# The Greens at Pine Hill I & II



MANAGEMENT OFFICE 350 Blackwood-Clementon Road Pine Hill, NJ 08021 www.TheGreensAtPineHill.com phgleasing@crmresidential.com

(856) 627-0200 Fax: (856) 783-2444

Office Hours: Monday-Friday 9am-5pm Evening appointments available by request

Thank you for your interest in our apartment community. Listed below are the income requirements for each property. **HEAT, HOT WATER AND COOKING GAS ARE INCLUDED IN RENT.** 

## THE GREENS AT PINE HILL

#### 1 Bedroom

Minimum Household\* Income: \$28,400 gross annually Maximum Household\* Income: 1 Person \$48,180 gross annually 2 Persons \$55,080 gross annually

Your rent will be 30% of your monthly adjusted income but no less than \$878.00 and no more than \$951.00 per month

### 2 Bedroom

Minimum Household\* Income: \$34,050 gross annually Maximum Household\* Income: 2 Persons \$55,080 gross annually 3 Persons \$61,980 gross annually 4 Persons \$68,820 gross annually

Your rent will be 30% of your monthly adjusted income but no less than \$1,051.00 and no more than \$1,137.00 per month

## THE GREENS II

#### 1 Bedroom

Minimum Household\* Income: \$28,400 gross annually Maximum Household\* Income: 1 Person \$48,180 gross annually 2 Persons \$55,080 gross annually

Your rent will be 30% of your monthly adjusted income but no less than \$967.00 and no more than \$1,022.00 per month

## 2 Bedroom

Minimum Household\* Income: \$34,050 gross annually Maximum Household\* Income: 2 Persons \$55,080 gross annually 3 Persons \$61,980 gross annually 4 Persons \$68,820 gross annually

Your rent will be 30% of your monthly adjusted income but no less than \$1,158.00 and no more than \$1,222.00 per month

\*IF THERE IS MORE THAN ONE INCOME IN A HOUSEHOLD, THEN ALL INCOME WILL BE COMBINED.







## MANAGEMENT OFFICE 350 Blackwood-Clementon Road Pine Hill, NJ 08021 www.TheGreensAtPineHill.com

(856) 627-0200 Fax: (856) 783-2444

TRS: 1-800-852-7897

Dear Future Resident,

Thank you for your interest in The Greens at Pine Hill I & II! We pride ourselves on being the best apartment community in the area.

Enclosed please find a preliminary application, which is the first step in making our community your new home. This allows us to check your credit, criminal and landlord background. Please note that there is no application fee. In order to expedite the process, please be sure to include a copy of the following with your completed packet:

- · Photo Identification
- Social Security Card
- · Proof of income

Once we have verified that you have met the income and credit qualifications, we will schedule an appointment for you to complete the remaining paperwork for your new home.

We look forward to working with you to make your leasing experience a pleasant one. Please contact us if you have any questions at (856) 627-0200.

Yours truly,

The Greens Leasing Team

Property Name: The Greens at Pine Hill I & II

# **PRELIMINARY APPLICATION - NEW JERSEY ONLY**

	Date:	
	Time:	•
Apartment size apply	ing for: _	
11.	-	

1.	List	each person in your household starting with yourself. Information will be added to the property's waiting
	liet	Incomplete applications will not be processed

FIRST NAME	BIRTH DATE	SEX	RELATIONSHIP TO YOU	ANNUAL INCOME	SOCIAL SECURITY NO.	Student Status Full/Part- Time Y/N
			Head			1
	FIRST NAME			PIRST NAME DATE SEA TO YOU	TO YOU INCOME	TO YOU INCOME SECURITY NO.

