

#### **Tenant Selection Policy**

To consider **Cornerstone at Stafford** your home, this is the Selection Criteria you must meet:

- **THIS IS A SMOKE FREE BUILDING**
- **IDENTIFY AND AGE VERIFICATION**

Application must include one applicant at least 55 years of age. All additional applicants in household must be at least 45 years of age. A copy of Birth Certificate will be required for all occupants. Verification of citizenship or immigration status may be requested.

#### **LIVE IN AIDE SPECIFICATIONS**:

The Live in Aide doesn't need to meet age requirements, however, must pass all criminal background checks.

Proof of medical need by a licensed physician is required, and a signed addendum by the physician, provided by Management.

If the Live in Aide puts the household over occupancy, they will not be permitted and will need a larger unit to accommodate the household (if the unit is available).

Once the resident no longer occupies the unit, this will terminate the live in aide's ability to occupy the unit and/or access the building.

## **HOUSEHOLD COMPOSITION / UNIT ELIGIBILITY MUST FALL INTO THESE CATEGORIES**

#### **OCCUPANCY GUIDELINES**

APARTMENT SIZE	MINIMUM OCCUPANTS	MAXIMUM OCCUPANTS
ONE BEDROOM	ONE	TWO
TWO BEDROOM	TWO	FOUR

**Frequently asked question**: Can 1 person have a 2 bedroom apt?

**Answer**: No. Exceptions to the above occupancy guidelines include those households that require a live in aide, and to households occupied by residents referred to our community by DDD and or DHS and our super unit. The super unit is a two bedroom unit but can be occupied by one person.

**HOUSEHOLD MEMBERS INCLUDE**: All persons who consider the apartment their primary residence.



**YOUR ANNUAL INCOME MUST** fall within the State established -HUD income levels. The annual income is the full amount, (GROSS), before any payroll deductions for all adults **NOT** the take home pay or net income.

<u>ANNUAL INCOME</u> is inclusive and not limited to: employment, self-employment, tips, commissions, income from assets, Social Security and other benefits, payments in lieu of earnings, i.e., unemployment, disability compensation, worker's compensation and severance pay., child support/alimony, gifts, military pay, student financial assistance, etc.

If your annual income is lower than the required minimum income level for the specific number of household members for the specific bedroom size; you will not be eligible for an apartment. The only time this doesn't apply is if you can prove that you paid higher rent in the previous 12 months.

If your annual income exceeds the maximum income requirements for the specific number of household members and bedroom size, you will not be eligible for an apartment.

#### **STUDENT STATUS**

As a LIHTC (Low Income Housing Tax Credit) community, student status in the household is an important matter for tax compliance. Due to this status, generally households made up entirely of **FULL TIME** students **DO NOT QUALIFY**. Student Status exceptions are as follows:

- 1. All adults are married and ENTITLED TO file a joint tax return.
- 2. All adult members are single parents with minor children, the adult is not a dependent of any third party, and the children are only claimed by a parent.
- 3. The household includes a member who receives assistance under Title IV Welfare (TANF).
- 4. The household includes a member who formerly received foster care assistance.
- 5. The household contains a member, who gets assistance under the Job Training Partnership Act, (JTPA) or under other similar, federal, State or local laws. This information must be verified to ensure household qualifications.

#### **LAND CRIMINAL SCREENING**

To begin the application process, an application fee of \$50 (non-refundable) is required for <u>each</u> applicant in the household. This is to be paid to **Cornerstone at Stafford** in cleared funds, i.e. money orders or cashier's check will be accepted. <u>NO CASH OR PERSONAL CHECKS.</u>

The applications will be accepted the following way:

1. Mailed to **Cornerstone at Stafford**, Leasing Office 120 Campbell Blvd, Manahawkin, NJ 08050,

This is a new property and a random selection will be held for all income-eligible preliminary applications received on or before December 15, 2018. Through a random selection process, otherwise known as a lottery, income-eligible households will be selected for placement of an affordable housing unit specific to the household income and unit size listed on their preliminary application. One business week after the random selection process, all applicants will be notified via



mail on the status of their preliminary application. Subsequent to the random selection process, all new preliminary applications will be processed on a, "first come, first served" basis.

