

Township of Delaware Township
Hunterdon County, New Jersey

**Accessory Apartment Program
Handbook**

Prepared by:

Delaware Township Affordable Housing

MARCH 2015

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DELAWARE TOWNSHIP, HUNTERDON COUNTY
ACCESSORY APARTMENT PROGRAM HANDBOOK
March 2015

1.0 INTRODUCTION

The Fair Housing Act (N.J.S.A. 52:270-301 et seq.), enacted by the New Jersey State Legislature in 1985, created the Council on Affordable Housing (COAH) within the Department of Community Affairs. COAH is responsible for determining each municipality's allocation of low and moderate income housing, establishing guidelines for implementing the Fair Housing Act and evaluating proposed municipal compliance strategies.

COAH divided the state into six housing regions and established a methodology for municipalities to address a fair share obligation. Delaware Township is located within the West Central region which includes the counties of Hunterdon, Middlesex and Somerset.

NOTE: On June 29, 2011 Governor Christie issued Reorganization Plan No. 001-2001 that abolished the Council on Affordable Housing and transferred its functions, powers and duties to the Office of the Commissioner of the Department of Community Affairs. Delaware Township continues to work toward providing low and moderate income housing opportunities. All references to COAH revert to the DCA.

Delaware Township's Accessory Apartment Ordinance

The Township adopted an accessory apartment ordinance that is amended to reflect the COAH regulations (see Appendix 1). The ordinance provisions meet all COAH requirements. Property owners can create an affordable housing accessory apartment and/or convert an existing accessory apartment into an affordable housing accessory apartment.

2.0 FINANCIAL ASSISTANCE OFFERED

The Township will provide home improvement grants to owners of properties in which accessory apartments are to be created. The subsidy must be utilized to create the accessory apartment. Grants of \$20,000 are available to subsidize the cost of creating an accessory apartment. In order to receive financial assistance from the Township, the owner of the unit must submit the Financial Assistance Application (Appendix 5) and certify the following:

- a. Rent on the family and moderate accessory apartment will be consistent with COAH regulations;
- b. The tenant(s) to occupy the moderate accessory apartment will meet the established income limitations for a moderate income household(s) for Delaware Township's housing region; and

c. A 10-year affordability control will be imposed via a deed restriction. (Appendix 6)

The grant money for renovation costs and permits will be provided to the accessory apartment owner as follows:

1. Twenty percent (\$4,000.00) will be provided once the deed restriction is recorded (Appendix 6).
2. Twenty percent (\$4,000.00) will be provided at the issuance of the building permit.
3. Twenty percent (\$4,000.00) will be provided after the project passes the framing inspection.
4. Twenty percent (\$4,000.00) will be provided at the issuance of the Certificate of Occupancy or the Certificate of Approval.
5. Twenty percent (\$4,000.00) will be provided when the lease is executed with the prospective tenant.

NOTE: Any accessory apartment owner who fails to complete construction of the unit and obtain a Certificate of Occupancy or Certificate of Approval shall be required to reimburse the Township for all funds paid to the owner.

Delaware Township reserves the right to phase approval of subsidized affordable housing accessory apartments according to the following schedule:

- 2012 – up to three units;
- 2013 – up to two units;
- 2014 – up to two units;
- 2015 – up to two units; and
- 2016 – up to one unit.

Applications will be accepted on a first come, first served basis. The Township Administrative Agent shall determine the completeness of each application.

3.0 TENANT INCOME CRITERIA

For a household to be eligible to lease an accessory apartment unit, combined current household income from all sources, including assets, must not exceed the amount established under COAH's regional income limits. The current income limits are in Appendix 2.

4.0 ELIGIBLE ACCESSORY APARTMENT IMPROVEMENTS

Pursuant to the Township's ordinance, accessory apartments will have a minimum of two rooms and provide living, sleeping, cooking and bathroom facilities. Direct access to the outside or to a hall with direct access to the outside must be provided. The egress door must not detract from the character of the exterior facades of the house. All improvements must be in full compliance with

applicable health codes as per the Hunterdon County Health Department and all construction codes per the Delaware Township Construction Official.

5.0 APPLICATION AND PROCEDURES

An owner should first obtain a copy of the Township's accessory apartment Ordinance #2009-20LU (Appendix 1) and review its requirements.

The owner should then schedule a meeting with the Delaware Township Zoning Officer and Construction Official to review the construction aspects of the proposed accessory apartment unit and to identify any permits that will be needed to complete the work. The owner should also meet with the Township's Municipal Housing Liaison and Administrative Agent to register the unit and review all requirements relating to rent levels and income eligibility of prospective tenants.

The application must include the following:

1. All information required by the Township's Application Checklist #4 (Appendix 3)
2. Homeowner's Application Form (Appendix 4);
3. Existing floor plans to scale, with rooms labeled as to use, i.e. kitchen, bedroom, etc. Plans must be prepared or sealed by a NJ licensed architect or engineer.
4. Current property survey showing existing conditions, including the location and condition of the septic system and the well location subject to review and approval by the Township Zoning Officer. An applicant may submit an Affidavit of No Change if there have been no improvements without permits and no improvements that violate the lot lines.

The next step for the interested owner is to apply to the Delaware Township Construction Official for a construction permit to begin the required work on the accessory apartment.

6.0 CODE ENFORCEMENT STANDARDS

Once all work on the accessory unit has been completed and inspected by the Township Construction Office, and the owner has satisfied all prior approvals, including, but not limited to septic approval from the Hunterdon County Health Department, the Delaware Township Construction Official then issues a Certificate of Occupancy or a Certificate of Approval.

7.0 SELECTION OF TENANT

The final step in the process is the selection of a tenant to occupy the accessory apartment. Tenants will be selected from the waiting list established by the Township. Owners shall not select tenants who are not approved by the Delaware Township Administrative Agent.

Applications for accessory apartment occupancy are known as Tenant Application and Income Verification Forms (Appendix 7).

If no current waiting list is available, Delaware Township's Administrative Agent will place advertisements in the newspapers designated in the Affirmative Marketing Plan as well as conduct community outreach as per the Affirmative Marketing Plan. As applications are received by the Administrative Agent, each application will be date stamped and checked preliminarily to see if the prospective household is moderate income based on household size. If the household is not eligible, a letter of ineligibility will be sent notifying the applicant. If the household appears to be income eligible, a letter of preliminary eligibility is sent. Once there are sufficient applications for a lottery, a random drawing will take place at the Delaware Township Municipal Building. In attendance will be the Administrative Agent, Municipal Housing Liaison and one other public official of the Township.

When the Administrative Agent receives notice that an accessory apartment will become available, the Administrative Agent will contact the applicants matching the household size and income category to the unit size and income category in the order randomly selected to submit a final application with appropriate documentation within 10 days of receipt of the letter.

When an accessory apartment is ready for occupancy, the Administrative Agent will provide the owner with the name of the first prospective household randomly selected and determined eligible and the owner may accept or reject the household. The owner may not discriminate in renter selection based on the Affirmative Marketing Plan but consideration may be given to owner prohibition of smoking, pets, loud music, etc.

If the owner rejects the first prospective household, then the Administrative Agent forwards the next name on the qualified applicant list and continues to do so until the accessory apartment is rented. A prospective household may reject up to two units before losing its original position in the list. The prospective household that is not selected due to owner discretion is returned to the list in the original order.

It is understood that the first prospective household must be able to occupy the unit upon selection. If that is not possible, then the next prospective household in line is offered the unit.

It is recommended that the owner check references and request a credit report. Finally, the tenant will execute a Form of Certificate for Applicants Certified To Rental Unit (Appendix 8) and the owner and tenant will execute a lease agreement (Appendix 9). Then, the selected household occupies the accessory apartment.

8.0 CONTINUED OCCUPANCY

The owner of the accessory apartment must submit a copy of the initial lease and annual lease renewals within ten days of execution.

9.0 VACANCY

As soon as the owner of the accessory apartment learns that the tenant intends to vacate the accessory apartment, he must immediately notify the Administrative Agent who will then follow Township procedures outlined in this Handbook to fill the vacancy.

