEMENT FOR AFFORDABLE RENTAL UNITS
AT WHISPERING HILLS APARTMENTS WARREN TOWNSHIP, NJ – Continued**

This application is not transferable and the original document must be submitted. Please call the Central Jersey Housing Resource Center (CJHRC) at (908) 446-0036 if you have any questions about this application. If your application is complete and you are qualified to rent an affordable unit, you will be contacted by CJRHC. **It is your responsibility to make sure the information provided is true and accurate.**

The information in this application and any other information required by the Township of Warren will be kept confidential. No part of this application or your application file will be given to any person, entity or business not related to the township of warren, or their agents, without your written request or consent.

“Household” includes all persons living in a single household unit whether or not they are related by blood, marriage or otherwise. **The information requested includes information about all persons intending to reside in the Unit.**

ONLY those households who have been certified by CJHRC and pass the credit check/landlord criteria will be able to rent an affordable unit.

The Disclosure Statement is a part of this application. Please read the Statement for important information. You may wish to consult with an attorney of your choice with respect to the Disclosure Statement, the Affordable Housing Plan or the Application for Certification.

Your income certification to rent an affordable unit in Warren Township, Hunterdon County in WHISPERING HILLS Apartment Complex qualifies you for an affordable unit that may become available for rent in your specific category. Your category is determined by your income and household size. Your certification letter may provide information on units available at time of certification. If no available units are available in your category at the time your household is certified, then your household will be placed on a waiting list.

Priority selection for the affordable rental units may need to be made through a random selection process (lottery for units). A random selection is held whenever there are more eligible households than units available. Only valid and income certified households that complete and pass the landlord credit and other requirements will be included in the random selection process.

REGIONAL PREFERENCE: Those households that live or work in the West Central Housing Region, Group 3 (Hunterdon, Somerset, and Middlesex counties) may receive a preference for the affordable housing units in Warren Township. You must document proof of residence or employment in this region. Please provide a copy of some form of valid government issued identification (driver’s license, municipal ID card, pay stubs, etc.) of where you live and work.

(Please complete each line below. If it does not apply to you, write in “not applicable or n/a”)

1. HOUSEHOLD COMPOSITION:

Name of Household Member filling out this form: _____ Sex: M/F

Marital Status (please circle): **Married** **Single** **Divorced** **Widowed** **Legally Separated**

Date of Birth: _____ Last 4 digits of Social Security Number: _____

Home Phone: () _____ Work Phone: () _____

Cell Phone () : _____ Email Address: _____

Current Address: Street: _____

City: _____ State: _____ Zip Code: _____ County: _____

How long at the address above? _____ Years _____ Months

Mailing Address (if different) : _____

(Please complete each line below. If it does not apply to you, write in "not applicable or n/a")

HOUSEHOLD COMPOSITION (continued):

Name of Second Adult in household: _____
 Date of Birth: _____ Last 4 digits of Social Security Number: _____
 Home Phone () _____ Work Phone () _____
 Cell Phone () _____ Email Address _____
 Current Address: Street: _____
 City: _____ State: _____ Zip Code: _____ County: _____
 How long at the address above? _____ Years _____ Months
 Mailing Address (if different) _____

Please list all household members, who plan to live in the affordable unit that you are apply for:

| Name | Relationship (husband, wife, son, daughter, etc.) | Date of Birth | Age |
|------|--|---------------|-----|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

2. CURRENT STATUS

Do you currently Rent? YES NO What is your monthly rental payment \$ _____

Do you currently own a home? YES NO What is your monthly mortgage payment \$ _____

If you currently own your home, what is the value of this home? _____

What is the Principal Balance of your Mortgage? _____ please attached additional required documentation for homeowners. (request Property Owner Required Document info sheet from CJHRC)

Other living arrangement- please explain _____

What was your previous address: _____ City _____ State _____ Zip _____

Have you ever owned a home? YES ___ NO ___ If you owned a home in the past but no longer do, please explain in detail on separate piece of paper.

