



Truman Square

Affordable Housing Lottery

PENNROSE

Bricks & Mortar | Heart & Soul

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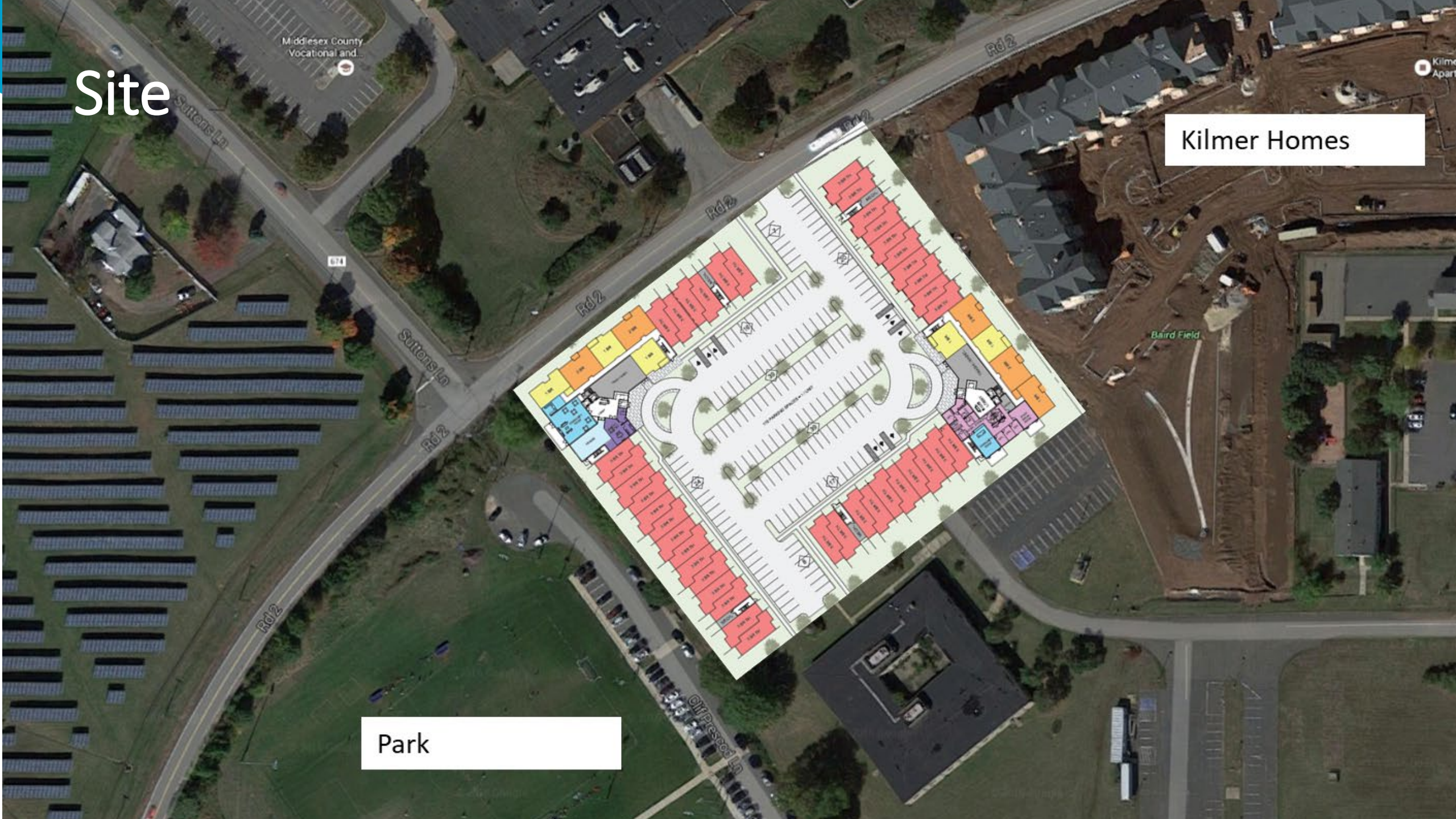
Overview