We use a third party credit/criminal background check company, The National Tenant Network (NTN). The NTN score must be **70** or higher to be acceptable, anything less will require a cosigner with a score of **80** or higher, along with income which is equal to 4 times the monthly rent, to accept the application.

If neither of the above requirements are met, the application will be rejected. If the applicant does not get approved and chooses to get a cosigner, they must pay an application fee of \$50.00 (non-refundable) for the cosigner.

#### **THE COSIGNER**

The cosigner's role has a financial responsibility if the lease holder falters in paying their rent. The cosigner will continue to be the cosigner for subsequent years or until the resident vacates.

If the credit report is not acceptable due to an eviction, the previous landlord will be contacted to clarify if previous eviction was financially satisfied. If it is not satisfied, the applicant will be rejected.

If the credit report is accepted, the process will continue with a long form application; detailing all income and asset requirements.

#### **CRIMINAL**

We use a third party company, NTN, to check for credit and criminal background activity.

- Any felony criminal activity within the last year or felony conviction within the past ten years will result in an automatic rejection.
- Felony or misdemeanor arrests and/or charges for crimes against children, violent crimes, drug-related, sexual offenses or arson will also be cause for denial of an application.
- Any member of a household who is subject to a State lifetime sex offender registration requirement will result in immediate rejection.

If your application is declined due to Credit and or Criminal Screening, we will include in our written notification information how to obtain a copy of the consumer report that was used in determining the decision.

<u>Violence Against Women Reauthorization Act of 2013 ("VAWA")</u> protects qualified tenants, participants, and applicants, and affiliated individuals, who are victims of domestic violence, dating violence, sexual assault, or stalking from being denied housing, evicted, or terminated based on acts of such violence against them

#### **4** APPLICATION DECISION

<u>If An Application is Declined</u>: Applicants will be notified in writing of any application denial and given fourteen (14) days to respond in writing to request a meeting to discuss the rejection. All application fees are non-refundable. If your application is declined, included in the written notification



you will be given the information to obtain a copy of the consumer report that was used in determining the decision.

If An Application is Cancelled: If for any reason you withdraw your application or notify us that you have changed your mind about renting an apartment, all application fees are non-refundable.

Failure to Execute the Lease: In the event that you fail to sign the Lease Agreement after application approval, all said fees and deposits are non-refundable.

#### **TAKING POSSESSION OF THE UNIT**

Once the application is approved through our 3<sup>rd</sup> party verification company and NJHMFA, the applicant will have 15 days to take possession of the unit, once it's available for move in. If the applicant is not ready to move in at that time, the applicant will be put back on the waiting list as of the date they notify us that they can't occupy the unit. If this is longer then 120 days, the applicant must start the application process from the beginning.

#### **♣** WAIT LIST

The Waiting List will **open** in Accordance with the Affirmative Fair Housing Marketing Plan and will occur when there aren't any specific unit types vacant, available to rent.

The Waiting List will be **closed** once the number of units on the Waiting List reaches 4 times the number of units on the property.

\*Sandy impacted residents will be given preference during the lease up process through 90 days after Certificate of Occupancy or Temporary Certificate of Occupancy is received for the 1<sup>st</sup> building.

- 1. <u>Application.</u> Anyone who wishes to be placed on a waiting list must complete an application.
- 2. <u>Receiving and recording the application</u>. Upon receipt of an application for tenancy, the application will be recorded initialing the date and time received.
- 3. <u>Data required on the wait list</u>. The following data must be included in an application, which will be placed on the waiting list: Date/time submitted; Name of head of household; annual income level; identification of the need for an accessible unit, including the need for accessible features; unit size.
- 4. <u>Selection</u>. When a unit becomes vacant, a selection will be based on the unit size available, preferences established for the property, income-targeting policies and requirements, and screening policies. Any current **Cornerstone at Stafford** Apartments resident will take precedents over the applicants listed on the waiting list over the people listed on the waiting list. Any Sandy impacted resident(s) will get priority over the current residents and also the current waiting list.
- 5. <u>Confirmation</u>. You will receive a letter from the office confirming your status on the waiting list.
- 6. <u>Notification</u>: If you have changed any data submitted on the application, which results in household and income level changes, you must reapply. Please contact us immediately so we can update your information.
- 7. <u>Update</u>: List will be updated every 6 months, with correspondence. If you do not respond to our letter, you will be removed from the waiting list.
- 8. \*Sandy impacted resident(s) must provide proof; such as FEMA # (inquire within for other options).