10. UNIT AFFORDABILITY GUIDELINES

COAH regulations require that rents on accessory apartments be set at 60 percent of median income, including utilities, and that rents be based on the number of bedrooms. In accordance with COAH regulations, rents on accessory apartments are affordable as follows:

1. One bedroom units are affordable to 1.5 person households;
2. Two bedroom units are affordable to three person households.

COAH regulations require controls on affordability for any accessory apartment created within the Township addressing a growth share obligation to remain in effect for 10 years. The rent may be adjusted annually based on the COAH percentage increase.

11.0 AFFIRMATIVE MARKETING

The accessory apartment program is governed by COAH's rules. However, the Uniform Housing Affordability Controls (UHAC) sets forth a procedure for affirmative marketing of the accessory apartments. The Township's Affirmative Marketing Plan is attached as Appendix 10 to this document. As part of the Affirmative Marketing Plan, the Township has created an advertisement for the accessory apartment program (Appendix 11).

Appendix 1 Accessory Apartment Ordinance

ORDINANCE #2009-20LU AN ORDINANCE TO PROVIDE FOR THE CREATION OF ACCESSORY APARTMENTS IN CONJUNCTION WITH THE DELAWARE TOWNSHIP AFFORDABLE HOUSING PROGRAM.

See Ordinance.

Appendix 2

COAH's Regional Income Limits

Updated Annually – see attached

Accessory Apartment Application Checklist

A zoning permit and a construction are required to create an accessory apartment.

1. To obtain a zoning permit the following must be submitted to the Township Zoning Officer for his review and approval:

- Completed zoning permit application.
- Two (2) copies of the property survey showing the improvements.
- Two (2) sets of building plans signed and sealed by a NJ licensed architect or engineer.
- A copy of homeowner's association approval (if applicable)
- When a new structure is proposed, a letter of interpretation (LOI) from NJDEP may be required.
- Verification whether the lot is served by public sewer, on-site septic, public water or well. Their locations must be shown on the survey.
- Plot plan showing any new LP or oil tanks, or underground storm drainage being installed.
- Hunterdon County Health Department approvals for well and septic.
- Hunterdon County Soil Conservation District approval, if required.
- D&R Canal Commission approval, if required.

2. To obtain a construction permit the following must be submitted to the Township Construction Official for his review and approval:

- Proof of prior approvals listed in Ordinance 2009-20LU accessory apartments.
- Two copies of building plans signed and sealed by a NJ licensed architect or engineer (same two copies presented to Zoning Officer).
- Completed permit applications indicating that all work is to be conducted by NJ licensed contractors for all subcodes.
- Calculations indicating that the existing or proposed utilities are properly sized, including electric, water, sewer, gas and HVAC systems.
- Homeowner Warranty, where applicable.

3. The home owner shall pay all required permit fees.

**DELAWARE TOWNSHIP ACCESSORY APARTMENT PROGRAM
HOMEOWNER'S APPLICATION**

Homeowner:
Address:
Block: Lot:

I am the owner of the property described above. I wish to construct an accessory apartment in my house or renovate an existing apartment into an affordable housing accessory apartment. I understand and agree that:

- A. I shall comply with all applicable ordinances, rules and regulations.
- B. My accessory unit may be occupied only by a moderate income household which has been deemed qualified by the Township's designated Administrative Agent.
- C. My property is located in a single family residential zone district. If I do not comply with the applicable ordinances, rules and regulations, the accessory apartment will have to be removed.
- D. I cannot start construction on the accessory apartment until a deed restriction is recorded in the Hunterdon County Clerk's Office and proof of recording is submitted. (Appendix 6)
- E. I cannot start construction on the accessory apartment until a construction permit is issued.
- F. No one can occupy the accessory apartment until a Certificate of Occupancy is issued and the Delaware Township Administrative Agent has approved the prospective tenant.
- G. These restrictions are binding upon me, my successors, heirs and assigns.
- H. I agree to provide a copy of the annual lease to Delaware Township within ten days of execution.

I certify that all the information contained in my application is true.

Signature

Sworn to and subscribed before me
This _____ day of _____, 20__.

Notary Public

**DELAWARE TOWNSHIP ACCESSORY APARTMENT PROGRAM
FINANCIAL ASSISTANCE APPLICATION**

Applicant: _____

Address: _____

I/We hereby apply for a grant in the amount of \$_____ for the creation of an accessory apartment within my/our property in Delaware Township, New Jersey. I/We have approved the specifications and understand the scope of work to be performed by the contractor, _____ . I/We further request that Delaware Township manage the grant under the terms of the AGREEMENT.

The Township of Delaware Township, or its agents or representatives, shall have the right to enter the accessory apartment property at any time within one (1) year of completion for the purpose of reviewing the completed work.

Any applicant making a false claim shall be required to reimburse the Township of Delaware Township for any benefits received.

NOTE: Any accessory apartment owner who fails to complete construction of the unit and obtain a Certificate of Occupancy or Certificate of Approval shall be required to reimburse the Township for all funds paid to the owner.

Property owner signature: _____ Date: _____

Property owner signature: _____ Date: _____

Delaware Township Approval: _____

Date: _____

OR

I have read the above application and do not intend to accept any grant money from Delaware Township to assist in the creation of an accessory apartment.

Property owner signature: _____ Date: _____

Witnessed by: _____ Date: _____

Title: _____

Deed Restriction

**DEED-RESTRICTED AFFORDABLE HOUSING PROPERTY
WITH RESTRICTIONS ON RESALE AND REFINANCING**

To Rental Property
With Covenants Restricting Rentals, Conveyance and Improvements
And Requiring Notice of Foreclosure and Bankruptcy

THIS DEED RESTRICTION, entered into as of this the ___ day of _____, 20___, by and between the Danene Gooding ("Administrative Agent"), or its successor, acting on behalf of Delaware Township (Municipality)], with offices at _____, and _____ a New Jersey [Individual / Corporation / Partnership / Limited Partnership] having offices at _____ the developer/sponsor (the "Owner") of a residential low- or moderate-income rental project (the "Project"):

WITNESSETH

Article 1. Consideration

In consideration of benefits and/or right to develop received by the Owner from the Municipality regarding this rental Project, the Owner hereby agrees to abide by the covenants, terms and conditions set forth in this Deed restriction, with respect to the land and improvements more specifically described in Article 2, hereof (the Property).

Article 2. Description of Property

The Property consists of all of the land, and a portion of the improvements thereon, that is located in the municipality of Delaware Township, County of Hunterdon, State of New Jersey, and described more specifically as Block No. _____ Lot No. _____, and known by the street address:

More specifically designated as:

(List specific affordable units by address or apartment number.)

Article 3. Affordable Housing Covenants

The following covenants (the “Covenants”) shall run with the land for the period of time (the “Control Period”), determined separately with respect for each dwelling unit, commencing upon the earlier of the date hereof or the date on which the first certified household occupies the unit, and shall and expire as determined under the Uniform Controls, as defined below.

In accordance with N.J.A.C. 5:80-26.11, each restricted unit shall remain subject to the requirements of this subchapter, the “Control Period,” until the municipality in which the unit is located elects to release the unit from such requirements. Prior to such a municipal release, a restricted unit must remain subject to the requirements of this subchapter for a period of at least ten (10) years.

- A. Sale and use of the Property is governed by regulations known as the Uniform Housing Affordability Controls, which are found in New Jersey Administrative Code at Title 5, chapter 80, subchapter 26 (N.J.A.C. 5:80-26.1, *et seq*, the “Uniform Controls”).
- B. The Property shall be used solely for the purpose of providing rental dwelling units for low- or moderate-income households, and no commitment for any such dwelling unit shall be given or implied, without exception, to any person who has not been certified for that unit in writing by the Administrative Agent. So long as any dwelling unit remains within its Control Period, sale of the Property must be expressly subject to these Deed Restrictions, deeds of conveyance must have these Deed Restrictions appended thereto, and no sale of the Property shall be lawful, unless approved in advance and in writing by the Administrative Agent.
- C. No improvements may be made to the Property that would affect the bedroom configuration of any of its dwelling units, and any improvements to the Property must be approved in advance and in writing by the Administrative Agent.
- D. The Owner shall notify the Administrative Agent and the Municipality of any foreclosure actions filed with respect to the Property within five (5) business days of service upon Owner.
- E. The Owner shall notify the Administrative Agent and the Municipality within three (3) business days of the filing of any petition for protection from creditors or reorganization filed by or on behalf of the Owner.