- Family Rental Community in Edison, NJ
 - Preferences: Veterans & Individuals with Special Needs
 - 100% Affordable, 2 phases & 170 units
 - Phase I Unit Mix (85 units) – Available Late Summer 2020:
 - 15 – 1 BR apartments
 - 48 – 2 BR apartments
 - 22 – 3 BR apartments
- (30%, 50%, 60% Area Median Income)

Site

Kilmer Homes

Park



Rendering



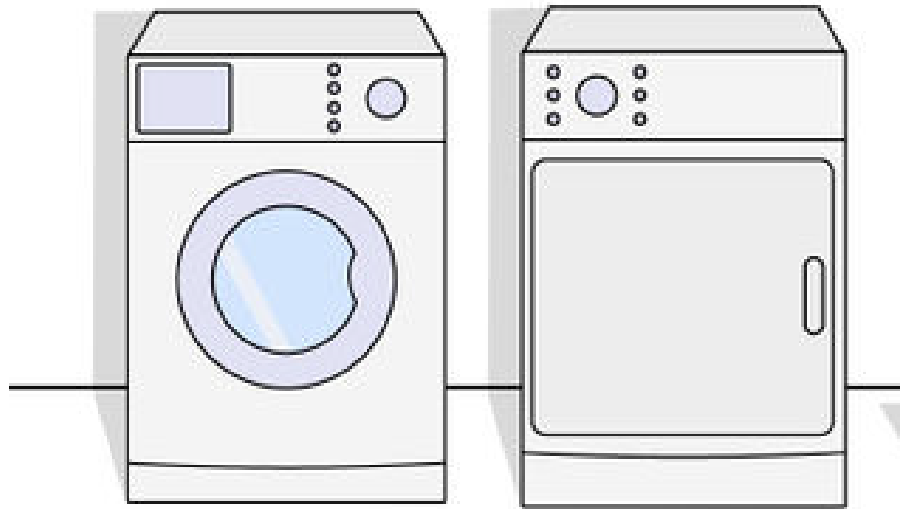
111 Truman Drive S, Edison, NJ

Community Amenities



- 172 parking spaces
- Secured access entry
- Laundry facilities on each floor
- Community room & fitness center in each phase
- Professionally landscaped grounds
- On-site professional management team
- Service oriented maintenance with 24-hour emergency call service
- On-site supportive services for all residents
 - Provider: Triple C Housing

Laundry Facilities



- All 3-bedroom apartments have in-unit washer & dryer
- Laundry rooms available on each floor:
 - 3 washers, 3 dryers per floor
- SmartCard payment system
- Residents receive card at move-in
 - Load money on to the SmartCard via a machine in a common area of the building (cash only)
 - \$1.75 / wash cycle
 - \$1.75 / dry cycle



Mailboxes (Example)

