

Return Applications to: Triad Associates 1301 W. Forest Grove Road, Vineland NJ 08360 Completed Applications can also be faxed to (856) 690-5622 Phone (856) 690-5749 TriadHousingPrograms.com

PRELIMINARY APPLICATION FOR AFFORDABLE HOUSING: MUST FILL IN ALL FIELDS (Please print clearly)

HEAD OF HOUSEHOLD					
Address:					
City/Town:					
Email Address:				Cell Phone: ()
What county do you work in?					
		in Heuseha	alal Nicca		4
Number of Adults in Household		in nousend		inder of Bedrooms needer	u
HOUSEHOLD COMPOSITION: (Please					
Name	Relationship to Head of Household	Gender	Date of Birth	Annual Gross Income (Monthly x12 months)	Source of Income
1.	Head of Household			\$	
2.				\$	
3.				\$	
4.				\$	
5.				\$	
TOTAL GROSS ANNUAL HOUSEHOLD INCOME				\$	
What is Your Total Gross (before AN older from EMPLOYMENT, UNEMPLetc. Please enter only numbers, no Is a member of your household age	DYMENT, SOCIAL SECUR dollar signs (\$), decimal	ITY, DISABI points \$	LITY, PENSION,	CHILD SUPPORT, ALIMO	NY, ANNUITIES, TANF,
Is a member of your household a Ve	teran? 🗆 Yes 🗆 N	No			
Do You Currently Receive Rental Assistance? Yes No *If yes: Amount of Voucher: \$					
Credit Score: Any ban	kruptcies or judgements	in past 7 y	vears? 🗆 Yes	□ No *If yes: Date:	
* CHECK ALL THE MUNICIPALITIES Y PLEASE DO NOT SELECT "FOR SALE" If you are not familiar with the details of before submitting an application. The pr	PROPERTIES IF YOU ARE these properties please vis	UNABLE TO	O PURCHASE. dhousingprogran	ns.com for more information	
RENTAL PROPERTIES					
DELRAN Chester Woods Apartments					
BLACKWOOD, Southwinds at Gloucester					
WINSLOW Surre	y Place Apartments, 2	bedroom	units only		

*IF YOU OWN THE HOME IN WHICH YOU LIVE, PLEASE PROVIDE BOTH THE MARKET VALUE AND YOUR EQUITY IN THE HOME (Your equity equals the market value less any outstanding mortgage Principal).

MARKET VALUE: \$ _____ EQUITY: \$ _____

I certify that the information provided herein is true and complete to the best of my knowledge and that any misrepresentation of income or household size herein shall be cause for program disqualification. I also understand that this information is to be used only for determining my eligibility for referral to an affordable housing unit and does not obligate me in any way.

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