Article 4. Remedies for Breach of Affordable Housing Covenants

A breach of the Covenants will cause irreparable harm to the Administrative Agent, to the Municipality and to the public, in light of the public policies set forth in the New Jersey Fair Housing Act, the Uniform Housing Affordability Control rules found at N.J.A.C. 5:80-26, and the obligation for the provision of low and moderate-income housing.

- A. In the event of a threatened breach of any of the Covenants by the Owner, or any successor in interest of the Property, the Administrative Agent and the Municipality shall have all remedies provided at law or equity, including the right to seek injunctive relief or specific performance.
- B. Upon the occurrence of a breach of any Covenants by the Grantee, or any successor in interest or other owner of the Property, the Administrative Agent and the Municipality shall have all remedies provided at law or equity including but not limited to forfeiture, foreclosure, acceleration of all sums due under any mortgage, recouping of any funds from a sale in violation of the Covenants, diverting of rent proceeds from illegal rentals, injunctive relief to prevent

further violation of said Covenants, entry on the premises, those provided under Title 5, Chapter 80, Subchapter 26 of the New Jersey Administrative Code and specific performance.

IN WITNESS WHEREOF, the Administrative Agent and the Owner have executed this Deed Restriction in triplicate as of the date first above written.

ADMINISTRATIVE AGENT DANENE GOODING

BY: _____
Danene Gooding
Delaware Township Administrative Agent

OWNER

BY: _____

Title

APPROVED BY DELAWARE TOWNSHIP

BY: _____
Roger Locandro, Mayor

ACKNOWLEDGEMENTS

On this the _____ day of _____, 20____ before me came Danene Gooding, to me known and known to me to be the Administrative Agent for Delaware Township, who states that (s)he has signed said Agreement on behalf of said Municipality for the purposes stated therein.

NOTARY PUBLIC

On this the _____ day of _____, 20____ before me came _____, to me known and known to me to be _____, the Owner of the Property, who states that (s)he has signed said Agreement for the purposes stated therein.

NOTARY PUBLIC

On this the _____ day of _____, 20____ before me came Roger Locandro known to me to be Mayor of Delaware Township, the Municipality identified as such in the foregoing Agreement, who states that he is duly authorized to execute said Agreement on behalf of said Municipality, and that he has so executed the foregoing Agreement for the purposes stated therein

NOTARY PUBLIC

Appendix 7 Tenant Application and Income Verification Forms

Dear Affordable Housing Applicant:

Thank you for inquiring about affordable housing with Delaware Township.

In order to be eligible for an affordable housing unit, you must meet certain income limits as determined by the New Jersey Council on Affordable Housing. Income limits are determined by region. Our housing units are located in Region 3, which includes the following counties: Hunterdon, Middlesex and Somerset. Income limits can vary from year to year and depend upon the number of persons in the household. The income limits for 2014 are:

Number of persons in household	Maximum Annual Income Very Low-Income Units	Maximum Annual Income Low – Income Units	Maximum Annual Income Moderate – Income Units
1	\$22,050	\$36,750	\$58,800
2	\$25,200	\$42,000	\$67,200
3	\$28,350	\$47,250	\$75,600
4	\$31,500	\$52,500	\$84,000

If you believe your gross income falls within these income limits, fill out and submit this application for preliminary certification to our office. If preliminarily certified, you will be placed in our applicant pool of eligible renters. Based on a random selection lottery your name will be placed on the service list. When a unit comes available we will start at the top of the service list to try and match an appropriate household based on size and income with the available unit. If the first household on the list is not an appropriate match it will be skipped and the next applicant household evaluated for a match. This process will continue until a properly sized household with sufficient income for the rent is reached. Please note that regional preference will be given to applicant households that currently live or work in Region 3. Prior to rental of the unit a final application with supporting documentation will be required for final determination of eligibility.

Please remember that all applications and documents are held in the strictest confidence. If you have any further questions please contact us at 609-397-3240 ext. 202.

Danene L. Gooding
Delaware Township Administrative Agent

Delaware Township
 570 Rosemont Ringoes Road
 PO Box 500
 Sergeantsville, NJ 08557
 (609) 397-3240 Fax (609) 397-4893

CONFIDENTIAL Preliminary Application for Affordable Housing

Applicant Name (head of household)			
Current Address	Street: City: County:	State:	Zip:
Telephone #	Home: Work:	Cell:	
E-mail Address:			
<i>Optional: Do you or any members of your household work in Hunterdon, Somerset or Middlesex County?</i>			
Number of individuals in household	Adults:	Children:	
Desired number of bedrooms	<input type="checkbox"/> One Bedroom <input type="checkbox"/> Two Bedroom <input type="checkbox"/> Three Bedroom		

People who will be part of my household in the housing for which I am applying:					
Name	Relationship to Applicant	Sex	Age	Gross Annual Income	Source(s) of income
Applicant	Self				

Total Income: _____

Signed _____ Date _____

We Do Business in Accordance With the Federal Fair Housing Law (The Fair Housing Amendments Act of 1988). It is Illegal to Discriminate Against Any Person Because of Race, Color, Religion, Sex, Handicap, Familial Status, or National Origin.



DELAWARE TOWNSHIP FINAL APPLICATION FOR AFFORDABLE HOUSING

APPLICANT NAME: _____

CURRENT ADDRESS: _____

CITY, STATE, ZIP CODE: _____

HOME PHONE: _____ WORK PHONE: _____ OTHER: _____

EMAIL: _____

HOUSEHOLD COMPOSITION AND CHARACTERISTICS

- List the Head of Household and all other members who will be living in the unit.
Give the relationship of each family member to the head.

#	MEMBERS FULL NAME	RELATION	BIRTH DATE	SEX	SOCIAL SECURITY #
1		Applicant			
2					
3					
4					

- Does anyone live with you now who is not listed above: Yes No
- Do you expect a change in your household composition? Yes No
Explain if you answered yes to either questions: _____

- Please identify any special housing needs. _____

- Number of bedrooms requested based on family composition: _____

INCOME AND ASSET INFORMATION

Please answer each of the following questions. For each “yes”, provide details in the charts below.

Does any member of your household:

Yes	No	1.	Work full-time, part-time or seasonally?
Yes	No	2.	Expect to work for any period during the next year?
Yes	No	3.	Work for someone who pays you cash?
Yes	No	4.	Expect a leave of absence from work due to lay-off, medical, maternity or military leave?
Yes	No	5.	Now receive or expect to receive unemployment benefits?
Yes	No	6.	Now receive or expect to receive child support?
Yes	No	7.	Entitled to child support that he/she is not now receiving?
Yes	No	8.	Now receive or expect to receive alimony?
Yes	No	9.	Have an entitlement to receive alimony that is not currently being received?
Yes	No	10.	Now receive or expect to receive public assistance (welfare)?
Yes	No	11.	Now receive or expect to receive Social Security or disability benefits?
Yes	No	12.	Now receive or expect to receive income from a pension or annuity?
Yes	No	13.	Now receive or expect to receive regular contributions from organizations or from individuals not living in the unit?
Yes	No	14.	Receive income from assets including interest on checking or savings accounts, interest and dividends from certificates of deposit, stocks or bonds or income from rental property?
Yes	No	15.	Own real estate or any assets for which you receive no income (checking account, cash)?
Yes	No	16.	If you own a home, do you maintain a mortgage on the property?
Yes	No	17.	Have you sold or given away real property or other assets (including cash) in the past two years?
Yes	No	18.	Are you responsible for paying child support or alimony? This amount will be deducted from your total annual income. Amount Paid Monthly: \$_____

MEMBER NO.	SOURCE OF INCOME / TYPE OF INCOME	TOTAL GROSS ANNUAL INCOME

ASSETS

1. List all checking and savings accounts (including IRAs, Keogh accounts, and Certificate of Deposit) of all household members.

