

2016 PURCHASE APPLICATION

<u>SIZE</u>	<u>LOW INCOME</u>	<u>MODERATE INCOME</u>
1 PERSON	\$36,750	\$58,800
2 PERSONS	\$42,000	\$67,200
3 PERSONS	\$47,250	\$75,600
4 PERSONS	\$52,500	\$84,000
5 PERSONS	\$56,700	\$90,720

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To complete the application you will need to attach the following documentation for everyone living in your household who is employed.

1. Copies of your last three pay stubs.
  2. Documentation of available down payment. Such as a bank statement.
  3. Copies of complete signed tax returns for the last three years with all attachments (W-2's, etc.)
  4. If you receive Social Security, submit a copy of your award letter plus a copy of a recent check or a copy of a bank statement showing the check automatically deposited to your account.
  5. Copies of birth certificates for all children under the age of 18, plus proof of guardianship or custody for children living with you who are not your own.
  6. Enclosed "Request for Verification of Employment" form filled out and signed.
  7. Proof of separation or divorce agreement showing amount of child support received.
  8. A credit check will be done and this is a very important part of the qualifying process.
  9. Include a copy of a pre-qualification for a mortgage.
  10. Applications will be kept on file for one year.
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Send completed application (along with the requested photocopies and a \$25.00 non-refundable check) to the  
Bedminster Hills Housing Corp.  
One Miller Lane, Suite A  
Bedminster, NJ 07921.  
For Information – 908-212-7010

**APPLICATION FOR CERTIFICATE AS A QUALIFIED PURCHASER**

Applicant's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Sex: M F

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Drivers License Number & State: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Co-Applicant Name: \_\_\_\_\_ Age: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Sex: M F

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Drivers License Number & State: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Relation to Applicant: \_\_\_\_\_

Other Household Members (those who would live with you, should you buy):

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F Grade: \_\_\_\_\_

Total Number of Adults: Female: \_\_\_\_\_ Male: \_\_\_\_\_

Total Number of Children: Female: \_\_\_\_\_ Male: \_\_\_\_\_

INFORMATION ABOUT YOUR PRESENT HOUSING (Circle those that apply)

- |   |     |    |
|---|-----|----|
| 1. Does your present housing lack indoor plumbing?              | YES | NO |
| 2. Does your present housing lack a centralized heating system? | YES | NO |
| 3. Is your present housing overcrowded?                         | YES | NO |
| 4. Is your present housing shared with another family?          | YES | NO |

Describe any other problems with your present housing:

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Present Landlord Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

1. Do you own a house now? YES NO

If so, what is its present value? \$ \_\_\_\_\_

How much is owed? \$ \_\_\_\_\_ Date of closing: \_\_\_\_\_

2. Did you sell a house in the last three years? YES NO

What was the price? \$ \_\_\_\_\_ What was the net profit? \$ \_\_\_\_\_

3. Do you rent a home to anyone? YES NO

4. How long have you been at your current address? \_\_\_\_\_

5. Do you rent now? YES NO

6. What is your current rent? \$ \_\_\_\_\_ /month

INFORMATION ABOUT YOUR EMPLOYMENT

Your present occupation: \_\_\_\_\_

Name of present employer: \_\_\_\_\_

Address of present employer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work telephone number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

What is your monthly rate of pay? \$ \_\_\_\_\_

How long have you been employed by the above? \_\_\_\_\_

If you have been employed with the present referenced company for less than two years, please provide the name, address and dates of employment for your previous employers to cover the last two years of your employment.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Do you work any other jobs? YES NO

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long have you been employed by the above? \_\_\_\_\_

GROSS 2014 INCOME \$ \_\_\_\_\_

GROSS 2013 INCOME \$ \_\_\_\_\_

GROSS 2012 INCOME \$ \_\_\_\_\_

INFORMATION ABOUT OTHER SOURCES OF INCOME

1. Do you receive Social Security? YES NO  
If so, what is the total amount per year? \$ \_\_\_\_\_

2. Do you own any stocks or bonds? YES NO  
If so, what is the current market value? \$ \_\_\_\_\_

3. Do you receive a pension or disability payment? YES NO  
If so, what is the total amount per year? \$ \_\_\_\_\_

4. Do you receive any other type of income? YES NO  
If so, What? \_\_\_\_\_ Amount per year? \$ \_\_\_\_\_

5. What is the total value of all your personal assets:  
From Savings: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