							l	Ĺ		
2.	2. Does anyone live with you now who is not listed above? □Yes □No									
3.	. Do you expect any change in your household composition? □Yes □No									
4.	. If you answered yes to either #2 or #3, please explain:									
5.	5. What type of income do you have: □Employment □Social Security or SSI □Welfare □Unemployment □Child Support □Other:									
6.	Current Street	Address:						-		
	City:			s	tate: Zip	Code:	Apt. No:	_		
	Home Phone:				Cell Pho	ne:		_		
	Email address	:						-		
7.	Are you a U.S.	. Citizen? □Ye	s □No							

9. Are you currently residing in subsidized housing or do you have a Section 8 voucher? □Yes □No

Household:

8. Please identify any special housing needs that may be required by you or any of the members in your





## **CERTIFICATION**

I/We hereby certify that I/We do/will not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We understand that our eligibility for housing will be based on applicable income limits and by management's selection criteria. I/We certify that all information in this application is true to the best of my/our knowledge and I/We understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. I/We further consent to have the Owner/Management Agent verify all of the information contained in this Rental Application as well as my/our credit, landlord, criminal background and personal references. Any conditional offers based on criminal record must be explained in writing their justification for doing so and will be accompanied by using the Disclosure Statement on DCR's website, found at https://www.njoag.gov/wp-content/uploads/2021/12/Model-Disclosure-Statement\_12.14.21.pdf. Applicants may request the information the housing provider relied upon and can submit mitigating infraction or inaccuracies related to aspects of their criminal record which may bey considered under the FCHA, which the housing provider must then consider.

Any changes in family household income or student status changes are required to be reported to the management office within 10 days of the change.

ult applicants, 18 or older, are required to sign appli TURE(S):	cation.
(Signature of Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date





## MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

The New Jersey Law Against Discrimination, N.J.S.A. 10:5-1 to -49, makes it unlawful to discriminate in the sale or rental of housing based on a person's race, creed, color, national origin, ancestry, nationality, affectional or sexual orientation, disability, gender, marital status, familial status (whether you have a child, a parent-child relationship with a minor, or you are pregnant), lawful source of income or rental subsidy used for rental payments.

The New Jersey Division on Civil Rights is the State agency that is authorized to enforce the Law Against Discrimination. Under the Division's Multiple Dwelling Reporting Rules, N.J.A.C. 13:10-1.1 to -2.6, the Division requires landlords to collect and record information about applicants for apartment rentals and tenants in apartment complexes throughout New Jersey. The Multiple Dwelling Reporting Rule requires landlords to provide a summary of this information to the Division and to retain the information on this form. The information is used to prevent and eliminate discrimination in housing. Your cooperation in filling out this form will assist the Division in enforcing the Law Against Discrimination.

Please note that, although landlords must record certain information about the race and ethnicity of applicants and tenants, it is unlawful to record or ask applicants or tenants about other characteristics such as religion, gender, marital status or affectional or sexual orientation.

If you feel you have been denied housing or treated differently for one of the reasons listed above, you may contact the Division on Civil Rights at (609) 984-3138 for referral to a local Division office for additional information or assistance.

Visit the Division on Civil Rights Web site at: www.NJCivilRights.org

Tenants/applicants: Fold & tear along dotted line and retain top portion for your records

## MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

If the tenant/applicant chooses not to complete this form, the landlord or the landlord's representative is required to conduct a visual observation of the tenant or applicant and then complete this form as accurately as possible.

This form is not intended to be a part of the rental application process and must be kept separate and apart from rental records.

☐ Ten:	ant 🗀 Applicant N	ame:				
Address	3:					
City:		_ State:	_Zip code:		Phone Number:	
Race/Et	hnicity: Please chec	k all that ap	oly to leasel	holders (te	enants) or applican	ts.
	Hispanic or Latino other Spanish origin Asian: a person have the Indian subcontine Philippine Islands, TAmerican Indian of North or South American Indian of Philippine Hawaiian of peoples of Hawaii, (	a person of or culture, o ring origins is ent, including hailand, and r Alaska Narica or Other Paguam, Samoa a person have	Cuban, Me r a person h n any of the g Cambodia. Vietnam tive: a personic Islanda, or other P	xican, Puraving a S coriginal p China, In son having der: a per vacific Isla	erto Rican, South of panish surname peoples of the Far India, Japan, Korea, gorigins in any of son having origins ands	ginal peoples of Africa or Central American or East, Southeast Asia, or Malaysia, Pakistan, the the original peoples of s in any of the original es of Europe, the Middle
	Date:	Comple	ted by:	Tenant	Applicant	☐ Landlord
Tf 1	harra amer amostions	.ogording th	ia in anies:	nlages car	test the Division	on