MEMBER NO.	BANK NAME	TYPE OF ACCOUNT	ACCOUNT NUMBER	BALANCE

2. List all stocks, bonds, trusts, pensions, or other assets, including a house, and their value, owned by any household member:

3. List any assets disposed of for less than their fair market value during the past two years:

PREVIOUS RENTAL HISTORY OR OWNERSHIP HISTORY

Name and address of your Present Landlord or Current Address:

_____ Telephone: _____
 _____ How long have you lived re? _____
 _____ Reason for leaving? _____

Name and address of your Former Landlord or Previous Address:

_____ Telephone: _____
 _____ How long did you live there? _____
 _____ Reason for leaving? _____

EMPLOYMENT HISTORY

Name and address of Head of Household’s present employment:

_____	Telephone: _____
_____	Supervisor’s Name? _____
_____	How long have you worked there? _____

Name and address of spouse’s or co-head employer:

_____	Telephone: _____
_____	Supervisor’s Name? _____
_____	How long have you worked there? _____

APPLICANT CERTIFICATION

I/we certify that if selected to receive assistance, the unit I/we occupy will be my/our only residence. I/we understand that the above information is being collected to determine my/our eligibility. I/we authorize the owner/manager to verify all information provided on this application and to contact previous or current landlords or other sources of credit and verification information which may be released to appropriate Federal, State, or local agencies. I/we certify that the statements made in this application are true and complete to the best of my/our knowledge and belief. I/we understand that false statements or information are punishable under Federal Law.

Signature of Head of Household _____ Date: _____

Signature of Spouse/Co-Head _____ Date: _____

Signature of Administrative Agent _____ Date: _____

We Do Business in Accordance With the Federal Fair Housing Law (The Fair Housing Amendments Act of 1988). It is Illegal to Discriminate Against Any Person Because of Race, Color, Religion, Sex, Handicap, Familial Status, or National Origin.



The following documentation (if it applies) must be provided so we can verify your income and household size.

- Personal identification (Driver's License, passport, birth certificate, social security card, etc.)
- Checking - 6 months of statements
- Savings Account (CD's, IRA's, etc) statements and current interest rates
- Bonds
- Stocks
- Real Estate (total value minus any outstanding mortgage balance, closing costs, broker's fees, etc) and income from real estate or businesses.
- (4) most recent consecutive pay stubs for all employed household members
- Social Security: S.S. Computer Printout or Award Letter
- Pension Letter received from pension fund
- Verification of Temporary Assistance for Needy Families (TANF)
- Verification of Support (Child Support and/or Alimony)
- Verification of Military Pay
- Workers' Compensation - Letter from Workmen's Compensation.
- Verification of Unemployment Benefits
- 1040 Federal Tax Return (Both front and back) (last 3 years)
- State Tax Return (last 3 years)

DELAWARE TOWNSHIP ACCESSORY APARTMENT PROGRAM
FORM OF CERTIFICATE FOR APPLICANTS CERTIFIED TO
RENTAL UNIT, REQUIRED BY SECTION 5:80-26.18(c)(2)

CERTIFICATE FOR APPLICANT
CERTIFIED TO A RENTAL UNIT SUBJECT TO
AFFORDABLE HOUSING RESTRICTIONS

**My name is _____ and I am making this
certificate in connection with my certification to rent the Affordable
Housing unit located at**

_____.

I am aware, as the renter of an Affordable unit, that from this date until _____,
20__ as long as I am renting the unit described above, my renting the apartment is subject
to the requirements that are listed below:

1. I am required to pay all rent set forth in my lease on time and in the manner provided for in my lease.
2. I know that I am required to live in my apartment, and that I cannot sublease it or rent it out to any other person, not even to members of my family.
3. I know that the maximum rent I am supposed to pay to my landlord is limited by law, that it is announced each year by _____, and that I can call _____ at any time if I have any questions about what rent I am supposed to be paying.

4. I know that I am not allowed to make any improvements to my apartment unless they have been approved in writing by

_____.

BE IT REMEMBERED, that on this the _____ day of _____, 20__ the signer of this Certificate _____ appeared personally before me and who, being duly sworn by me, deposed and made proof to my satisfaction (i) that he/she is the renter of the Affordable unit that is identified as said renter in the foregoing Certificate, and (ii) and that he/she has executed said Certificate with respect to the lease of the property described in the Certificate and for the purposes described and set forth therein.

Applicant Signature

Date

Sworn to and subscribed before me, _____ on the date set forth above.

NOTARY PUBLIC

Appendix 9 Sample Lease Agreement

**DELAWARE TOWNSHIP LEASE
RENTAL AGREEMENT**

This Rental Agreement or Residential Lease shall evidence the complete terms and conditions under which the parties whose signatures appear below have agreed. Landlord/Lessor/Agent, _____, shall be referred to as "OWNER" and Tenant(s)/Lessee,

_____, shall be referred to as "RESIDENT." As consideration for this agreement, OWNER agrees to rent/lease to RESIDENT and RESIDENT agrees to rent/lease from OWNER for use solely as a private residence, the premises located at

_____ in the Township of
Delaware Township.

1. **TERMS:** RESIDENT agrees to pay in advance \$_____ per month on the ____ day of each month. This agreement shall commence on _____, ___ and continue until _____, ___ as a leasehold. If RESIDENT should move from the premises prior to the expiration of this time period, he shall be liable for all rent due until the expiration of said time period, or the residence is re-occupied by a RESIDENT approved under the guidelines of COAH, whichever is shorter.

2. **PAYMENTS:** Rent and/or other charges are to be paid at such place or method designated by the owner as follows

_____. All payments are to be made by check, or money order or cash shall be acceptable. OWNER acknowledges receipt of the First Month's rent of \$_____, and a Security Deposit of \$_____, and additional charges/fees in the amount of \$_____ for _____, for a total payment of \$_____. All payments are to be made payable to _____.

3. **SECURITY DEPOSITS:** The total of the above deposits shall secure compliance with the terms and conditions of this agreement and shall be refunded to RESIDENT within ____ days after the premises have been completely vacated less any amount necessary to pay OWNER; a) any unpaid rent, b) cleaning costs, c) key replacement costs, d) cost for repair of damages to premises and/or common areas above ordinary wear and tear, and e) any other amount legally allowable under the terms of this agreement. A written accounting of said charges shall be presented to RESIDENT within ____ days of move-out. If deposits do not cover such costs and damages, the RESIDENT shall immediately pay said additional costs for damages to OWNER.

4. **LATE CHARGE:** A late fee of \$_____, (not to exceed ___% of the monthly rent), shall be added and due for any payment of rent made after the _____ of the month. Any bounced check shall be treated as unpaid rent, and subject to an additional fee of \$_____.

5. **UTILITIES:** The owner will pay all utilities.

6. **OCCUPANTS:** Guest(s) staying over 15 days without the written consent of OWNER shall be considered a breach of this agreement. ONLY the following

individuals and/or animals, AND NO OTHERS shall occupy the subject residence for more than 15 days unless the expressed written consent of OWNER is obtained in advance

7. **PETS:** No animal, fowl, fish, reptile, and/or pet of any kind shall be kept on or about the premises, for any amount of time, without obtaining the prior written consent and meeting the requirements of the OWNER. Such consent if granted, shall be revocable at OWNER'S option upon giving a 30 day written notice. In the event laws are passed or permission is granted to have a pet and/or animal of any kind, an additional deposit in the amount of \$_____ shall be required along with additional monthly rent of \$_____ along with the signing of OWNER'S Pet Agreement. RESIDENT also agrees to carry insurance deemed appropriate by OWNER to cover possible liability and damages that may be caused by such animals.

8. **LIQUID FILLED FURNISHINGS:** No liquid filled furniture, receptacle containing more than ten gallons of liquid is permitted without prior written consent and meeting the requirements of the OWNER. RESIDENT also agrees to carry insurance deemed appropriate by OWNER to cover possible losses that may be caused by such items.

9. **PARKING:** When the RESIDENT is assigned a parking area/space on OWNER'S property, the parking area/space shall be used exclusively for parking of passenger automobiles. RESIDENT is hereby assigned or permitted to park only in the following area or space _____. Said space shall not be used for the washing, painting, or repair of vehicles. No other parking space shall be used by RESIDENT or RESIDENT'S guest(s). RESIDENT is responsible for oil leaks and other vehicle discharges for which RESIDENT shall be charged for cleaning if deemed necessary by OWNER.

10. **NOISE:** RESIDENT agrees not to cause or allow any noise or activity on the premises which might disturb the peace and quiet of another RESIDENT and/or neighbor. Said noise and/or activity shall be a breach of this agreement.

