Bradford Pointe Apartments

800-A Bradford Court Bordentown, NJ 08505 Phone: (609) 424-0411/ Fax: (609) 424-0417

Dear Future Resident:

Thank you for your interest in **Bradford Pointe Apartments!** We pride ourselves on being the best apartment community in the **Bordentown** area.

Bradford Pointe Apartments knows that home is much more than a place to hang your hat and rest your head. It's where life unfolds and should be special in every way. Our philosophy toward apartment living is to offer our residents quality housing and excellent management services.

Location is another important aspect of an outstanding community. Bordentown Township/City Offers: Local Restaurants, Specialty Shops, Churches, Banks, Post Office, and Local Fire and Police resources. Bordentown schools are excellent and have, many Sports and after school programs available. Our complex is within fifteen minutes from Hamilton Marketplace Shopping Center and conveniently located near Acme Commons, US ROUTE 130 provides easy access to major highways, including I 295 and the NJ Turnpike. Public Transportation is also available from Bradford Pointe Apartments via the NJ Transit #409 and the Riverline from Bordentown City.

We hope you will consider making **Bradford Pointe Apartments** your next home address.

All applicants 18 years of age and older must include a \$50.00 money order made payable to Bradford Pointe Apartments. This is a non-refundable application-processing fee.

Bradford Pointe is a Low Income Tax-Credit Property. Please be advised that eligibility is determined by household size and **Maximum** annual gross income, illustrated as followed: EFFECTIVE JANUARY 1,2024

<u>50% Median Income</u>

Effective January 1, 2023

# Of People	Minimum	Maximum
1	\$25,000	\$40,500
2	\$25,300	\$45,800
3	\$28,500	\$51,500
4	\$31,650	\$57,200
5	\$34,200	\$61,800
6	\$36,700	\$66,400

RENT and SECURITY DEPOSIT

2 Bedrooms: \$1,178.00 Security Deposit \$1,767.00 3 Bedrooms: \$1,376.00 Security Deposit \$2,064.00

BRADFORD POINTE APPLICATION FOR HOUSING

DATE:	TIN	ЛЕ:	
receipt of this tenant app	plication, which must be ease answer every quest	. An applicant may be interviewed fully completed and signed by all find ion! Partially filled out application.	family members
How did you learn abou	t this property?		
	PLEASE PR	INT CLEARLY	
	A. GENERAL	INFORMATION	
Applicant Name(s):			
Address:			
Audicss.	Street	Apt.# City	State
Daytime Phone:		Evening	
No. of BR's in current unit:		Do you RENT or OWN or	Live w/
Amount of current monthly rental or mortgage payment	\$	Do you currently reside at a HUE do you receive a subsidy?	
If owned, do you recei	ve monthly rental income	e from property? Yes	No
Check utilities paid by	you: Heat Ele	ctricity Gas Other (spe	cify)
Approximate monthly	cost of utilities paid by y	ou (excluding phone \$	

Bedroom size requested: Two BR Three BR
Do you or any member of your household need any specific unit designs, such as wheelchair accessibility, visual aids (Braille) or apparatus for hearing assistance? `Yes No. If Yes, describe:
If a member of a household needs reasonable accommodations in order to participate in the application process or to make effective use of the housing program, the applicant has the
Will you be making any reasonable accommodation requests for any members of your household? Yes No
Describe:
The owner and management do not discriminate against applicants on the basis of limited access or any other reason.



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B. HOUSEHOLD COMPOSITION

List ALL persons who will live in the apartment. List the head of household first.

	Name	Relationshi p to head	Marital Status D-divorced S-single L-legal separation	Birth Date	Age	SS#	Full or Part Time Student Y/N
Hea d							
Co-							
3.							
4.							
5.							
6.							
7.							
8.							