How many people will live with you if you are offered a unit? _____ How many are under 18 years of age? _____

How many bedrooms will you need? 1 2 3 (please circle)

OTHER:

Other applicable information/comments or special details about your housing situation:

(Please complete each line below. If it does not apply to you, write in "not applicable or n/a")

3. EMPLOYMENT INFORMATION

Please provide information for each household member who receives income from present employment and is 18 years of age or over. (Also include any part-time employment) – Please attach another page if you need more room.

1. **Household Member Name** _____
 Employer Name _____
 Employer Address _____
 County: _____ How long at job? _____
 Immediate Supervisor _____ Phone Number _____
 What is Your Job Title? _____
2. **Household Member Name** _____
 Employer Name _____
 Employer Address _____
 County: _____ How long at job? _____
 Immediate Supervisor _____ Phone Number _____
 What is Your Job Title? _____
3. **Household Member Name** _____
 Employer Name _____
 Employer Address _____
 County: _____ How long at job? _____
 Immediate Supervisor _____ Phone Number _____
 What is Your Job Title? _____

4. INCOME SOURCES

Please state the amount of your current monthly projected gross income from each applicable source. Use additional pages if more than three adults have income. Please use a separate income information section for every household member who is 18 years of age or over and receives income of any kind.

| | <u>Adult #1</u> First Name _____ | <u>Adult #2</u> First Name _____ | <u>Adult #3</u> First Name _____ |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| Monthly Gross Salary or Wages | \$ _____ | \$ _____ | \$ _____ |
| Pension | \$ _____ | \$ _____ | \$ _____ |
| Social Security | \$ _____ | \$ _____ | \$ _____ |
| Unemployment Compensation | \$ _____ | \$ _____ | \$ _____ |
| Child Support received (add) | \$ _____ | \$ _____ | \$ _____ |
| Child Support paid (deduct) | \$ _____ | \$ _____ | \$ _____ |
| Alimony received (add) | \$ _____ | \$ _____ | \$ _____ |
| Alimony paid (deduct) | \$ _____ | \$ _____ | \$ _____ |
| Disability Income (adult/child) | \$ _____ | \$ _____ | \$ _____ |
| Welfare | \$ _____ | \$ _____ | \$ _____ |
| Tips/Commissions/Self Employment Income | \$ _____ | \$ _____ | \$ _____ |
| Rental Income | \$ _____ | \$ _____ | \$ _____ |
| Other _____ | \$ _____ | \$ _____ | \$ _____ |
| Sub-Totals | \$ _____ + | \$ _____ + | \$ _____ |

TOTAL OF ADULT MONTHLY INCOMES = \$ _____ x 12 = \$ _____ Annual Gross Income

(Please complete each line below. If it does not apply to you, write in “not applicable or n/a”)

5. FINANCIAL INFORMATION

Please list all **Checking and Savings accounts**, CD’s, Money Market Funds, and any other assets held by financial institutions below, whether or not you gain any interest from them, for all household members.

| Name of Financial Institution | Account Number Last 4 Digits c-checking s-savings | Current Balance/Value | Projected Annual Interest Income |
|-------------------------------|---|--------------------------|-------------------------------------|
| | C / S | | |
| | C / S | | |
| | C / S | | |
| | C / S | | |
| | C / S | | |

Total Projected Interest Income from this section: \$ _____

6. INCOME/ASSEST INFORMATION (ANY ADDITIONAL INCOME YOU RECEIVE ON REGULAR BASIS-MONTHLY/ANNUALLY)

Please list all **stocks, bonds, Mutual Funds, Annuities and all other sources of investment income proof needed**

| Name of Assets | Number of shares | Current Value | Projected Annual Income |
|----------------|------------------|---------------|----------------------------|
| | | | |
| | | | |
| | | | |

Total Projected Income from this section: \$ _____

Do you own a business or income producing real estate? Yes _____ No _____

Do you receive income/monies/rent receipts from this asset? Yes _____ No _____

If you own a business, you may wish to request the “Self Employed Info Sheet from CJHRC.

