



INSTRUCTIONS:

- 1) This is a Preliminary Application for affordable housing with CME Associates. It will be utilized to determine if you are generally eligible to be considered for an affordable unit. **NEITHER THIS APPLICATION NOR ANY NOTICE OF AVAILABILITY IS AN OFFER TO SELL.** If you need assistance completing this application, please contact CME Associates at (732) 462-7400.
- 2) This Preliminary Application **IS NOT THE FINAL APPLICATION AND DOES NOT SATISFY YOUR APPLICATION REQUIREMENTS.**
- 3) Please understand that the pricing rates for affordable housing are established and governed by Federal, State and / or municipal regulations. Although consideration is made for low-and moderate-categories of household incomes, sales and rental prices do not fluctuate on the basis of each individual applicant's income. Therefore, we cannot and do not guarantee that any home, for sale or rental, will be affordable to YOU or YOUR household.
- 4) After you have completed this application, sign it, detach it from these instructions and mail it directly to: **CME Associates-1460 Highway 9 South, Howell, NJ 07731** or scan and email to Patricia Gallagher at pgallagher@cmeusa1.com.
- 5) Please allow two (2) weeks for your application to be processed. Once your application has been reviewed, you will be notified in writing regarding your **PRELIMINARY** eligibility status for the affordable housing program administrated by CME Associates.
- 6) Once it has been determined that you are generally eligible to rent or purchase a **"Low to Moderate-Income"** affordable unit under the program, you will be mailed a complete application package when a unit is available for you that meets your income category and appropriate bedroom size. Once your application package and all supporting documentation has been submitted and reviewed for program eligibility and you are deemed qualified for the available unit, you will then be placed in a lottery drawing with other qualified applicants and referred to the seller/developer to negotiate a contract to purchase the unit in the order in which you were pulled in the lottery.
- 7) **Annual Income** includes, but is not limited to, salary or wages, alimony, child support, social security benefits, pensions, business income, and actual or imputed earnings from assets (which include bank accounts, certificates of deposit, stocks, bonds, or other securities), and real estate. The household's total gross annual income cannot exceed program guidelines.





- 8) If you **own a home** in which you are currently residing and which you intend to sell prior to living in an affordable home, compute your income from this asset by taking the market value of your home, subtracting any applicable broker fees AND the current principal of your mortgage, and multiply the balance by 2%. Income from other real estate holdings is determined by the actual income you receive from the asset (less expenses, but not less your mortgage payment), which cannot exceed the COAH 2011 Region 4 real property asset limits.
- 9) Purchase applicants are strongly encouraged complete a HUD homebuyer workshop in order to purchase an affordable housing unit.
- 10) **Preliminary** waiting list applicants will be required to submit updates in order to remain on the list. If any applicant fails to respond to an update notice they will be removed off of the waiting list immediately and will be required to re-apply in order to get back on the waiting list, **no exceptions**. Applicants who are no longer eligible to remain on the list will be notified in writing.
- 11) **Only return pages 3 & 4 of this application** retain the other pages for your future reference.





Preliminary Purchase Application for Affordable Housing

A. Head of Household Information:

Last Name: _____	Soc. Sec. No: _____ - _____ - _____
First Name: _____	Home Phone: () _____ - _____
Home Address: _____ _____	Work Phone: () _____ - _____
PO Box of Apt. No: _____	County: _____
City: _____	State: _____ Zip: _____
Email Address: _____	

B. Income (ALL sources of income, including, but not limited to: Salary, Dividends, Social Security, Pensions, Alimony, Business, Fellowships and Support. DO NOT include income from Assets listed in Section D, or tuition awards.)

C. Household Composition: List all occupants that will be living in the home: (Please Print)

First and Last name of everyone to occupy housing	Relation To	Full-Time Student? (Yes/No)	Date of Birth	Sex	Gross Annual Income
1.					\$
2.					\$
3.					\$
4.					\$
5.					\$
6.					\$





D. Assets (Checking & Savings Account, CD's, Money Market, Real Estate, Etc.):

Type of Asset	Current Market Value of Asset	Estimated Annual Income	Annual Interest
1.	\$	\$	\$
2.	\$	\$	\$
3.	\$	\$	\$
4.	\$	\$	\$

E. Current Household Situation:

Do you currently

- Rent Own
 Other (Specify) _____

G. Preference

Number of Bedrooms (Limited to number in your household):

- One Two Three

Do you require a handicap-accessible unit?

- Yes No

F. Unit Style of Interest: Adult Community Condominium Manufactured Home

I. Important Information (Must have signed by every household member over the age of 18).

I hereby authorize CME Associates and/ or their employees to obtain information regarding the status of my (our) credit, and to check the accuracy of any and all statements and representations made in this application. I (We) certify that all information is accurate, complete and true. I (We) understand that if any statements made are willingly false, this application is null and void, and I (we) may be subjected to penalties imposed by law. Void, if submitted without the signature of the applicant(s)

Signed _____ Date: _____

Signed _____ Date: _____

Signed _____ Date: _____

Signed _____ Date: _____