If you have any questions regarding this inquiry please contact the Division on Civil Rights, Multiple Dwelling Unit at 609-984-3138 between the hours of 9:00 Civil Rights to 5:00 Monday through Friday, or e-mail the MDRR unit at DCRMDRR@njcivilrights.org

DCR/EIU/MDRR/LS2005

# Notice H 2009-11 Form

Notice H 2009-11, issued on September 9, 2009 reiterates current regulatory requirements whereby owners and management agents must perform necessary criminal history background checks to determine if any applicant, or a member of an applicant's household, is subject to a lifetime registration requirement under a State sex offender registration program. The same background check will be done at every annual recertification. The Notice also strongly encourages that owners and management agents establish standards and processes with a zero tolerance approach to prevent lifetime sex offenders from receiving federal housing assistance. Unit # All Household Member Names: Are any household members subject to a lifetime state sex offender registration program in any state? (YES) list who (NO) Failure to respond to the above question may jeopardize the approval of the application or may determine just cause to terminate an existing lease. Head of Household (signature) Date PENALTIES FOR MISUSING THIS FORM Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD, or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person, who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8). To be completed by management Each of the persons named above have been verified for lifetime sex offender registry via The Dru Sjodin National Sex Offender Public Website (NSOPW). http://www.nsopw.gov/Core/Conditions.aspx Management Agent (print name) Date (signature) Management Agent





# Do you have a Social Security Number (SSN)?

## If you do not disclose a SSN, you may not be able to receive housing assistance.

The federal government requires each applicant for HUD-assisted housing to provide documentation of their SSN to the property owner/manager by the time a unit becomes available. This requirement affects household members who are U.S. citizens, U.S. nationals and eligible non-citizens.

# The SSNs of all members of my household have been provided. What do I do?

Nothing further is required. The owner/property manager will contact you if there is a problem with the SSN of any of your household members.

# I have not provided SSNs for all of my household members to the property owner/manager. What do I do?

Does everyone in your household have a SSN?

#### Yes

- Ensure the correct SSN for each household member who is a U.S. citizen, U.S. national or eligible non-citizen is reported to the owner/property manager by the time a unit becomes available.
- You will need to provide the owner/property manager with the documentation to verify the SSNs.

### No.

- 1. For any household member who is a U.S. citizen, U.S. national or eligible non-citizen and does not have a SSN, apply for a SSN by submitting a completed SS-5 form to the Social Security Administration. For the SS-5 form and/or assistance, contact the owner/property manager.
- 2. Provide documentation of a SSN for each household member who is a U.S. citizen, U.S. national or eligible noncitizen to the owner/property manager by the time a unit becomes available.

Note: If you turned 62 before January 31, 2010, ask the property manager for further details on what you need to do.