Are you enrolled as a student in an institute of higher education? Yes No (Institutions of higher education include post-secondary and vocational institutions)

Have you or will you be a full time student for at least 5 months this calendar year? Yes No

(Five calendar months do not need to be consecutive)

Do you anti	cipate any additions to the household in the next twelve months?	YES	NO
If yes,			

Will all of the persons in the household be full-time students this year or plan to be in the next

at an educational institution (other than a correspondence school) with regular faculty and

calendar year

IF YES, ANSWER THE FOLLOWING OUESTIONS: (Please mark/check the correct answer)

Are any full-time student(s) married and filing a joint tax return?	Yes	No
Are any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act?	Yes	No
Are any full-time student(s) an AFDC or a title IV recipient?	Yes	No
Are any full-time student(s) a single parent living with his/her minor child who is not a Dependent on another's tax return?		No
Have any full-time students previously been in foster care?	Yes	No

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C. INCOME

List ALL sources of income as requested below. If a section doesn't apply, **cross out** or write **N**/

Household Member Name	Source of Income	Gross Monthly
	Social Security	\$
	SSI Benefits	\$
	SSI Benefits	\$
	SSI Benefits	\$

Pansian (list source)	\$
Pension (list source)	
401-K	\$
Veteran's Benefits (list claim #)	\$
Reverse Mortgage Income	\$
	\$
Unemployment Compensation	\$
Long Term Insurance	\$
AFDC/TANF	\$
AFDC/TANF	\$
	\$
Regular payments from a severance package?	\$
Full-Time Student Income (18 & Over Only)	\$
Interest Income (source)	\$
Interest Income (source)	\$
Regular gifts from anyone outside the household? (Recurring Gifts)	\$

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Household Member Name	Source of Income	Monthly Amount
	Employment amount	\$
	Employer:	
	Position Held	
	How long employed:	

Employer: Position Held How long employed: Employer: Position Held How long employed: Self-Employment amount Description: How long has applicant been self-employed doing this work? Alimony Are you entitled to receive alimony? Yes No If yes, list the amount you are entitled to Do you receive alimony? Yes No If yes, list amount you receive. Child Support Is your child support court - ordered? Yes No If yes, list the amount you are entitled to Do you receive child support? Is your child support? Yes No If yes, list the amount you are entitled to So Do you receive child support? Yes No If yes, list the amount you receive. If entitled but do not receive, what attempts have been made to collect?	Employment amount	\$
How long employed: Employment amount	Employer:	
Employer: Position Held How long employed: Self-Employment amount Description: How long has applicant been self-employed doing this work? Alimony Are you entitled to receive alimony? Yes No If yes, list the amount you are entitled to Do you receive alimony? Yes No If yes, list amount you receive. S Child Support Is your child support court - ordered? Yes No If yes, list the amount you are entitled to Do you receive child support? Yes No If yes, list the amount you are entitled to The position of the property of the p	Position Held	
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Do you receive alimony? If yes, list amount you receive. Child Support Is your child support court - ordered? Yes No If yes, list the amount you are entitled to pagaina Do you receive child support? Yes No If yes, list the amount you receive. If entitled but do not receive, what attempts have been made to collect? Other Income		\$
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Do you receive child support? If yes, list the amount you receive. If entitled but do not receive, what attempts have been made to collect? Other Income	Is your child support court - ordered?	Yes No
If yes, list the amount you receive. If entitled but do not receive, what attempts have been made to collect? Other Income	If yes, list the amount you are <i>entitled</i> to	\$
If entitled but do not receive, what attempts have been made to collect? Other Income \$	Do you receive child support?	Yes No
Other Income \$	If yes, list the amount you receive.	\$
Other Income \$		
	attempts have been made to conect?	
	Other Income	\$
Other meeting		
	Other meome	Ψ
SS ANNUAL INCOME (Based on the monthly amounts listed \$		

\$	
Yes	No
	1
Yes	No
	Yes

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D. ASSETS If your assets are too numerous to list here, please request an additional form. If a section doesn't apply, cross out or write NA.				
Cash	#	Bank	Balance \$	
Checking Accounts	#	Bank	Balance \$	
	#	Bank	Balance \$	
Savings Accounts	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
Trust Accounts	#	Bank	Balance \$	
IRA Accounts	#	Where?	Balance \$	
Certificates of	#	Bank	Balance \$	
Deposit	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
401(k)/Retirement Accounts	#	Where?	Balance \$	
Credit Union	#	Bank	Balance \$	

		#		Bank		Bal	ance \$
Savings Bonds Life Insurance Policy		#		Maturity Date		Value \$ Value \$	
				Maturity Date			
		#		Maturity Date		Value \$	
		#			Cash Value \$		
Life Insurance Policy		#			Cash Value \$		
Mutual Funds	Name:		#Shares:		Interest or Dividend \$		Value \$
	Name:		#Shares:		Interest or Dividend \$		Value \$
	Name:		#Shares:		Interest or Dividend \$		Value \$
Stocks	Name:		#Shares:		Dividend Paid \$		Value \$
	Name:		#Shares:		Dividend Paid \$		Value \$
Bonds Name:			#Shares:		Interest or Dividend \$		Value \$
			#Shares:		Interest or Dividend \$		Value \$
Investment Property	t						Appraised Value \$
				Page 5			1