#### **SANDY IMPACTED RESIDENTS PREFERENCE**

- 1. Priority will be given to qualified Sandy impacted resident(s) until 90 days after the project is completed (C/O or T/CO) is issued for the 1<sup>st</sup> building.
- 2. Through the end of the priority period, should 2 qualified applicants apply, the unit would go to the Sandy impacted resident, even if a Sandy impacted resident applies at a later date than a non-impacted resident.
- 3. If a Sandy impacted resident applies after a non Sandy impacted resident's application is in process, the Sandy impacted resident will be the next on the Waiting List.
- 4. If the project is fully occupied prior to the end of the priority period, but a qualified Sandy victim applies within that period, that applicant would jump to the top of the waiting list for the next available unit.
- 5. Residents must sign the New Jersey Housing and Mortgage Finance Agency FRM Certification of Sandy Displacement.

#### **TRANSFER POLICY**

- Current residents that request, in a form of a letter, a transfer to a different size unit due to a change in household composition, or to make a reasonable accommodation, will be considered a priority and will be placed on the wait list accordingly. Sandy impacted residents will take priority on requests.
- 2. Current residents must remain in the income level in what was determined at the time of leasing. For example, if you leased at a 2 Bedroom Moderate level income and now only require a 1 Bedroom, due to a change in household composition, the level remains the same; Moderate. Regardless of a decrease or increase in household income.
- 3. If a current resident needs to be placed in a smaller unit due to the death of a family household member, upon an available unit, the current resident must transfer.

#### **SPECIAL NEEDS UNITS**

There are (5) Special Needs Units reserved for applicants with Special Needs. These applicants will be referred to us by DDD and or DHS. In our reserved units, age restrictions do not apply

#### **REASONABLE ACOMMODATIONS**

- 1. A reasonable accommodation is a structural change made to an existing unit occupied by a person with a disability (and disability is typical defined as an individual with a physical or mental impairment that substantially limits one or more major life activity) in order to afford such a person the full enjoyment of the premises.
- 2. A reasonable modification is a change, exception, or adjustment to a rule, policy or practice used in running a community.

#### TERMINATION OF LEASE

According to the signed lease, the current resident listed in the lease agreement will be responsible for the lease terms, which are (12) twelve months. If a 60 days notice is obtained, the lease holder is still responsible for the lease until Management can get the unit occupied.

#### **PET POLICY**

This is a NO pet policy apartment community. Service Animals are accepted with medical documentation only.



### **EQUAL HOUSING OPPORTUNITY**

**Cornerstone at Stafford** and all its associates support the principle of equal housing opportunities and adhere to the Fair Housing Laws. The company does not discriminate in the daily management of the communities, leasing of apartment homes or in any business practices related to its services, on the basis of race, color, religion, national origin, sex, familial status, handicap or any other factor under protection by federal, state or local laws.

All applicants must agree to the following by signing this Tenant Selection Policy/ Criteria

Form.		
within the time specified by the time specified, my app	ormation or documentation necessar y my community representative. I un	a request for verification of information ry to complete the approval process, derstand that if I do not respond within to longer have an apartment on hold. In including all application fees.
	n paperwork is accurate to the best on the application and/or during app	
I hereby affirm that I have Form.	read and understand a copy of the <b>1</b>	Tenant Selection Policy/ Criteria
proceed to obtain and veri		erstone at Stafford community will ckground history and other information not I meet the criteria in order to rent
Applicant Signature	Print Name	Date
Applicant Signature	Print Name	Date
Applicant Signature	Print Name	Date
Applicant Signature	Print Name	Date





FOR OFFICE ONLY: DATE:
TIME:
NO

#### PRELIMINARY APPLICATION FOR AFFORDABLE HOUSING

Please read enclosed directions carefully. Incomplete applications will be returned.

