

Thank you for your interest in residing at Residence at Roosevelt Park.

# PRE-APPLICATION INSTRUCTIONS:

- Applicants must be age 62+ to qualify.
- Pre-application MUST be filled out in its entirety to be eligible for housing.
- Pre-application can be returned to the Management Office during business hours
   (with prior notice) or via US MAIL and should be addressed to:
   Residence at Roosevelt Park, 1 Roosevelt Drive Edison, NJ 08837
- Units require a non-refundable \$25 application fee per adult household member in the form of a money order or cashier's check.
- The following income restrictions apply:

Unit Size	Household Size	Qualifying Household Income Range	% AMI	Monthly Rent	
1 Bedroom	1 person	\$38,160 - \$50,050	Γ.Ο0/	ć1 272	
	2 people	\$38,160 - \$54,250	50%	\$1,272	
	1 person	\$46,200 - \$60,060	600/	Ć1 F10	
	2 people	\$s46,200 - \$65,100	60%	\$1,540	
2 Bedroom	1 person	\$46,560 - \$47,500	F.00/	Ć1 FF2	
	2 people	\$46,560 - \$54,250	50%	\$1,552	
	1 person	\$55,320 - \$57,000	C00/	64.044	
	2 people	\$55,320 - \$65,100	20 - \$65,100	\$1,844	

### FOR MORE INFORMATION:

ResidenceAtRooseveltPark.com | RooseveltPark@Pennrose.com | T: 732.419.8884 | F: 732.626.6575 | TTY:711







Address: 1 Roosevelt Drive

Edison, NJ 08837

Phone: 732.419.8884 Fax: 732.626.6575

Email: rooseveltpark@pennrose.com

TTY: 711

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

			HEAD OF HO	USEHOLI	D		M F
NAME:					_ SSN:		
(First)	(Mid	ldle Initial	) (Last)				
CURRENT ADDRESS:					_ HOME #:		
	(House #)			(Apt. #)			
					CELL #:		
City)	(State)		(Zip Co	ode)	WORK #:		
MAIL:					_ D.O.B:		
low did vou hear ak	oout us?				DRIVER LICENSE	STATE:	
,						NUMBER:	
	,	A	NNUAL HOUSE	HOLD INC	COME		
Employment/W	ages					\$	
Social Security In	ncome					\$	
Social Security D	isability Income					\$	
Public Assistance	e (Welfare/TANF	-)				\$	
Child Support						\$	
Pension						\$	
Other Income (F	Please Specify).					\$	







### **Preferences for Determining Waiting List Position (if applicable)**

Is the Head of Household or Spouse 62 years of age or older or disabled?  Are you currently employed?  Are you a student or recent graduate of an educational or training program?  Y N  Were you involuntarily displaced due to a natural disaster?  Are you homeless?  Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)  If yes above, please circle features required:  Unit for mobility impaired  Unit for visually impaired  Unit for hearing impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title of Section 1001 of the US Code.  I,					
Are you a student or recent graduate of an educational or training program?  Are you a student or recent graduate of an educational or training program?  Y N  Were you involuntarily displaced due to a natural disaster?  Are you homeless?  Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)  If yes above, please circle features required:  Unit for mobility impaired  Unit for visually impaired  Unit for hearing impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title of Section 1001 of the US Code.  I,, hereby give my permission for a credit and criminal background check, which is part of the application process.	Do you or any member of your hous	ehold have a DISABILITY?		Y	N
Are you a student or recent graduate of an educational or training program?  Were you involuntarily displaced due to a natural disaster?  Are you homeless?  Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)  If yes above, please circle features required:  Unit for mobility impaired  Unit for visually impaired  Unit for hearing impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,	Is the Head of Household or Spouse 62 years of age or older or disabled?			Υ	N
Were you involuntarily displaced due to a natural disaster?  Are you homeless?  Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)  If yes above, please circle features required:  Unit for mobility impaired  Unit for visually impaired  Unit for hearing impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,, hereby give my permission for a credit and criminal background check, which is part of the application process.	Are you currently employed?			Υ	N
Are you homeless?  Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)  If yes above, please circle features required:  Unit for mobility impaired  Unit for visually impaired  Unit for hearing impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,	Are you a student or recent graduate of an educational or training program?			Υ	N
Do you require a unit with special features? (e.g. unit for mobility impaired, visually impaired, hearing impaired, walk-in shower, grab bars, no steps, etc.)  If yes above, please circle features required:  Unit for mobility impaired  Unit for visually impaired  Unit for hearing impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,	Were you involuntarily displaced due to a natural disaster?			Υ	N
impaired, walk-in shower, grab bars, no steps, etc.)       Y       N         If yes above, please circle features required:       Unit for mobility impaired       Unit for visually impaired       Unit for hearing impaired         Grab bars       No steps       Other:         Describe:    I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code. I,	Are you homeless?			Υ	N
Unit for mobility impaired  Grab bars  No steps  Other:  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 2 Section 1001 of the US Code.  I,			aired, visually impaired, hearing	Y	N
Grab bars  Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,	If yes above, please circle features	required:			
Describe:  I hereby certify that the above is true and correct and complete to the best of my knowledge. I understand that any false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,	Unit for mobility impaired	Unit for visually impaired	Unit for hearing impaired		
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false statement or misrepresentation will be grounds for expulsion from the program and/or prosecution under Title 1 Section 1001 of the US Code.  I,, hereby give my permission for a credit and criminal background check, which is part of the application process.	Describe:				.1
I,, hereby give my permission for a credit and criminal background check, which is part of the application process.  I,, hereby give my permission for a credit and criminal background check, which is part of the application process.	check, which is part of the application  I,  check, which is part of the application  I,	process, hereby give my perm process, hereby give my perm	nission for a credit and criminal back	ground	
Applicant Signature: Date:	Applicant Signature:		Date:		
Applicant Signature: Date:	Applicant Signature: Date:				
Applicant Signature: Date:	Applicant Signature:		Date:		
Types of Program Assistance (For Office Use ONLY)  **Important: You must notify us promptly should a information on this application change  Tax Credit 50% 60% May 202	Tax Credit 50%	inform			