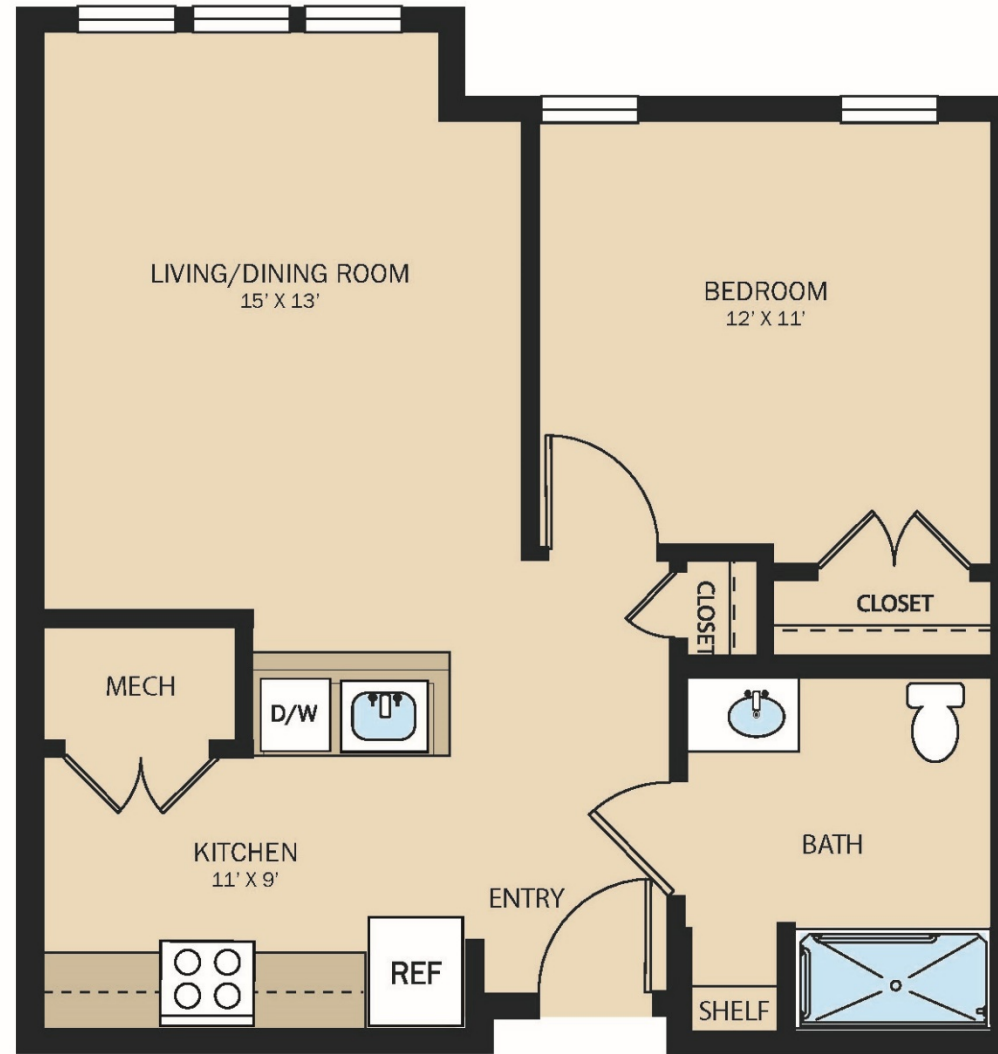
Apartment Features



- One, two & three-bedroom apartments
- Modern kitchen including electric range, dishwasher
- Spacious closets
- Vinyl flooring throughout apartment
- Washer and dryer in all 3-bedroom apartments
- Central A/C
- Pet-friendly (restrictions apply)
- Resident is responsible for gas, electric, and cable

1-Bedroom Floor Plan

626 SF



2-Bedroom Floor Plan

822 - 877 SF



3-Bedroom Floor Plan

1,151 - 1,271 SF



Progress Photos







Construction Timeline

- May 15, 2019: Groundbreaking Ceremony
- March 16, 2020: Lottery Pre-Applications Available
- April 30, 2020: Last Day Lottery Pre-Applications Accepted
- May 2020: Lottery
- May-August 2020: Processing Lottery Selected Applicants*
- August 2020: Delivery of Phase I (85 units) / Move-ins*
- Late Fall 2020: Processing Lottery Applicants for Phase II*
- Early 2021: Delivery of Phase II (85 units)*

*Timing subject to construction delays



Income Eligibility + Rents

How is eligibility determined?

- The federal government sets maximum income limits
- Maximum limits are based on Area Median Income (AMI)
 - Measuring incomes in the New York-Newark-Jersey City, NY-NJ-PA Metropolitan Statistical Area (MSA)
 - Income limits are set by the % of AMI
 - Recalculated each year

2020 Tax Credit Income Limits & Rent

- **Refer to chart on flyer, or online at TrumanSquare.com**
- Maximums rents are listed, rents will be adjusted for utility allowances that are currently being updated.
- Utilities (electric and gas) will need to be paid by resident separately and will not be included in the rent.
- Income limits are adjusted annually, subject to change.

Preferences

- **Veterans:**
 - Refer to NJ Veterans preference eligibility definition linked on [TrumanSquare.com](https://www.truman-square.com)
- **Individuals with Special Needs:**
 - Refer to NJHMFA definition listed on Pre-Application



Preparing to Apply

Documentation to Verify Income

Copies of last 6 pay stubs from current job(s)

- Copies of last year's 1099 & W-2 forms (all pages)
- Copies of signed and completed federal and state tax returns from the last three years
- Proof of cash payments
 - Bank statements that support deposits

Assets

- Anything with a cash value including money in a bank account, investments, real property etc.
- They calculate a small amount of “income from assets” based on interest and other factors
- Documentation of all assets will be required during the interview

Documentation to Verify Assets

- Six months of most recent, consecutive bank statements (all accounts) with activity listed
- Pension and annuity statements
- Investment account statements for stocks, bonds, mutual funds, and retirement accounts
- If you own property: copies of mortgage statements, homeowners insurance and tax bills

Other Tenant Selection Criteria

All prospective new residents receive in depth and standardized credit, criminal, and landlord background screening through a third-party reporting agency.