#### PLEASE PRINT- HEAD OF HOUSEHOLD INFORMATON

First, Last Name		Email Address:						
Address, City, State, Zip Code		County:						
Home Phone Number:	Cell Phone Number:	Alternate Phone Number:						
ARE YOU A SANDY IMPACTED HOUSEHOLD? YES NO PLEASE INDICATE FEMA #								
How many bedrooms are you interested in:								

## 1. HOUSEHOLD COMPOSITION (LIST ALL PERSONS TO LIVE IN HOME) AND INCOME

Name(s) First & Last	Head of Household	Date of Birth	Gender (M/F)	Current Gross Annual Income*

<sup>\*</sup>Income includes, but is not limited to gross wages (before taxes), salaries, tips, commission, child support, pensions, and social security & disability benefits



## 2. ASSETS (SAVINGS, CDS, STOCK, REAL ESTATE, OTHER INVESTMENTS,

ETC.) Type of Asset	Current Market Value	Yearly Interest of Dividends**		
I certify that the inform	ation provided herein is to income or household sinalification.	rue and complete and th		
	nis information is to be us ity for referral to an affor any way.	-		
PRINTED NAME	OF HEAD OF HOUSEHOLD	Date		
CICNATURE OF	HEAD OF HOUSEHOLD	Date		



# NEW JERSEY HOUSING AND MORTGAGE FINANCE AGENCY CERTIFICATION OF MAJOR OR SEVER DAMAGE, DISPLACEMENT, OR IMPACT FROM SANDY FRM PROGRAM

Name			_
Address of Dar	maged Residence		-
City	State (must be NJ)	Zip	-
Social Security	#	<del></del>	
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related to hous		erstorm San	
	Proof of Valid FEMA Registration	on	
	Copy of insurance claims		
	Tax return evidencing of casual	lty loss	
	Receipts showing extended sta	, hereby certify that I have been displaced, suffered te, or otherwise experienced financial distress directly esult of Superstorm Sandy. In support of this certification, de at least one):  Registration aims ag of casualty loss tended stays at hotel/motels of other rental assistance from a program specifically exple impacted by Superstorm Sandy requiring expact from Sandy, such as funding from FEMA, a private philanthropy or non-profit  ort (including flood plain manager) showing major or re-storm residence  that a letter or certification from the owner of the exand/or post-storm residence, showing that the end to relocate by and/or suffered major or severe storm Sandy  mancial distress directly related to housing which is a	
	designed to assist people impa- demonstration of impact from	cted by Supe Sandy, such a	rstorm Sandy requiring as funding from FEMA,
	Local inspection report (includi severe damage to pre-storm re	-	n manager) showing major or
	resident's pre-storm and/or po	st-storm resi ate by and/or	dence, showing that the
	Other evidence of financial dist direct result of Superstorm San	-	related to housing which is a
	accurate to the best of my/our representations herein constitu	knowledge a utes an act of	and belief. I further understand that providing false fraud. False, misleading or incomplete information
Signature			Date

Revised: 5/15/15



#### MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

The **New Jersey Law Against Discrimination**, *N.J.S.A.* 10:5-1 to –49, makes it unlawful to discriminate in the sale or rental of housing based on a person's race, creed, color, national origin, ancestry, nationality, affectional or sexual orientation, disability, gender, marital status, familial status (whether you have a child, a parent-child relationship with a minor, or you are pregnant), lawful source of income or rental subsidy used for rental payments.

The **New Jersey Division on Civil Rights** is the State agency that is authorized to enforce the Law Against Discrimination. Under the Division's **Multiple Dwelling Reporting Rules**, *N.J.A.C.* 13:10-1.1 to -2.6, the Division requires landlords to collect and record information about applicants for apartment rentals and tenants in apartment complexes throughout New Jersey. The **Multiple Dwelling Reporting Rule** requires landlords to provide a summary of this information to the Division and to retain the information on this form. **The information is used to prevent and eliminate discrimination in housing.** 

Your cooperation in filling out this form will assist the Division in enforcing the Law Against Discrimination.

Please note that, although landlords must record certain information about the race and ethnicity of applicants and tenants, it is unlawful to record or ask applicants or tenants about other characteristics such as religion, gender, marital status or affectional or sexual orientation.

If you feel you have been denied housing or treated differently for one of the reasons listed above, you may contact the Division on Civil Rights at (609) 984-3138 for referral to a local Division office for additional information or assistance.