11. **DESTRUCTION OF PREMISES:** If the premises become totally or partially destroyed during the term of this Agreement so that RESIDENT'S use is seriously impaired, OWNER or RESIDENT may terminate this Agreement immediately upon three day written notice to the other.

12. **CONDITION OF PREMISES:** RESIDENT acknowledges that he has examined the premises and that said premises, fixtures, plumbing, heating, electrical facilities, all items listed on the attached property condition checklist, if any, and/or all other items provided by OWNER are all clean, and in good satisfactory condition except as may be indicated elsewhere in this Agreement. RESIDENT agrees to keep the premises and all items in good order and good condition and to immediately pay for costs to repair and/or replace any portion of the above damaged by RESIDENT, his guests and/or invitees, except as provided by law. At the termination of this Agreement, all of above items in this provision shall be returned to OWNER in clean and good condition except for

reasonable wear and tear and the premises shall be free of all personal property and trash not belonging to OWNER. It is agreed that all dirt, holes, tears, burns, and stains of any size or amount in the carpets, drapes, walls, fixtures, and/or any other part of the premises, do not constitute reasonable wear and tear.

13. **ALTERATIONS:** RESIDENT shall not paint, wallpaper, alter or redecorate, change or install locks, install antenna or other equipment, screws, fastening devices, large nails, or adhesive materials, place signs, displays, or other exhibits, on or in any portion of the premises without the written consent of the OWNER except as may be provided by law.

14. **PROPERTY MAINTENANCE:** RESIDENT shall deposit all garbage and waste in a clean and sanitary manner into the proper receptacles and shall cooperate in keeping the garbage area neat and clean. RESIDENT shall be responsible for disposing of items of such size and nature as are not normally acceptable by the garbage hauler. RESIDENT shall be responsible for keeping the kitchen and bathroom drains free of things that may tend to cause clogging of the drains. RESIDENT shall pay for the cleaning out of any plumbing fixture that may need to be cleared of stoppage and for the expense or damage caused by stopping of waste pipes or overflow from bathtubs, wash basins, or sinks.

15. **HOUSE RULES:** RESIDENT shall comply with all house rules as stated on separate addendum, but which are deemed part of this rental agreement, and a violation of any of the house rules is considered a breach of this agreement.

16. **CHANGE OF TERMS:** The terms and conditions of this agreement are subject to future change by OWNER after the expiration of the agreed lease period upon 60-day written notice setting forth such change and delivered to RESIDENT. Any changes are subject to laws in existence at the time of the Notice of Change Of Terms.

17. **TERMINATION:** After expiration of the leasing period, this agreement is automatically renewed from month to month for another year, but may be terminated by either party giving to the other a 30-day written notice of intention to terminate. Where laws require "just cause", such just cause shall be so stated on said notice. The premises shall be considered vacated only after all areas including storage areas are clear of all RESIDENT'S belongings, and keys and other property furnished for RESIDENT'S use are returned to OWNER. Should the RESIDENT hold over beyond the termination date or fail to vacate all possessions on or before the termination date, RESIDENT shall be liable for additional rent and damages which may include damages due to OWNER'S loss of prospective new renters.

18. **POSSESSION:** If OWNER is unable to deliver possession of the residence to RESIDENTS on the agreed date, because of the loss or destruction of the residence or because of the failure of the prior residents to vacate or for any other reason, the RESIDENT and/or OWNER may immediately cancel and terminate this agreement upon written notice to the other party at their last known address, whereupon neither party shall have liability to the other, and any sums paid under this Agreement shall be refunded in full. If neither party

cancels, this Agreement shall be prorated and begin on the date of actual possession.

19. INSURANCE: RESIDENT acknowledges that OWNERS insurance does not cover personal property damage caused by fire, theft, rain, war, acts of God, acts of others, and/or any other causes, nor shall OWNER be held liable for such losses. RESIDENT is hereby advised to obtain his own insurance policy to cover any personal losses.

20. RIGHT OF ENTRY AND INSPECTION: OWNER may enter, inspect, and/or repair the premises at any time in case of emergency or suspected abandonment. OWNER shall give 24 hours advance notice and may enter for the purpose of showing the premises during normal business hours to prospective renters, buyers, lenders, for smoke alarm inspections, and/or for normal inspections and repairs. OWNER is permitted to make all alterations, repairs and maintenance that in OWNER'S judgment is necessary to perform.

21. ASSIGNMENT: RESIDENT agrees not to transfer, assign or sublet the premises or any part thereof.

22. PARTIAL INVALIDITY: Nothing contained in this Agreement shall be construed as waiving any of the OWNER'S or RESIDENT'S rights under the law. If any part of this Agreement shall be in conflict with the law, that part shall be void to the extent that it is in conflict, but shall not invalidate this Agreement nor shall it affect the validity or enforceability of any other provision of this Agreement.

23. NO WAIVER: OWNER'S acceptance of rent with knowledge of any default by RESIDENT or waiver by OWNER of any breach of any term of this Agreement shall not constitute a waiver of subsequent breaches. Failure to require compliance or to exercise any right shall not be constituted as a waiver by OWNER of said term, condition, and/or right, and shall not affect the validity or enforceability of any provision of this Agreement.

24. ATTORNEY FEES: If any legal action or proceedings be brought by either party of this Agreement, the prevailing party shall be reimbursed for all reasonable attorney's fees and costs in addition to other damages awarded.

25. JOINTLY AND SEVERALLY: The undersigned RESIDENTS are jointly and severally responsible and liable for all obligations under this agreement.

26. REPORT TO CREDIT/TENANT AGENCIES: You are hereby notified that a nonpayment, late payment or breach of any of the terms of this rental agreement may be submitted/reported to a credit and/or tenant reporting agency, and may create a negative credit record on your credit report.

27. ADDITIONS AND/OR EXCEPTIONS

28. **NOTICES:** All notices to RESIDENT shall be served at RESIDENT'S premises and all notices to OWNER shall be served at

29. **INVENTORY:** The premise contains the following items, that the RESIDENT may use.

30. **KEYS AND ADDENDUMS:** RESIDENT acknowledges receipt of the following which shall be deemed part of this Agreement: (Please check)

Keys #of keys and purposes

House Rules Pet Agreement Other

31. **ENTIRE AGREEMENT:** This Agreement along with the House Rules constitutes the entire Agreement between OWNER and RESIDENT. No oral agreements have been entered into, and all modifications or notices shall be in writing to be valid.

32. **RECEIPT OF AGREEMENT:** The undersigned RESIDENTS have read and understand this Agreement and hereby acknowledge receipt of a copy of this Rental Agreement.

RESIDENT'S Signature

Date_____

RESIDENT'S Signature

Date_____

OWNER'S or Agent's Signature

Date_____

AFFIRMATIVE FAIR HOUSING MARKETING PLAN
For Affordable Housing in (REGION 3)

I. APPLICANT AND PROJECT INFORMATION

(Complete Section I individually for all developments or programs within the municipality.)

1a. Administrative Agent Name, Address, Phone Number 1b. Development or Program Name, Address

Danene Gooding, AA for Delaware Township
Delaware Township Municipal Building
570 Rosemont Ringoes Rd. PO Box 500
Sergeantsville, NJ 08557
(609) 397-3240

Delaware Township Accessory Apartments

1c. Number of Affordable Units: 10 additional in Round 3 Plan

1d. Price or Rental Range From \$500

1e. State and Federal Funding Sources (if any)

Number of Rental Units: All

To \$1000

Not Applicable

Number of For-Sale Units:

1f.

[] Age Restricted

[X] Non-Age Restricted

1g. Approximate Starting Dates

Existing Accessory Apartments, initial advertising and occupancy was completed many years ago. The list has remained open with continued marketing and out reach.

Advertising:

Occupancy:

1h. County

Hunterdon, Middlesex, Somerset

1i. Census Tract(s):

118

1j. Managing/Sales Agent's Name, Address, Phone Number

Accessory Apartments -
10 proposed

1k. Application Fees (if any): None

(Sections II through IV should be consistent for all affordable housing developments and programs within the municipality. Sections that differ must be described in the approved contract between the municipality and the administrative agent and in the approved Operating Manual.)