- Housing Court History
- Bankruptcy
- Delinquencies

Review Credit Report and Score

- **Credit Report**: detailed info about loans, CC payments, housing court, bankruptcies, criminal background...
 - www.annualcreditreport.com
 - Three bureaus (TransUnion, Experian, Equifax)
 - Dispute errors immediately!
- **Credit Score**: between 300 and 850 based on info in your credit report
 - www.creditkarma.com (not official FICO score, but good enough)

Pet Policy



- Pet-friendly community
- 2 pet maximum
- 35 lb. limit per pet
- No aggressive breeds
- Pet fees and pet rent



How to Apply

Pre-Application

- 2 pages in length + a cover sheet with submission instructions
- Only one pre-application needed per household
- Pre-app includes:
 - Head of Household information
 - Household Members (name, DoB, Sex, Relationship, SS, ID etc.)
 - Annual Household Income
 - Employment/Wages, SSI, SSD, Public Assistance, Child Support, Pension, Other income
 - Additional Questions

Pre-Application

- Pre-apps are available:
 - For download on **TrumanSquare.com**
 - Paper copies are available:
 - Brochure box located outside of the entrance to Residence at Roosevelt Park: 1 Roosevelt Drive, Edison, NJ 08837
- Need one mailed or emailed to you, please call or email
- Pre-apps **MUST BE MAILED** to the PO Box listed on cover sheet

Pre-Application

- All Pre-applications for the lottery must be postmarked by **4/30/20!**
- Must be completed in its entirety to be accepted into the lottery (one per household).
- Must include **Application Fee**: \$25 money order for each adult household member, payable to: Truman Square
- **PLEASE NOTE:** The pre-application gives us permission run credit & criminal screening.



What comes next?

Lottery: May 2020

Once all eligible lottery applicants have been entered into the Master Lottery Log, a random sort will be completed within the document for each bedroom size.

After the lottery has taken place, all applicants will be contacted in writing within 30 days informing them of where their placement is on the lottery list based on bedroom size.

Lottery: May 2020

If an applicant selected in the lottery does not rent a unit, the unit shall be offered to the next highest lottery ranked appropriately sized household on the list.

Full Application

- Following the lottery, if selected and accepting a unit, you will be called in for an interview and will complete the full application.
- 8 pages in length

Completed Applications MUST be returned to:
Address: _____
Phone: _____
Fax: _____
Email: _____
TTY: 800.545.1833 x648



To be completed by office staff:
Application Number _____
Date Application Rec'd _____
Time Application Rec'd _____
Initials of Staff Member _____

RESIDENCY APPLICATION Affordable Housing Programs

CONSUMER NOTICE FOR TENANTS THIS IS NOT A CONTRACT

(Not to be used when licensee is subagent for the landlord, agent for the tenant, or transaction licensee)
Licensee hereby states that with respect to this property, licensee is acting in the following capacity: (check one)

- ☐ Owner/Landlord of the Property;
☐ A direct employee of the Owner/Landlord; OR
☐ An agent of the Owner/Landlord pursuant to a property management or exclusive listing agreement.

I acknowledge I have received this Notice: _____
(Consumer) (Date)

We certify that we have provided this Notice: Pennrose Management Company _____
(Consumer) (Date)

- For acceptance of this Residency Application, every question below must be answered with detail in the space provided.
• Information you provide will be used strictly to determine your eligibility for housing in this Community and will be handled confidentially.
• The Resident Selection Plan and Screening Criteria, which provides specific detail regarding application processing as well as additional guidance regarding waiting preferences, if any, is posted in the rental office. A copy is also available upon request.