6. How much money do you have available for a down payment? \$ \_\_\_\_\_

CO-APPLICANT EMPLOYMENT INFORMATION

Co-Applicant Occupation: \_\_\_\_\_

Name of Co-Applicant Employer: \_\_\_\_\_

Address of Co-Applicant Employer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work telephone number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

What is the monthly rate of pay? \$ \_\_\_\_\_

How long has co-applicant been employed? \_\_\_\_\_

If you have been employed with the above company for less than two years, please provide the name, address and dates of employment for your previous employers to cover the last two years of your employment.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Does co-applicant work any other jobs? YES NO

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long has co-applicant been employed by above? \_\_\_\_\_

What is the monthly rate of pay? \$ \_\_\_\_\_

GROSS 2014 INCOME \$ \_\_\_\_\_

GROSS 2013 INCOME \$ \_\_\_\_\_

GROSS 2012 INCOME \$ \_\_\_\_\_

Does anyone else in your household work? YES NO

Who? \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Monthly Rate of Pay: \$ \_\_\_\_\_

List all monthly, recurring debts which have been incurred by your household (student loans, car payments, credit cards, child support payments, day care payments, etc.)

Type of Loan or Payment	Monthly Payment
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Bedminster Hills Housing has an Affirmative Fair Housing Marketing Plan and promotes the availability of housing to persons of low and moderate income, regardless of the individual's race, sex, color, religion, or national origin. Information on sex or age will only be used to determine the number of bedrooms and the size of the unit required.

Statement of Confidentiality: The Bedminster Hills Housing Corp. is requesting that you fill out this application so that the Bedminster Hills Housing Corp. can verify that you are eligible to purchase an affordable housing unit in Bedminster, without the applicant's written request or consent.

THE INFORMATION IN THIS APPLICATION, AND ANY OTHER INFORMATION BEING REQUESTED BY BEDMINSTER HILLS HOUSING CORP. WILL BE KEPT IN STRICTEST CONFIDENCE IN ACCORDANCE WITH NEW JERSEY STATE LAW. NO PART OF THIS APPLICATION FILE WILL BE GIVEN TO ANY PERSON, ENTITY, OR BUSINESS NOT RELATED TO BEDMINSTER HILLS HOUSING CORP. WITHOUT THE APPLICANT'S WRITTEN REQUEST OR CONSENT.

Thank you for taking the time to answer these questions. The information you have provided will help us better serve the community in the future.

CERTIFICATION AND DECLARATION

I hereby certify that the statements and information contained in this application are accurate, true and complete to the best of my knowledge; and I am further aware that willfully false or misleading information or statements subject me to sanctions as included, but not limited to, the Rules and Regulations of the Bedminster Hills Housing Corp.

I hereby certify that the unit will be occupied by only the persons named on this application. Failure to adhere to this stipulation will result in forfeiture of the unit.

I understand and give permission to the Bedminster Hills Housing Corporation TO OBTAIN A CREDIT REPORT AND REFERENCE REPORT ON APPLICANT, and know that this report will become a part of my application for Certification as a Qualified Purchaser.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**APPLICATIONS MUST BE SIGNED, DATED AND COMPLETED TO BE CONSIDERED FOR CERTIFICATION. ALSO, PLEASE INCLUDE A \$25.00 NON-REFUNDABLE PROCESSING FEE AND MAIL TO THE ADDRESS BELOW.**

**MAIL TO: Bedminster Hills Housing Corp.  
One Miller Lane, Suite A  
Bedminster, NJ 07921**

To Whom It May Concern:

In order to determine the eligibility of households applying for housing, all sources of income must be verified by the applicant's employer. We ask your cooperation by signing and dating this letter where indicated below authorizing the Bedminster Hills Housing Corp. to send a "Request for Verification of Employment" form to your present employer.

I hereby authorize that:

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

release to The Bedminster Hills Housing Corp. information regarding verification of my present employment and salary.

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_