What is the monthly gross income and expenses (provide 2 quarters of a Profit & Loss statement dated and signed by a 3rd party) \$ _____

Do you have any other sources of income? If so, please describe: _____

7. FOR STATISTICAL PURPOSES: Please indicate your racial/ethnic group by circling what applies to your household:

- Ethnicity of household: Hispanic Not Hispanic
- American Indian/Alaskan Native Asian Black/African American
- Native Hawaiian or Other Pacific Islander White Choose not to Respond
- More than one Race

THE FOLLOWING DOCUMENTS ARE REQUIRED WITH THIS APPLICATION

Households cannot be certified if any of the below documents are missing and will delay the certification. Items cannot be emailed or faxed. CJHRC does not copy required information for clients. Each application submitted needs a set of documents.

IMPORTANT: Submit a complete set of the below required documents listed below for every household member who is 18 years of age or older or if a household member of any age receives income of any kind (survivor benefits etc.).

- 1. Copies of State and Federal tax returns for the previous 3 years** (do not send W-2’s) Call 1-800-908-9946 to get copies from IRS.
- 2. Copies of pay stubs (4 current and consecutive) or current letter from employer** (need proof of income all sources)
- 3. Copies of two months’ current bank statements (all pages)** from all accounts for all applicants/co-applicants. Must show full name(s), address and institution name. All pages must be submitted. Must have sufficient funds to cover first month rent and required security deposit at time of random selection/lottery or before landlord credit check.
- 4. Documentation to confirm income from any other applicable sources:** Pension (4 statements or written proof from pension company), Social Security – recent benefit letter, Unemployment (need to see how much is awarded each month as well as how much is left in unemployment benefit for that person,
- 5. Documentation to confirm the following possible sources of income:** Copies of Section 8 voucher, child support court documents, divorce decree or separation agreement and custody verification with signatures. All separated applicants must provide a settlement agreement, divorce decree or division of assets signed and notarized by both parties. If you get child support, we need documentation/ proof of payments to count it as income. If you pay child support, we need documentation/ proof of payments to deduct it from your gross income if you choose this option.
- 6. Documentation to confirm interest income/proof of assets** – recent statements including IRA, savings bonds and other retirement accounts including 401K’s
- 7.** Any other source of income must be documented. Written proof is required.
- 8. Circumstances when you need a notarized letter:** If you do not earn an income, did not file tax returns for one of the most recent 3 years, do not own a checking or savings account, if you are a full time student (over 18 years of age) we need proof (something from school) of enrollment and at least 15 credits are being taken in school.
- 8. Circumstances when you need additional documentation:** If you own property or are self-employed (CJHRC Staff can provide handout of what is required for this documentation needed)

CERTIFICATION

I/we hereby certify that the above information concerning my household size, actual gross income as well as all other information contained herein is true and accurate to the best of my knowledge. I understand that CJHRC and the Township of Warren are relying on this information to determine whether I qualify for an affordable housing unit.

I/we further certify that the copies of the documents attached to this application are true and accurate copies of the originals of such documents. Notarized letters need to be submitted as originals. I understand this application with any and all documents submitted will become the property of Warren Township **and will not be returned.**

I/we further certify that I intend to personally occupy the unit as my primary residence except for reasonable periods of vacations and illnesses. I know that it would be illegal to rent or sublet the unit. I understand that only the parties listed on this application may reside in the affordable housing unit.

I/we authorize CJHRC, the Township of Warren and their agents to check for accuracy on any and all statements and representations made in this application. This may include calls to employers to verify income, contact with banks, etc.

Signature of APPLICANT

Signature of CO-APPLICANT

Date signed

Date signed