What size of apartment do you wish to apply for? ☐ Eff ☐ 1BR ☐ 2BR ☐ 3BR ☐ 4BR ☐ 5BR ☐ 6BR

HEAD OF HOUSEHOLD INFORMATION (Use Legal Name)

Last Name: _____ First: _____ Middle: _____

Home Telephone #: _____ Alternate Telephone #: _____

Cell Telephone #: _____ Email address: _____

Current Address: _____
(Street)

(City/State/Zip)

Marital Status: ☐ Married ☐ Widowed ☐ Divorced ☐ Single ☐ Separated

Driver License #: _____ State Issued: _____

How did you hear about our community? ☐ Signage ☐ Newspaper ☐ Property Website ☐ Internet
☐ Other _____

We are required to report the Race and Ethnic Origin of all household members. Please assist us in supplying accurate information by answering the following questions. This question is optional, and your response will have NO bearing on your eligibility and shall not be used to discriminate against you in any way. If you choose not to furnish it, enter (D) in the appropriate spaces below and the owner will notate your file that you did not wish to complete.

KEY CODES: (D)-Do not wish to Disclose

RACE: (W)-White, (B)-Black, (I)-American Indian/Alaskan Native, (P)-Native Hawaiian/Other Pacific Islander, (A)-Asian

ETHNICITY: (H)-Hispanic, (NH)-Non Hispanic

HOUSEHOLD COMPOSITION

(List below the legal names of all persons who will reside in the apartment)

Legal Name (First, MI, Last)	Sex (F/M)	Birth Date	Relationship	Social Security Number	Race (key code letter from above)	Ethnicity (key code letter from above)

Do you or does any applicant household member:

- Have the ability to meet the requirements of tenancy? ☐ Yes ☐ No
- Qualify for a dwelling available only to persons with handicaps or to persons with a particular type of handicap? ☐ Yes ☐ No
- Qualify for a priority available to persons with handicaps or to persons with a particular type of handicap? ☐ Yes ☐ No

You may make a request for a reasonable accommodation and/or reasonable modification with the Management office, which shall be evaluated in accordance with relevant law.

Are there any absent household members who under normal conditions would live with you or plan on living with you in the future? ☐ Yes ☐ No
Name & Relationship: _____

Are there any family members confined to a nursing home or hospital on a permanent basis? ☐ Yes ☐ No
Name & Relationship: _____

Will you or any ADULT household member require a live-in care attendant to live independently? ☐ Yes ☐ No
Name & Relationship: _____

Do you anticipate any changes to your household composition in the next 12 months? ☐ Yes ☐ No
Name & Relationship: _____

• Household composition

- Previous residences for the past 5 years

RESIDENCE HISTORY/REFERENCES
Please list your address(es) of residency for the past five (5) years.
Use backside of this page if you need more space.

RESIDENCE HISTORY:

Present Residence	Rent <input type="checkbox"/> Own <input type="checkbox"/>
Name of Apartments or Landlord Name	
Address	
City, State, Zip	
Contact Name and Phone Number	
Dates of Residency	From: To: Rent/Mortgage \$
Reason for leaving	
Previous Residence	Rent <input type="checkbox"/> Own <input type="checkbox"/>
Name of Apartments or Landlord Name	
Address	
City, State, Zip	
Contact Name and Phone Number	
Dates of Residency	From: To: Rent/Mortgage \$
Reason for leaving	
Previous Residence	Rent <input type="checkbox"/> Own <input type="checkbox"/>
Name of Apartments or Landlord Name	
Address	
City, State, Zip	
Contact Name and Phone Number	
Dates of Residency	From: To: Rent/Mortgage \$
Reason for leaving	

Please list all states resided in by all household members:

- Additional income information

INCOME INFORMATION
(Include all GROSS income received and/or anticipated for all household members, including minors, in the next 12 months.)

Do YOU or ANYONE in your household receive OR EXPECT to receive income from?