II. RANDOM SELECTION

2. Describe the random selection process that will be used once applications are received.

Advertisements will be placed in the appropriate newspapers with a deadline for filing applications. Each application will be date stamped and checked preliminarily to see if the prospective household is income eligible based on household income and household size. If the household is not eligible, a letter of ineligibility will be sent notifying the applicant. If the household appears to be income eligible, a letter of preliminary eligibility is sent. Thirty days after publication a random drawing will take place at the Delaware Township Municipal Building. In attendance will be the Municipal Housing Liaison/Administrative Agent and one other public official from the Township. The applications will be placed on the service list in the order in which they are drawn in the lottery.

The applicant pool may be kept open after the initial lottery for re-rentals. If kept open monthly advertising will take place. Additional applications can be added to the bottom of the service list based on the date and time of the submission.

III. MARKETING

3a. Direction of Marketing Activity: (indicate which group(s) in the housing region are least likely to apply for the housing without special outreach efforts because of its location and other factors)

- White (non-Hispanic)
 Black (non-Hispanic)
 Hispanic
 American Indian or Alaskan Native
 Asian or Pacific Islander
 Other group:

3b. Commercial Media (required) (Check all that applies)

DURATION & FREQUENCY OF OUTREACH	NAMES OF REGIONAL NEWSPAPER(S)	CIRCULATION AREA
TARGETS ENTIRE COAH REGION 3		
<input checked="" type="checkbox"/>	Continuous ad for initial occupancy of project and as needed when list has less than two year wait for units, and when specific units are coming available. If list is kept open a permanent ad will be kept on this site.	NJ Housing Resource Center WWW.njhousing.gov
TARGETS PARTIAL COAH REGION 3		
<u>Daily Newspaper</u>		
<input checked="" type="checkbox"/>	One time for initial occupancy and as needed when list has less than two year wait for units.	Home News Tribune Middlesex, Somerset, Union
<input checked="" type="checkbox"/>	One time for initial occupancy and as needed when list has less than two year wait for units.	Courier News Somerset and Hunterdon
<u>Weekly Newspaper</u>		
<input checked="" type="checkbox"/>	One time for initial occupancy and as needed when list has less than two year wait for units	Lambertville Beacon Hunterdon
<input type="checkbox"/>		Delaware Valley News Hunterdon
<input checked="" type="checkbox"/>	One time for initial occupancy and as needed when list has less than two year wait for units	Hunterdon County Democrat / Hunterdon Observer Hunterdon
<input type="checkbox"/>		Hunterdon Review Hunterdon
<input type="checkbox"/>		Amboy Beacon Middlesex
<input type="checkbox"/>		Colonia Corner Middlesex
<input type="checkbox"/>		Cranbury Press Middlesex
<input type="checkbox"/>		East Brunswick Sentinel Middlesex
<input type="checkbox"/>		Edison Sentinel Middlesex
<input type="checkbox"/>		South Brunswick Post Middlesex
<input type="checkbox"/>		South Plainfield Observer Middlesex
<input type="checkbox"/>		Suburban, The Middlesex

<input checked="" type="checkbox"/>	One time for initial occupancy and as needed when list has less than two year wait for units	Princeton Packet	Middlesex, Somerset
<input type="checkbox"/>		Sentinel, The	Middlesex, Somerset
<input type="checkbox"/>		Atom Tabloid & Citizen Gazette	Middlesex, Union
<input type="checkbox"/>		Parsippany Life	Morris
<input type="checkbox"/>		Echoes Sentinel	Morris, Somerset
<input type="checkbox"/>		Bernardsville News	Somerset
<input type="checkbox"/>		Branchburg News	Somerset
<input type="checkbox"/>		Chronicle	Somerset
<input type="checkbox"/>		Hills-Bedminster Press	Somerset
<input type="checkbox"/>		Hillsborough Beacon	Somerset
<input type="checkbox"/>		Manville News	Somerset
<input type="checkbox"/>		Messenger-Gazette	Somerset
<input type="checkbox"/>		Reporter	Somerset
<input type="checkbox"/>		Somerset Spectator	Somerset
Monthly Newspaper			
<input type="checkbox"/>		About Our Town/Community News	Middlesex, Somerset

DURATION & FREQUENCY OF OUTREACH	NAMES OF REGIONAL TV STATION(S)	CIRCULATION AREA AND/OR RACIAL/ETHNIC IDENTIFICATION OF READERS/AUDIENCE
TARGETS ENTIRE COAH REGION 3		
<input type="checkbox"/>	2 WCBS-TV CBS Broadcasting Inc.	
<input type="checkbox"/>	3 KYW-TV CBS Broadcasting Inc.	
<input type="checkbox"/>	4 WNBC NBC Telemundo License Co. (General Electric)	
<input type="checkbox"/>	5 WNYW Fox Television Stations, Inc. (News Corp.)	
<input type="checkbox"/>	6 WPVI-TV American Broadcasting Companies, Inc (Walt Disney)	
<input type="checkbox"/>	7 WABC-TV American Broadcasting Companies, Inc (Walt Disney)	
<input type="checkbox"/>	9 WWOR-TV Fox Television Stations, Inc. (News Corp.)	
<input type="checkbox"/>	10 WCAU NBC Telemundo License Co. (General Electric)	
<input type="checkbox"/>	11 WPIX Wpix, Inc. (Tribune)	
<input type="checkbox"/>	12 WHYI-TV Whyi, Inc.	

<input type="checkbox"/>	13 WNET Educational Broadcasting Corporation	
<input type="checkbox"/>	17 WPHL-TV Tribune Company	
<input type="checkbox"/>	31 WPXN-TV Paxson Communications License Company, Llc	
<input type="checkbox"/>	35 WYBE Independence Public Media Of Philadelphia, Inc.	
<input type="checkbox"/>	39 WLVT-TV Lehigh Valley Public Telecommunications Corp.	
<input type="checkbox"/>	41 WXTV Wxtv License Partnership, G.p. (Univision Communications Inc.)	
<input type="checkbox"/>	48 WGTW-TV Trinity Broadcasting Network	
<input type="checkbox"/>	50 WNJN New Jersey Public Broadcasting Authority	
<input type="checkbox"/>	52 WNJT New Jersey Public Broadcasting Authority	
<input type="checkbox"/>	57 WPSG Cbs Broadcasting Inc.	
<input type="checkbox"/>	58 WNJB New Jersey Public Broadcasting Authority	
<input type="checkbox"/>	61 WPPX Paxson Communications License Company, Llc	
<input type="checkbox"/>	63 WMBC-TV Mountain Broadcating Corporation	
<input type="checkbox"/>	65 WUVP-TV Univision Communications, Inc.	
<input type="checkbox"/>	68 WFUT-TV Univision New York Llc	Spanish

TARGETS PARTIAL COAH REGION 3

<input type="checkbox"/>	16 WNEP-TV New York Times Co.	Hunterdon
<input type="checkbox"/>	46 W46BL Maranatha Broadcasting Company, Inc.	Hunterdon
<input type="checkbox"/>	51 WTVE Reading Broadcasting, Inc	Hunterdon (Christian)
<input type="checkbox"/>	25 W25BB New Jersey Public Broadcasting Authority	Hunterdon, Middlesex
<input type="checkbox"/>	22 WYOU Nexstar Broadcasting, Inc	Hunterdon, Somerset
<input type="checkbox"/>	28 WBRE-TV Nexstar Broadcasting, Inc.	Hunterdon, Somerset
<input type="checkbox"/>	44 WVIA-TV Ne Pa Ed Tv Association	Hunterdon, Somerset
<input type="checkbox"/>	56 WOLF-TV Wolf License Corp	Hunterdon, Somerset
<input type="checkbox"/>	60 WBPB-TV Sonshine Family Television Corp	Hunterdon, Somerset
<input type="checkbox"/>	69 WFMZ-TV Maranatha Broadcasting Company, Inc.	Hunterdon, Somerset
<input type="checkbox"/>	29 WTXF-TV Fox Television Stations, Inc. (News Corp.)	Middlesex, Somerset

<input type="checkbox"/>	47 WNJU NBC Telemundo License Co. (General Electric)	Middlesex, Somerset
<input type="checkbox"/>	66 WFME-TV Family Stations of New Jersey, Inc.	Middlesex, Somerset (Christian)
<input type="checkbox"/>	25 WNYE-TV New York City Dept. Of Info Technology & Telecommunications	Somerset

