

**Borough of Tinton Falls
Affordability Assistance Program**

Application

Name: _____ Date: _____

Address of Property: _____

Type of Affordability Assistance Funding Requested:

- Security Deposit Assistance
- First Time Homebuyer Assistance
- Housing Association Fee Assistance

This application must be fully completed so that it may be accepted and processed. If you require assistance, please call the Borough's Affordable Housing Administrative Agent, CME Associates, via email (pgallagher@cmeusa1.com) or by phone at 732-462-7400 x 1030.

Applications for funds from the Tinton Falls Affordability Assistance Program will be awarded on a first-come, first-serve basis according to the following criteria:

1. There is funding available in the Affordable Housing Trust Fund;
2. The applicant is the current owner, buyer, or renter of a deed restricted affordable dwelling in the Borough of Tinton Falls and maintains this residence as their primary residence;
3. The applicant is income certified as a low or moderate income household.

For further information on eligibility and funding, please see the Affordability Assistance Manual on file in the Borough Clerk's office.

Amount of Funding Requested: \$ _____

Please include the following documentation with any application for affordability assistance funding:

1. Copy of the letter/bill from the Home Owners Association indicating amount owed;
2. The following information must be provided in order to income qualify you for assistance:
 - Proof of current income - provide 4 current and consecutive paystubs
 - Proof of other income: Pension, Social Security, Unemployment Compensation, Child Support, Alimony, Disability, etc.
 - 2019 Federal and State Tax Returns.

CERTIFICATION

I hereby certify that the above information contained herein is true and accurate to the best of my knowledge. I further understand that the Borough of Tinton Falls and its Administrative Agent, CME Associates, are relying on this information to determine my eligibility for affordability assistance. I further certify that the copies of the documents attached to this application are true and accurate copies of the original documents.

I understand all documents submitted will become the property of Borough of Tinton Falls and will not be returned.

I further certify that I intend to personally occupy the unit as my primary residence except for reasonable periods of vacations or illness. I know that it would be illegal to rent or sublet the unit. I understand that only the parties listed on this application may reside in the affordable housing unit.

I authorize CME Associates, the Borough of Tinton Falls and their agents to check for accuracy on any and all statements and representations made in this application. This may include calls to employers to verify income, contact banks, etc.

Signature of Applicant

Signature of Co-Applicant

Date

Date