- Employment wages and/or salaries?
(include overtime, tips, bonuses, commissions and/or payments received in cash) ☐ Yes ☐ No

Household Member	Name of Employer	Amount
		per _____
		per _____
- Self-employment?
(include overtime, tips, bonuses, commissions and/or payments received in cash) ☐ Yes ☐ No

Household Member	Type of Business	Amount
		per _____
		per _____
- Regular pay from the Military? ☐ Yes ☐ No

Household Member	Branch	Amount
		per _____
		per _____
- Unemployment Benefits, Worker Compensation, and/or VA Benefits? ☐ Yes ☐ No

Household Member	Name of Check Issuer	Amount
		per _____
		per _____
- Cash Assistance from Dept. of Public Welfare? ☐ Yes ☐ No

Household Member	Name of Check Issuer	Amount
		per _____
		per _____
- Regular payments from an accident settlement, insurance settlement, and/or any other settlement? ☐ Yes ☐ No

Household Member	Source	Amount
		per _____
		per _____
- Regular, recurring gifts – cash or noncash- and/or payments made on your behalf from anyone outside of your household? ☐ Yes ☐ No

Household Member	Source	Amount
		per _____
		per _____

Child support payments that are received shall be included as income whether or not there is a court order awarding payment. Child support amounts awarded by the courts but not received can be excluded only when the applicant/resident certifies that the payments are not being made and further documents that all reasonable legal actions to collect amounts due, including filing with the appropriate courts or agencies responsible for enforcing payments, have been taken.

1. Do you have full or at least 50% custody of your child/children? ☐ Yes ☐ No
2. Have you been awarded child support by court order or paid directly to you? ☐ Yes ☐ No
If yes, please complete the following:

Child's Name (First and Last)	\$ Amount	Frequency	Source (Name of Court/Agency or Person)	Court Ordered	Payment received as agreed	If No, have legal actions been taken
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

- Social Security, SSI, and/or any other payments from the Social Security Administration? ☐ Yes ☐ No
Household Member SSA Office Amount

per _____
per _____

- Retirement benefits, Pension benefits, and/or Periodic Annuity Payments? ☐ Yes ☐ No
Household Member Source Amount

per _____
per _____

- Do you or any other household members expect any changes to your income in the next 12 months? ☐ Yes ☐ No
Household Member Source Amount

per _____
per _____

- Are you or any other ADULT household members claiming zero income? ☐ Yes ☐ No
(You will be required to certify how you pay for living expenses and other items)

If yes, please list household members claiming zero income _____

- Child support, Social Security, retirement accounts, etc.

- Asset information

ASSET INFORMATION

Include all assets currently held and anticipated to be received in the next 12 months by all household members INCLUDING minor children. Please include the anticipated income derived from current or future asset)

Do YOU or ANYONE in your household hold:

- Checking Account, Direct Express Card, and/or EBT Card? (answer "no" if card is used exclusively for food stamps) ☐ Yes ☐ No

<u>Household Member</u>	<u>Item</u>	<u>Average 6 mo. Bal.</u>
_____	_____	_____
_____	_____	_____

- Savings Account ☐ Yes ☐ No

<u>Household Member</u>	<u>Item</u>	<u>Value</u>
_____	_____	_____
_____	_____	_____

- Certificates of Deposits, Money Market accounts, Annuities and/or Treasury Bills? ☐ Yes ☐ No

<u>Household Member</u>	<u>Source</u>	<u>Amount</u>
_____	_____	per _____
_____	_____	per _____

- Stocks, Bonds, Securities, and/or Trust Fund? ☐ Yes ☐ No

<u>Household Member</u>	<u>Source</u>	<u>Amount</u>
_____	_____	per _____
_____	_____	per _____

- IRA, 401(k), Keogh, and/or other retirement accounts? ☐ Yes ☐ No

<u>Household Member</u>	<u>Source</u>	<u>Amount</u>
_____	_____	per _____
_____	_____	per _____

- Personal Property held as an investment? ☐ Yes ☐ No
(This includes paintings, coin or stamp collections, artwork, collector or show cars and antiques, and does not include your personal belongings, such as your car, furniture, or clothing.)

