



509 Memorial Drive
 Neptune, N.J. 07753
 Telephone Number: 732-955-9595 Email: coahpro@gmail.com
 Website: coahpro.com

**APPLICATION FOR 150 BAY STREET JERSEY CITY
 LIVE/WORK ARTIST STUDIO AFFORDABLE HOUSING UNIT
 AFFORDABLE HOUSING**

Jersey City preference will be used in this lottery. In addition, all applicants must have received an Artist Certification from Jersey City to apply . All applicants must have a Gross Household Income listed below.

OCCUPANCY STANDARD

**MINIMUM OCCUPANCY STANDARDS ARE FOR A 1 PERSON HOUSEHOLD WITH A
 MAXIMUM OCCUPANCY PER HOUSEHOLD OF A 2 PERSON HOUSEHOLD**

**ONLY SEND YOUR ARTIST CERTIFICATION
 AS A PDF DOCUMENT**

MINIMUM AND MAXIMUM GROSS INCOME REQUIREMENTS BELOW

**AMI OF 60% GROSS HOUSEHOLD INCOME REQUIREMENT IS \$56,220.000
 TO
 A MAXIMUM AMI OF 80% GROSS HOLDHOLD INCOME IS \$85,680.00**

Rents limits

**60% AMI RANGE , WITH A MINIMUM RENT OF \$1,405.00
 AND
 A MAXIMUM RANGE OF 80% AMI WITH A MAXIMUM RENT OF \$1,874.00**

This Notice is available in Spanish, Arabic , Urdu, Gujarati and Hindi upon request

#1) Applicant

Name: _____

Applicant email address: _____

Cell phone number : _____

Drivers License address & state issued : _____

#2) Applicant

Name: _____

Applicants email address: _____

Cell phone number: _____

Driver License address & state issued: _____

HOUSEHOLD COMPENSATION LIVING IN HOUSEHOLD AND CHARACTERISTICS

- List the Head of Household & all members who will be living in the unit.
- Relationship of each family member to the head of household.
- Birthdates & sex

#	Full Name of each person in the household	Social Security numbers	Birth Date	Relationship to head of household	SEX
1					
2					

Does anyone live with you now who is not listed above? Yes ____ No ____

Please state which applicant is the Artist that has received Jersey City Artist Certification ?

Do you expect a change in your household composition size? Yes ____ No ____

Explain if answered yes to either question _____

ARTIST CERTIFICATION

Do you currently have an active Artist certification from Jersey City? If yes please attach a PDF copy of your Artist Certification with your application.

Yes _____ Date of Certification as an Artist with Jersey City _____

No _____ You may only apply for the Wait list for these units while your application is pending certification.

INCOME AND ASSET INFORMATION

1.	Yes	No	Work full-time, part-time or seasonally?
2.	Yes	No	Expect to work for any period during the next year?
3.	Yes	No	Work for someone who pays you cash?
4.	Yes	No	Expect a leave of absence from work due to lay-off, medical, maternity or military leave?
5.	Yes	No	Now receive or expect to receive unemployment benefits?
6.	Yes	No	Now receive or expect to receive child support?
7.	Yes	No	Entitled to child support that he/she is now receiving?
8.	Yes	No	Now receive or expect to receive alimony?
9.	Yes	No	Have an entitlement to receive alimony that is not currently being received?
10	Yes	No	Now receive or expect to receive housing assistance (welfare)?
11	Yes	No	Now receive or expect to receive SS or disability benefits?
12	Yes	No	Now receive or expect to receive income from a pension or annuity?
13	Yes	No	Now receive or expect to receive regular contributions from organizations or from individuals not living in the unit?
14	Yes	No	Receive income from assets including interest on checking or savings accounts, interest on dividends from certificates of deposit, stocks, or bonds or income from rental property?
15	Yes	No	Own real estate or any assets for which you receive no income ?
16	Yes	No	If you own a home, do you maintain a mortgage on the property?
17	Yes	No	Have you sold or given away real property or other assets (including cash) in the past two years?
18	Yes	No	Are you responsible for paying child support or alimony? This amount will be deducted from your total annual income. Amount Paid Monthly: \$ _____

Gross Income Requirements

Each Household Person over 18 must be listed here	Source of Income/Type of Income	Total Gross Annual Income
1)		
2)		

- **ASSETS LIST:** Any assets disposed of for less than their fair market value during the past 2 years
All checking and savings accounts including IRA's, Keogh accounts, & Certificates of Deposit of any &
all household members.
- List all stocks, bonds, trusts, pensions, or other assets, including an investment property or
house with their value owned by any household member .

Household Member over 18	Bank Name	Type of Account	Account Number Last 4 # only	Ending Balance
1				
2)				

PREVIOUSLY RENTAL HISTORY OR OWNERSHIP HISTORY

Former Landlord name & address:

Landlords Telephone number : _____

How long have you lived at that address?

Will Landlord provide references ? _____ Yes _____ No _____

Reason for leaving: _____

EMPLOYMENT HISTORY

Name of Applicant #1

Head of household #1 Applicant : _____

Employment (Work) Name of Company : _____

Address & phone number.

_____ Telephone: _____

Supervisor's name _____

If you are self employed please fill in the Company's name _____

Address : _____

Phone number: _____

Applicant #2,

Applicant : _____

Employment (Work) Name of Company : _____

Address & phone number.

Telephone: _____

Supervisor's name _____

If you are self employed please fill in the Company's name _____

Address : _____

Phone number: _____

APPLICANT CERTIFICATION

1. I/we certify that if selected to receive assistance, that unit I/we occupy will be my/our only residence.
2. I/we understand that the above information is being collected to determine my/our eligibility.
3. I/we authorize the owner/manager to verify all information provided on this application and to contact previous or current landlords or other sources of credit and verification information which may be released to appropriate Federal, State, or local agencies.
4. I/we certify that the statements made in this application are true and complete to the best of my/our knowledge and belief. I/we understand that false statements or information are punishable under Federal Law.

Signature of Head of Household

#1 Applicant: _____ Date: _____

Signature of Applicant #2 :

_____ Date: _____

COAH PRO does business in accordance with the Federal Fair Housing Law (The Fair Housing Amendments Act of 1988). It is illegal to discriminate against any person because of race, color, Religion,

sex, handicap, familial status or national origin.