DURATION & FREQUENCY OF OUTREACH	NAMES OF CABLE PROVIDER(S)	BROADCAST AREA
TARGETS PARTIAL COAH REGION 3		
<input type="checkbox"/>	Comcast of Northwest NJ, Southeast Pennsylvania	Partial Hunterdon
X	Patriot Media & Communications	Partial Hunterdon, Somerset
<input type="checkbox"/>	Service Electric Cable TV of Hunterdon	Partial Hunterdon
<input type="checkbox"/>	Cablevision of Raritan Valley	Partial Middlesex, Somerset
<input type="checkbox"/>	Comcast of Central NJ, NJ (Union System)	Partial Middlesex
X	Comcast of Plainfield	Partial Middlesex, Somerset
One time for initial occupancy and as needed when list has less than two year wait for units.		
One time for initial occupancy and as needed when list has less than two year wait for units		

DURATION & FREQUENCY OF OUTREACH	NAMES OF REGIONAL RADIO STATION(S)	BROADCAST AREA AND/OR RACIAL/ETHNIC IDENTIFICATION OF READERS/AUDIENCE
TARGETS ENTIRE COAH REGION 3		
AM		
<input type="checkbox"/>	WFAN 660	
<input type="checkbox"/>	WOR 710	
<input type="checkbox"/>	WABC 770	
<input type="checkbox"/>	WCBS 880	
<input type="checkbox"/>	WBBR 1130	
<input type="checkbox"/>	WWTR 1170	
X	Public Service Announcement at least 4 times a year as part of monthly advertising rotation when the list remains open.	Spanish, Asian, etc.
<input type="checkbox"/>	WTTM 1680	
FM		
<input type="checkbox"/>	WFNY-FM 92.3	Spanish
X	Public Service Announcement at least 4 times a year as part of monthly advertising rotation when the list remains open.	
<input type="checkbox"/>	WPAT-FM 93.1	
<input type="checkbox"/>	WNYC-FM 93.9	
<input type="checkbox"/>	WPST 94.5	

<input type="checkbox"/>		WFME 94.7	
<input type="checkbox"/>		WPLJ 95.5	
<input type="checkbox"/>		WQXR-FM 96.3	
<input type="checkbox"/>		WQHT 97.1	
<input checked="" type="checkbox"/>	Public Service Announcement at least 4 times a year as part of monthly advertising rotation when the list remains open.	WSKQ-FM 97.9	Spanish
<input type="checkbox"/>		WRKS 98.7	
<input type="checkbox"/>		WAWZ 99.1	Christian
<input type="checkbox"/>		WBAI 99.5	
<input type="checkbox"/>		WPHI-FM 100.3	
<input type="checkbox"/>		WCBS-FM 101.1	
<input type="checkbox"/>		WKXW-FM 101.5	
<input type="checkbox"/>		WQCD 101.9	
<input type="checkbox"/>		WNEW 102.7	
<input type="checkbox"/>		WPRB 103.3	
<input type="checkbox"/>		WKTU 103.5	
<input type="checkbox"/>		WWPR-FM 105.1	
<input type="checkbox"/>		WDAS-FM 105.3	
<input type="checkbox"/>		WLTW 106.7	
TARGETS PARTIAL COAH REGION 3			
AM			
<input type="checkbox"/>		WFIL 560	Hunterdon
<input type="checkbox"/>		WIP 610	Hunterdon
<input type="checkbox"/>		WAEB 790	Hunterdon
<input type="checkbox"/>		WCHR 1040	Hunterdon
<input type="checkbox"/>		WGPA 1100	Hunterdon
<input type="checkbox"/>		WEEX 1230	Hunterdon
<input type="checkbox"/>		WKAP 1470	Hunterdon
<input type="checkbox"/>		WRNJ 1510	Hunterdon
<input type="checkbox"/>		WWJZ 640	Hunterdon, Middlesex
<input type="checkbox"/>		WPHY 920	Hunterdon, Middlesex
<input type="checkbox"/>		WPHT 1210	Hunterdon, Middlesex
<input type="checkbox"/>		WBUD 1260	Hunterdon, Middlesex

<input type="checkbox"/>	WMCA 570	Middlesex (Christian)
<input type="checkbox"/>	WIMG 1300	Middlesex
<input type="checkbox"/>	WCTC 1450	Middlesex, Somerset
FM		
<input type="checkbox"/>	WRTI 90.1	Hunterdon
<input type="checkbox"/>	WCVH 90.5	Hunterdon
<input type="checkbox"/>	WHYY-FM 90.9	Hunterdon
<input type="checkbox"/>	WXTU 92.5	Hunterdon
<input type="checkbox"/>	WAEB-FM 104.1	Hunterdon
<input type="checkbox"/>	WFKB 107.5	Hunterdon
<input type="checkbox"/>	WMMR 93.3	Hunterdon, Middlesex
<input type="checkbox"/>	WYSP 94.1	Hunterdon, Middlesex
<input type="checkbox"/>	WBEN-FM 95.7	Hunterdon, Middlesex
<input type="checkbox"/>	WRDW-FM 96.5	Hunterdon, Middlesex
<input type="checkbox"/>	WOGI 98.1	Hunterdon, Middlesex
<input type="checkbox"/>	WUSL 98.9	Hunterdon, Middlesex
<input type="checkbox"/>	WIOQ 102.1	Hunterdon, Middlesex
<input type="checkbox"/>	WMGK 102.9	Hunterdon, Middlesex
<input type="checkbox"/>	WJJZ 106.1	Hunterdon, Middlesex
<input type="checkbox"/>	WKDN 106.9	Hunterdon, Middlesex (Christian)
<input type="checkbox"/>	WAXQ 104.3	Hunterdon, Middlesex, Somerset
<input type="checkbox"/>	WNTI 91.9	Hunterdon, Somerset
<input type="checkbox"/>	WZZO 95.1	Hunterdon, Somerset
<input type="checkbox"/>	WCTO 96.1	Hunterdon, Somerset
<input type="checkbox"/>	WLEV 100.7	Hunterdon, Somerset
<input type="checkbox"/>	WNJT-FM 88.1	Middlesex
<input type="checkbox"/>	WRSU-FM 88.7	Middlesex
<input type="checkbox"/>	WWFM 89.1	Middlesex
<input type="checkbox"/>	WWPH 107.9	Middlesex
<input type="checkbox"/>	WDVR 89.7	Middlesex, Somerset
<input type="checkbox"/>	WVPH 90.3	Middlesex, Somerset
<input type="checkbox"/>	WMGQ 98.3	Middlesex, Somerset
<input type="checkbox"/>	WBLS 107.5	Middlesex, Somerset

3c. Other Publications (such as neighborhood newspapers, religious publications, and organizational newsletters)

(Check all that applies)

	NAME OF PUBLICATIONS	OUTREACH AREA	RACIAL/ETHNIC IDENTIFICATION OF READERS/AUDIENCE	
TARGETS ENTIRE COAH REGION 3				
Weekly	One time for initial occupancy and as needed when list has less than two year wait for units			
<input checked="" type="checkbox"/>	Nuestra Comunidad	Central/South Jersey	Spanish-Language	
Monthly	One time for initial occupancy and as needed when list has less than two year wait for units			
<input checked="" type="checkbox"/>	Sino Monthly	North Jersey/NYC area	Chinese-American	
TARGETS PARTIAL COAH REGION 3				
Daily				
<input type="checkbox"/>	24 Horas	Bergen, Essex, Hudson, Middlesex, Passaic, Union Counties	Portuguese-Language	
Weekly				
<input type="checkbox"/>	Arab Voice Newspaper	North Jersey/NYC area	Arab-American	
<input type="checkbox"/>	Catholic Advocate, The	Essex County area	Catholic	
<input type="checkbox"/>	La Voz	Hudson, Union, Middlesex Counties	Cuban community	
<input type="checkbox"/>	Amerika Magyar Nepszava (American Hungarian Peoples' Voice)	Central/North Jersey	Hungarian-Language	
<input type="checkbox"/>	New Jersey Jewish News	Northern and Central New Jersey	Jewish	
<input checked="" type="checkbox"/>	Public Service Announcement at least 4 times a year as part of the monthly advertising rotation when the list remains open.	Nuestra Comunidad	Central/South Jersey	Spanish-Language
<input type="checkbox"/>	Desi NJ	Central Jersey	South Asian	
<input type="checkbox"/>	Ukrainian Weekly	New Jersey	Ukrainian Community	

