



50-55 SOUTH ESSEX AVE. ORANGE, NJ 07050

Desired Apt Size:

- 1 bedroom
- 2 bedroom
- 3 bedroom

## RENTAL APARTMENT APPLICATION

### Instructions:

1. Mail only one application per family.
2. When completed, this application must be returned by regular mail only (**do not send by registered or certified mail**).
3. Mail completed application to:  
**South Essex Avenue Urban Renewal, LLC**  
**50 South Essex Ave.**  
**Orange, NJ 07050**
4. **No payment should be given to anyone in connection with the preparation or filing of this application.**
5. This information to be filled out by the Applicant:

**\*\*\*50-55 SOUTH ESSEX IS A SMOKE-FREE COMMUNITY\*\*\***

### ***A. Name and Address***

Name \_\_\_\_\_

Current Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Home Phone No. ( ) \_\_\_\_\_ Work Phone No. ( ) \_\_\_\_\_

Cellular Phone No. ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

### ***B. Household Information***

How many persons in your household, including yourself, WILL LIVE IN THE UNIT FOR WHICH YOU ARE APPLYING? \_\_\_\_\_

List all of the people WHO WILL LIVE IN THE UNIT FOR WHICH YOU ARE APPLYING, start with yourself, and provide the following information.

Full Name	Relationship To Applicant	Age	Sex M/F	Occupation (Write "In School" if attending school)	Student FT/PT
	SELF				





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**C. Income from Employment**

List all full and/or part-time employment before taxes for ALL HOUSEHOLD MEMBERS including yourself WHO WILL BE LIVING WITH YOU in the residence for which you are applying. Include self-employed earnings, commissions, and bonuses.

Household Member	Name & Address of Employer	Yrs at Job	Gross Annual Earnings
1.			
2.			
3.			
4.			
5.			

Total Gross Household Earnings \_\_\_\_\_

**D. Income From Other Sources**

List all other income, for example, welfare (including housing allowance), AFDC, Social Security, S.S.I., pension, disability compensation, unemployment compensation, interest income, babysitting, care taking, alimony, child support, annuities, dividends, income from rental property, Armed Forces Reserves, scholarships, and/or grants.

Household Member	Type of Income	Amount
1.		\$ _____ per _____
2.		\$ _____ per _____
3.		\$ _____ per _____
4.		\$ _____ per _____
5.		\$ _____ per _____

Total Income From Other Sources \_\_\_\_\_

**E. Total Annual Household Income (add totals for sections C&D)**

Add all income listed above and indicate the total earned for the year: \$ \_\_\_\_\_ per year.





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**F. Assets**

	Name of Bank
Checking Accounts	
Savings Accounts	
CD's, Stocks, Bonds, Pension Plan	

**G. Current Landlord**

Landlord's Name: \_\_\_\_\_  
(If you are living in a public housing project write the name of the building. If you are living with relatives or friends write the name of the individual(s).)

Landlord's Address: \_\_\_\_\_  
\_\_\_\_\_

Landlord's Phone Number: (     ) \_\_\_\_\_

**H. Current Rent**

What is the total rent on the dwelling where you currently live or are temporarily staying?

\$ \_\_\_\_\_ monthly

How much do you contribute to the total rent of the dwelling? (If you do not contribute write "0")

\$ \_\_\_\_\_ monthly





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**I. Section 8 Housing Assistance**

Are you presently receiving a Section 8 housing voucher or certificate?  Yes  No

Are you presently receiving any housing assistance program OTHER than Section 8?  Yes  No

If YES, what type? \_\_\_\_\_

Please check Yes or No. This information will not affect the processing of the application.

**J. Reason For Moving**

Why are you moving? Check all that apply:

- Living with parent
- Do not like neighborhood
- Not enough space
- Living with relatives or another family
- Homeless
- Rent too high
- Bad housing conditions
- Increase in your family size (marriage, birth)
- Current apartment not suitable for person(s) with disabilities
- Health reasons
- Other: \_\_\_\_\_

**K. Source of Information**

How did you hear about this development?

- Newspaper
- Sign posted on building
- Local organization or Church
- Friend
- A City affordable housing hotline or website
- Other: \_\_\_\_\_

**L. Statistical Information**

The following information is required for statistical purposes so that the Department of Housing and Urban Development (HUD) may determine the degree to which its programs are utilized by minority families. Providing this information will not affect the processing of your application.

RACIAL GROUP IDENTIFICATION (Please check only one from the group which best identifies the applicant):

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- American Indian or Alaska Native & White
- American Indian or Alaska Native
- Asian and White
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native & Black or African American
- Black or African American and White
- Other Multi Racial: \_\_\_\_\_

ETHNICITY (Check only ONE from this group):

\_\_\_\_\_ Hispanic

\_\_\_\_\_ Non-Hispanic





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**M. Signature**

I DECLARE THAT STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I have not withheld, falsified or otherwise misrepresented any information. I fully understand that any and all information I provide during this application process is subject to review by New Jersey Housing and Mortgage Finance Agency (NJHMFA) or the U.S. Department of Housing and Urban Development (HUD), a fully empowered law enforcement agency which investigates potential fraud in City-sponsored programs. I understand that the consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my application, the termination of my lease (if discovery is made after the fact), and referral to the appropriate authorities for potential criminal prosecution.

I DECLARE THAT NEITHER I, NOR ANY MEMBER OF MY IMMEDIATE FAMILY ARE EMPLOYED BY THE BUILDING OWNER OR ITS PRINCIPALS.

Head of Household Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Head of Household Signature: \_\_\_\_\_ Date: \_\_\_\_\_