<u>Household Member</u>	<u>Property</u>	<u>Value</u>
_____	_____	_____

- Additional asset information

- Whole Life and/or Universal Life Insurance Policy? (answer "no" if Term Life Insurance only) ☐ Yes ☐ No

Household Member	Financial Institution	Value	Income
			per
			per

- A Safe Deposit Box and/or Cash on Hand? ☐ Yes ☐ No

Household Member	Financial Institution	Value

- Real Estate, rental property, land contracts/contract for deeds, and/or other real estate holdings? ☐ Yes ☐ No
(This includes your personal residence, mobile homes, vacant land, farms, vacation homes, timeshares, or commercial property)

Household Member	Mortgagor	Value	Income
			per
			per

- Have you or has anyone in your household disposed of any business or asset for LESS than fair market value during the past two (2) years? ☐ Yes ☐ No
(Given away or sold something of value for less than its worth)

STUDENT STATUS
Please identify the student status of each household member 18 years of age or older:

Name (First, Last)	Student Y/N	Full Time or Part Time? F/P	Previous in THIS Calendar Year (List Dates of Attendance)	Current in THIS Calendar Year (List Dates of Attendance)	Future in THIS Calendar Year (List Dates of Attendance)	Name of School

ADDITIONAL REQUIRED INFORMATION

- Did you or any household member file a federal or state tax return last year? ☐ Yes ☐ No

If yes, who? (list all) _____

- Is your household currently receiving assistance from HUD? (tenant based or project based) ☐ Yes ☐ No

- Will this be your sole place of residency? ☐ Yes ☐ No
- Are you or any member of your household subject to a lifetime state sex offender registration program in any state? ☐ Yes ☐ No
(Failure to respond to this question may jeopardize the approval of your application.)

If, upon preliminary review, your application appears to be eligible based upon the information you have provided, you will be contacted when we believe we may have an apartment available. This does not indicate that you will be offered an apartment. We will process your application in accordance with the Resident Selection Criteria. If this establishes that your household is not eligible or not qualified, your application will be denied.

We do business in Accordance with the Federal Fair Housing Law. We will not discriminate against any person because of race, color, religion, sex, handicap, familial status, elderliness or national origin (The Fair Housing Amendment Act of 1988). In compliance with Section 504 regulations, we do not discriminate on the basis of handicapped status in the admission or access to, or treatment, or employment in, our federally assisted programs and activities. Management will consider requests from individuals with disabling conditions or mobility impairments for reasonable accommodations in policies, practices or facilities.

Pennrose Management Company does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. The person named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988).

Kathi Garrone - 504 Coordinator
1301 North 31st Street
Philadelphia PA 19121
Email: kgarrone@pennrose.com

I/We understand that management is relying on this information to prove my household's eligibility for the Housing Program(s) applicable to this Community. I/We will provide all necessary information including source names, addresses, phone numbers, and account numbers where applicable and any other information required for expediting this process. I/We understand that my occupancy is contingent on meeting management's resident selection criteria and the Program requirements applicable to this Community.

I/We authorize management to obtain one or more "consumer reports" and/or "investigative consumer reports" as defined in the Fair Credit Reporting Act about me/us from a consumer reporting agency or other source for tenancy or rental purposes. These reports may contain information about me/us relating to my/our criminal history, credit history, social security verification, rental history, or other background checks. These reports will be used only for tenancy or rental purposes.

I/We understand that it is our responsibility to contact the Management Office if any of the information provided on this application changes, including but not limited to, changes in mailing address, phone numbers, household composition, income, asset, or student information.

I/We declare that all above information and representations contained herein are to the best of my/our knowledge and belief true and correct. I/We understand that providing false information or making false statements may be grounds for denial of my application and may result in criminal penalties.

I/We understand that any Lease Agreement I/we enter into for an apartment may be cancelled at any time without liability by the Owner or its Agent if any information or representation upon which they relied and made in the application is misleading, incorrect or untrue regardless of my/our intent.

I/We certify that if approved for occupancy, the unit I/we occupy shall be my/our only residence.

WARNING: "Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).


- All Household Members 18 years of age or older must review this application and then sign below:

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____




If you are not selected by the lottery for an apartment in Phase I (85 units), you can be selected for Phase II (85 units).

Applicants selected for Phase II will be notified later this year. Occupancy is slated for early 2021.

Waitlist

If you are a qualified applicant and not selected for an apartment in either phase, you will be added to the waitlist for Truman Square.



We will experience high volumes of phone and email traffic. We appreciate your patience as our team works to respond to phone and email inquiries as soon as possible!



THANK YOU!

PENNROSE

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