#### NJ Fair Chance in Housing Act

#### **Disclosure Statement**

New Jersey's Fair Chance in Housing Act, N.J.S.A. 46:8-52 to 64 (FCHA), limits a housing provider's ability to consider a person's criminal history in deciding whether to extend an offer or whether to rent a home after extending an offer.

Before making a conditional offer of housing, Pennrose may consider only whether an applicant has a conviction for the manufacture or production of methamphetamine on the premises of federally assisted housing, or whether an applicant has a lifetime registration requirement under a State sex offender registration program. Pennrose will not consider, or request from an applicant or any other person or entity, any other information about an applicant's criminal history as part of the application process until and unless a conditional offer of housing has been made.

After extending a conditional offer of housing, Pennrose intends to review and consider an applicant's criminal record in determining whether to rent a home, in accordance with the FCHA and its accompanying rules.

## Pennrose will not, either before or after the issuance of a conditional offer, evaluate or consider any of the following criminal records:

- (1) Arrests or charges that have not resulted in a criminal conviction;
- (2) Expunged convictions;
- (3) Convictions erased through executive pardon;
- (4) Vacated and otherwise legally nullified convictions;
- (5) Juvenile adjudications of delinquency; and
- (6) Records that have been sealed.

#### Pennrose may consider, after the issuance of a conditional offer, a criminal record that:

- Resulted in a conviction for murder, aggravated sexual assault, kidnapping, arson, human trafficking, sexual assault, endangering the welfare of a child in violation of N.J.S.2C:24-4(b)(3);
- Resulted in a conviction for any crime that requires lifetime state sex offender registration;
- Is for any 1<sup>st</sup> degree indictable offense, or release from prison for that offense, within the past 6 years;
- Is for any 2<sup>nd</sup> or 3<sup>rd</sup> degree indictable offense, or release from prison for that offense, within the past 4 years; or
- Is for any 4<sup>th</sup> degree indictable offense, or release from prison for that offense, within the past 1 year.

For more information about how these rules apply, please refer to the resources at https://www.njoag.gov/about/divisions-and-offices/division-on-civil-rights-home/fcha/.

Pennrose may withdraw a conditional offer based on your criminal record only if Pennrose determines, by a preponderance of the evidence, that the withdrawal is necessary to fulfill a substantial, legitimate, and nondiscriminatory interest.

If Pennrose utilizes any vendor or outside person/entity to conduct a criminal record check on their behalf Pennrose will take reasonable steps to ensure that the vendor or outside person/entity conducts the criminal record check consistent with the requirements of the FCHA and rules. Specifically, if Pennrose receives a criminal history inquiry conducted by a vendor or outside person or entity that is conducted in violation of the FCHA in that it reveals a record that is not permitted to be considered under the FCHA, Pennrose must show that it did not rely on that information in making a determination about your tenancy.







If you are subjected to the withdrawal of a conditional offer of housing due to criminal history, you have the right to request and receive the materials relied upon by Pennrose in making this determination.

You have the right to dispute, within (10) days of receiving this statement, the relevance and accuracy of any criminal record, and to offer evidence of any mitigating facts or circumstances, including but not limited to your rehabilitation and good conduct since the criminal offense. You may also provide evidence demonstrating inaccuracies within aspects of your criminal record which may be considered under the FCHA, or evidence of rehabilitation or other mitigating factors to Pennrose at any time, including after the ten days.

Any action taken by Pennrose in violation of the process laid out in this statement may constitute a violation of the FCHA. If you believe that any owner, agent, employee, or designee of Pennrose has violated any of the above requirements, you may contact the New Jersey Division on Civil Rights at <a href="https://www.NJCivilRights.gov">www.NJCivilRights.gov</a> 1-866-405-3050. A complaint must be filed with DCR within 180 days of the allegedly discriminatory conduct. You cannot be subjected to retaliation for filing a complaint or for attempting to exercise your rights under the FCHA.

DCR has several fair housing fact sheets available at <a href="https://www.nj.gov/oag/dcr/housing.html">https://www.nj.gov/oag/dcr/housing.html</a>, or available for pickup in any of DCR's four (4) regional offices.

31 Clinton Street, 3 <sup>ra</sup> Floor Newark, NJ 07102	5 Executive Campus Suite 107, Bldg. 5 Cherry Hill, NJ 08002	
1601 Atlantic Avenue, 6 <sup>th</sup> Floor Atlantic City, NJ 08401	140 East Front Street, 6 <sup>th</sup> Floor Trenton, NJ 08625	
Prospective Tenant Signature	 Date	