Real Estate (home, land, camp, mobile home, etc.: Do you own any property?	Yes No
If yes, Type of property	
Location of property	
Appraised Market Value	\$
Mortgage or outstanding loans balance due	\$
Amount of annual insurance premium	\$
Amount of most recent tax bill	\$

Have you sold/disposed of any property in the last 2 years?	Yes No	

Market value when sold/disposed	\$	
Amount sold/disposed for	\$	
Date of transaction		
Has anyone in the household disposed of any asset in the last 2 years (Example money,	: Given	away
	Yes	No
If yes, describe the asset		
Date of disposition		
Amount disposed	\$	
Do you have any other assets not listed above or are you holding jewelry, coins, stamps,	Yes	No
If yes, please list:		
E. ADDITIONAL INFORMATION		
Are you or any member of your family currently using an illegal substance?	Yes	No
Have you or any member of your family ever been evicted from any housing or	Yes	No
If yes, describe		
Have you ever filed for bankruptcy? Yes No		
If yes, describe		
Will you take an apartment when one is available?	Yes	No
Briefly describe your reasons for applying: Page 6		
Have you ever experienced a fire in your apartment? No		Yes

If yes, Type of property

	F. REFERENCE	INFORMATION
	Name of Landlord:	
	Address:	
Current Landlord	Home Phone:	
	Bus. Phone:	
	How Long?	
	Applicants Address:	
	Name of Landlord:	
	Address:	
Prior Landlord	Home Phone:	
	Bus. Phone:	
	How Long?	
	Applicants address when	
	Name of Landlord:	
	Address:	
Prior Landlord	Home Phone:	
	Bus. Phone:	
	How Long?	
	Applicant's address when	
Personal Reference	»:	
Address:		
Relationship:		Phone #:

In case of emergency notify:		
Address:		
Relationship:	Phone #:	
G. VEH	HICLE INFORMATION (if applicable	e)
List any cars, trucks, or other vehicle with	es owned. Parking will be provided for o	one vehicle. Arrangements
Type of Vehicle:	License Plate #:	
Year/Make:	Color:	
Type of Vehicle:	License Plate #:	
Year/Make:	Color:	
eligibility for housing will be bas criteria. I/We certify that all informand I/We understand that false stancellation of this application or have the Owner/Management A	this apartment prior to occupancy. sed on applicable income limits and mation in this application is true to the atements or information are punishatermination of tenancy after occupangent verify all of the information dit, landlord, criminal background and	I by management's selection he best of my/our knowledge able by law and will lead to ncy. I/We further consent to n contained in this Rental
Any changes in family househoreported to the management office within	old income or student status cha	anges are required to be
_	lder, are required to sign appl	lication.
(Signature of Tenant)		
(Signature of Co-Tenant)		Date
(0		Date Date

(Signature of Co-Tenant)	Date	
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APPOINTMENT LIST

The following is the list of documentation that must be brought with you to your eligibility interview for housing at **Bradford Pointe Apartments**. Please bring <u>all</u> papers that pertain to your household income.

ALL household members 18 years of age and older must attend this appointment.

IDENTIFICATION INFORMATION

- 1. Birth Certificate for all household members.
- 2. Social Security Cards for all household members.
- 3. Drivers license and/or photo ID for all household members 14 years of age and older
- 4. Vehicle registration and insurance.
- 5. Picture of all members of the household.

INCOME VERIFICATION

- 1. Four (4) recent, consecutive pay stubs if currently employed or unemployment stubs.
- 2. Social Security benefits award letter for current year.
- 3. Veteran's and/or other pension award letter.
- 4. Court order(s) showing child support and/or alimony payments.
- 5. Welfare benefits or other assistance letter(s).
- 6. 1040 Federal Tax Return for most recent year and W-2.
- 7. All other information concerning household income.

ASSET INFORMATION

- 1. Checking account statements for the last Six (6) months.
- 2. Savings accounts statement current month.
- 3. IRAs, 401K, CDs, stocks, bonds most recent dividend statement.
- 4. Real Estate broker's assessment of any property owned.
- 5. Mortgages or real estate transactions for the past two (2) years.
- 6. All other information concerning any assets of the household.