Visit the Division on Civil Rights Web site at: www.NJCivilRights.org -----*E*------Tenants/applicants: Fold & tear along dotted line and retain top portion for your records MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY If the tenant/applicant chooses not to complete this form, the landlord or the landlord's representative is required to conduct a visual observation of the tenant or applicant and then complete this form as accurately as possible. This form is not intended to be a part of the rental application process and must be kept separate and apart from rental records. ☐Tenant ☐ Applicant Name:\_\_\_\_\_ Address: City:\_\_\_\_\_ State:\_\_\_ Zip code:\_\_\_\_ Phone Number:\_\_\_\_\_ Race/Ethnicity: Please check all that apply to leaseholders (tenants) or applicants. ☐ Black or African American: a person having origins in any of the original peoples of Africa ☐ Hispanic or Latino: a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish origin or culture, or a person having a Spanish surname ☐ Asian: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam ☐ American Indian or Alaska Native: a person having origins in any of the original peoples of North or South America ☐ Native Hawaiian or Other Pacific Islander: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands ☐ White or Caucasian: a person having origins in any of the original peoples of Europe, the Middle, or North Africa Date: \_\_\_\_\_ Completed by: ☐Tenant ☐Applicant □I andlord

If you have any questions regarding this inquiry please contact the Division on Civil Rights, Multiple Dwelling Unit at 609-

984-3138 between the hours of 9:00 to 5:00 Monday through Friday, or e-mail the MDRR unit at

DCRMDRR@njcivilrights.org DCR/HIU/MDRR/LS2005





## FORMS TO BE RETURNED OR MAILED TO LEASING OFFICE LOCATED AT

Cornerstone at Stafford Leasing Office 120 Campbell Blvd Manahawkin, NJ 08050

- ✓ Preliminary Application
- ✓ Multiple Dwelling Report Form. Each household member must meet our age requirements
- ✓ National Tenant Network (NTN) Rental Application
- ✓ VAWA (Violence Against Women Act) information

I/We understand the <u>Selection Criteria</u>, and the <u>Forms</u> that must be returned to the <u>Cornerstone at Stafford</u> office staff.

More importantly, this <u>DOES NOT</u> grant me an apartment until all the documents have been submitted to our office in a timely manner and approval has been obtained from Windsor, the Tax Compliance group (LIHTC) and State approval, (NJHMFA). If you cannot submit documents in a timely fashion, you will be declined for an apartment.

Applicant Signature	Print Name	Date
Applicant Signature	Print Name	Date
Applicant Signature	Print Name	Date
Applicant Signature	Print Name	Date





## Cornerstone at Stafford Rental Application

Tel: (609)597-0300 National Tenant Network (NTN) Credit + Criminal Screening

Last Name		First Name		M.I.	Co-Applicant Last Name			Co-Applicant First Name	
Date of Birth	Socia Numb	I Security er	•			cant Co-Applicant Birth Social Security Number			
E-Mail Address					Co-Applicant E-Mail Address	<u> </u>			
Current Street A	Address	City	State	Zip Code	Co-Applicant Current Address		City	State	Zip Code
Previous Street	Address	City	State	Zip Code	Co-Applicant Previous Address	Co-Applicant Previous Address		State	Zip Code
Length at Current Total Months:	Length at Current Residence Length at Previous Residence (if applicable):		ıble):	Length at Current Residence Length at F Total Months: Residence		Previous e (if applicable):			
			Employ	ment /	Income Inform	nation			
Present Employer Name Position		Co-Applicant Position Employer Name							
Employer Addre	9SS	City	State	Zip Code	Co-Applicant Employer Addre	ess	City	State	Zip Code
Length of employ Total Months:	ment	Salary / Wages	per	year	Co-Applicant Length of employment Total Months:		Salary / Wages	Pery	rear
			A	pplican	nt Signature(s	)		•	
deems desirable employment/salar information on the	in the y details, is form ma	processing of m police and vehice	ve informa y applicati le records n a tenant d	tion is con on, inclu , and any latabase fo	rrect and complete a ding; credit report or other relevant info or up to 5 (five) years	and authori s, civil or ormation. If	criminal action	ns, rental t, I unders	history tand the
			Co-Applicant: X Date:						
					USE ONLY				
NTN Access Numbe	r:	Address/Unit A	oplied for:	O. I IOL		ly Rent Amou	ınt for unit applicant	is applying fo	r: <b>\$</b>
Date Screened:		Projected Move	•			ent / Unit Typ		,,,, <u>,,</u>	•