3d. Employer Outreach (names of employers throughout the housing region that can be contacted to post advertisements and distribute flyers regarding available affordable housing) (Check all that applies)

DURATION & FREQUENCY OF OUTREACH NAME OF EMPLOYER/COMPANY LOCATION

Hunterdon County			
<input checked="" type="checkbox"/>	Mailings at least twice a year when list remains open and during initial occupancy.	Merck & Co	1 Merck Dr, Whitehouse Station
<input checked="" type="checkbox"/>	Mailings at least twice a year when list remains open and during initial occupancy	Hunterdon Medical Center	2100 Wescott Drive Flemington, NJ 08822
<input type="checkbox"/>		Foster Wheeler	Perryville Corporate Park Clinton, NJ , 08809-4000
<input type="checkbox"/>		ChubbInsurance co.	202 Halls Mill Rd Whitehouse Station, NJ 08889

<input type="checkbox"/>	Exxonmobil Research & Engineering	1545 US Highway 22 E Annandale, NJ 08801
<input type="checkbox"/>	New York Life	110 Cokesbury Rd, Lebanon

Middlesex County		
<input type="checkbox"/>	Bristol-Myers Squibb	1 Squibb Dr, New Brunswick, NJ 08901
<input type="checkbox"/>	Merrill Lynch & Company	800 Scudders Mill Rd, Plainsboro
<input type="checkbox"/>	Johnson & Johnson	1 Johnson & Johnson Plaza
<input type="checkbox"/>	Prudential Insurance Company	44 Stelton Rd # 130, Piscataway
<input checked="" type="checkbox"/>	Mailings at least twice a year when list remains open and during initial occupancy	Robert Wood Johnson University Hospital 1 Robert Wood Johnson Pl, New Brunswick, NJ 08901 207 Pond Ave Middlesex, NJ 08846
<input type="checkbox"/>	Silverline Building Products	
<input checked="" type="checkbox"/>	Mailings at least twice a year when list remains open and during initial occupancy	St. Peter's University Hospital 254 Easton Ave, New Brunswick
<input type="checkbox"/>	Telcordia Technology	444 Hoes Ln, Piscataway
<input type="checkbox"/>	J.F.K. Medical Center	65 James Street Edison, NJ 08818 530 New Brunswick Av Perth Amboy, NJ 08861
<input type="checkbox"/>	Raritan Bay Medical Center	405 Main St, Woodbridge and 679 Convery Blvd, Perth Amboy
<input type="checkbox"/>	Amerada Hess Corporation	
<input type="checkbox"/>	Dow Jones & Company	54 Eddington LN, Monroe Twp
<input type="checkbox"/>	Siemens AG	755 College Rd E, Princeton
<input type="checkbox"/>	AT&T	1 Highway Ter, Edison
<input type="checkbox"/>	Engelhard Corporation	101 Wood Ave S, Metuchen

Somerset County		
<input type="checkbox"/>	AT&T	1414 Campbell St Rahway
<input type="checkbox"/>	ABC Limousine	574 Ferry St Newark
<input type="checkbox"/>	Bloomberg LP	1350 Liverty Ave Hillside 1091 Lousons Road PO Box 271 Union, NJ
<input type="checkbox"/>	Courier News	
<input type="checkbox"/>	Emcore Corp	800 Rahway Ave Union, NJ
<input checked="" type="checkbox"/>	Mailings at least twice a year when list remains open and during initial occupancy	Ethicon Inc 1515 West Blancke Street Bldgs 1501 and 1525 Linden, NJ
<input type="checkbox"/>	Fedders Corp	27 Commerce Drive Cranford, NJ
<input type="checkbox"/>	ICI Americas Inc.	450 West First Ave Rossellini
<input type="checkbox"/>	ITW Electronic Component Packaging	600 Mountain Ave Murray Hill, NJ
<input checked="" type="checkbox"/>	Mailings at least twice a year when list remains open and during initial occupancy	Johnson & Johnson 1 Merck Drive PO Box 2000 (RY60-200E) Rahway, NJ
<input type="checkbox"/>	Tekni-Plex Inc.	865 Stone Street Rahway, NJ
	Ortho-Clinical Diagnostics Inc	1401 Park Ave South Linden



3e. Community Contacts (names of community groups/organizations throughout the housing region that can be contacted to post advertisements and distribute flyers regarding available affordable housing)

Name of Group/Organization	Outreach Area	Racial/Ethnic Identification of Readers/Audience	Duration & Frequency of Outreach
Fisherman’s Mark Delaware Township Public Assistance Director	Hunterdon County		Twice a year or as needed to keep list current.
Delaware Valley Council of Churches	Hunterdon County		Twice a year or as needed to keep list current
Hunterdon Co. Board of Realtors	Somerset County		Twice a year or as needed to keep list current
Somerset Co. Board of Realtors	Middlesex County		Twice a year or as needed to keep list current
Middlesex Co. Board of Realtors	Hunterdon County		Twice a year or as needed to keep list current
Hunterdon Co. Social Services, Office on Aging and DCA Office	Hunterdon County		
Somerset Co. Social Services, Office on Aging and DCA Office	Somerset County		
Middlesex Co. Social Services, Office on Aging and DCA Office	Middlesex County		
Easter Seals	Region 3		
Catholic Charities	Region 3		
SCCOAH	Region 3		

IV. APPLICATIONS

Applications for affordable housing for the above units will be available at the following locations:

4a. County Administration Buildings and/or Libraries for all counties in the housing region (list county building, address, contact person) (Check all that applies)

BUILDING	LOCATION
<input checked="" type="checkbox"/> Middlesex County Administration Bldg	75 Bayard, New Brunswick, NJ 08903
<input checked="" type="checkbox"/> Somerset County Admin. Bldg	20 Grove Street, Somerville, NJ 08876
<input checked="" type="checkbox"/> Somerset County Library Headquarters	1 Vogt Drive, Bridgewater, NJ 08807
<input checked="" type="checkbox"/> Hunterdon County Library Headquarters	314 State Highway 12, Flemington, NJ 08822

4b. Municipality in which the units are located (list municipal building and municipal library, address, contact person)

Delaware Township Municipal Building, 570 Rosemont Ringoes Road, PO Box 500, Sergeantsville, NJ 08557
Contact Person Danene Gooding, AA

4c. Sales/Rental Office for units (if applicable)

Not Applicable

V. CERTIFICATIONS AND ENDORSEMENTS

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that knowingly falsifying the information contained herein may affect the Municipality’s COAH substantive certification.

Danene Gooding
Name (Type or Print)

Administrative Agent for Delaware Township
Title/Municipality

Signature

Date

DRAFT Sample Advertisement

The Township of Delaware, located in the southern portion of Hunterdon County, adjacent to Stockton and Flemington will have up to 10 privately owned accessory apartments for rent to moderate income households. These units will be scattered throughout the township. Also there are 6 existing affordable rental units offered for lease to persons of low or moderate income levels.

The affordable housing available includes rents from \$ to \$ /month and includes one and two bedroom units. Utilities are included. Interested households will be required to submit an application and income documentation, and pass a credit check in order to qualify. The maximum household incomes permitted are \$54,152 for a one person household, \$61,888 for a two person household, \$69,624 for a three person household and \$77,350 for a four person household. Once certified, households will be matched to affordable units through a lottery system. All successful applicants will be required to demonstrate the ability to pay a security deposit (one and one half months rent) and first month's rent and agree to maintain the units as the family's primary residence.

Existing Affordable Housing units consist of 1, 2 or 3 bedroom units with utilities included.

Applications are available at the Delaware Township Municipal Building, Hunterdon County Library Headquarters, Somerset County Library Headquarters, Somerset County Administration Building and the Middlesex County Administration Building. Applications can also be found on the Delaware Township website www.delawaretwpnj.org. Applications will be accepted until December 31, 2011.

Visit www.njhousing.gov or call 1-877-428-8844 for more affordable housing opportunities.

Although any income eligible households may apply, residents and workers of Hunterdon, Somerset and Middlesex Counties will be selected before residents of other counties or states.