U.S. Department of Housing and Urban Development
Office of Housing

Signature Date

# U.S. Department of Housing and Urban Development Office of Housing

OMB Approval No. 2502-0204 Exp. 6/30/2017

# LEASE ADDENDUM

<u>Viol</u>	L. ENCE AGAINST WOMEN AND JU	EASE ADDENDUM ISTICE DEPARTMENT REA	AUTHORIZATION ACT OF 2005
TEN	NANT	LANDLORD	UNIT NO. & ADDRESS
	se addendum adds the following nd Landlord.	paragraphs to the Lease b	etween the above referenced
Purpose	of the Addendum		
The Viol	lease for the above referenced u ence Against Women and Justic	nit is being amended to inc e Department Reauthoriza	clude the provisions of the tion Act of 2005 (VAWA).
Conflict	ts with Other Provisions of the	Lease	
	ase of any conflict between the porovisions of this Addendum sha		m and other sections of the Lease,
Term o	f the Lease Addendum		
	effective date of this Lease Addinue to be in effect until the Lea		This Lease Addendum shall
VAWA	Protections		
2.	serious or repeated violations of tenancy or occupancy rights of the Landlord may not consider member of a tenant's household for termination of assistance, tenant's family is The Landlord may request in whether the certify that the individual Violence, Dating Violence or Ston the certification form, be conupon extension date, to receive	the lease or other "good of the victim of abuse. criminal activity directly representancy, or occupancy rights the victim or threatened withing that the victim, or a talking, Form HUD-91066 appleted and submitted with protection under the VAW	victim of that abuse. family member on the victim's that the Certification of Domestic 5, or other documentation as noted hin 14 business days, or an agreed
Tenant		· D	Pate
Landlo	rd		Date Date

Form HUD-91067 (9/2008)

# LANDLORD REFERENCE FORM

Send To:			
-14-			
Applicant/Tenant:	Unit #		
Property Name:			
Applicant's Signature:	Date:		
I hereby authorize the release of the	requested information. Information obtained under this consent is limited to informa	tion that	
is no older than 12 months. There are	re circumstances that would require the owner to verify information that is up to 5 years a separate consent attached to a copy of this consent. You do not have to sign this	form if	
	or the organization supplying the information is left blank.		
This section for landlord to fill	out		
How long has the applicant been at t	·····		
110W long has the approant occur at	22011 22001		
	·	Yes	No
Was rent paid on time?			
If rent was paid late, indicate how	w many times.		
Was unit maintained in a safe an	d sanitary manner?		
Were there any problems with ne			
Were there any tenant-caused da	mages?		
Were children properly supervise			
	in the apt.other than those listed as residents on the lease?	-	<u> </u>
Are you related to this family/pe			
Would you rent to this family/pe	erson again?		<u> </u>
If not, please state why:			T
	roceedings against this household?	<u> </u>	
If yes, why?			<del></del>
	111 1 1 0 1		
Any additional information you:	may care to provide would be helpful.		<del> </del>
		<del></del>	
Landlord Name (print):	Telephone:		
Landlord Signature:	Date:		
	** Return form via Fax to: 856-783-2444 ***	<del></del>	
	OFFICE USE ONLY		
Date Received:			
Comments:			

Note: Section 101 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentation to any Department or Agency of the United States as to any matter within its jurisdiction. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purpose cited. Any person who knowingly or willingly requests, obtains or discloses any information under false pretense concerning an applicant or participant may be subject to misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for missing the social security number are contained in the Social Security Act at. 208 (a) (6), (7) and (8).

# The Greens at Pine Hill I & II





## MANAGEMENT OFFICE 350 Blackwood-Clementon Road Pine Hill, NJ 08021 www.TheGreensAtPineHill.com

(856) 627-0200 Fax: (856) 783-2444 TRS: 1-800-852-7897

## 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, CRM Residential Management, its related property owners, and their respective agents (collectively known as "Management") 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. Management 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, Management 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.

Management 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.

Management 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 1st degree indictable offense, or release from prison for that offense, within the past 6 •
  years;
- Is for any 2nd or 3rd degree indictable offense, or release from prison for that offense, within the past 4 years; or
- Is for any 4th 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/.

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

If Management utilizes any vendor or outside person/entity to conduct a criminal record check on their behalf, Management 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 Management 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, Management 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 Management in making this determination.

You have the right to dispute, within ten (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 Management at any time, including after the ten days.

Any action taken by Management 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 CRM Residential

Management or the related property ownership entity has violated any of the above requirements, you may contact the New Jersey Division on Civil Rights at www.NJCivilRights.gov 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 https://www.nj.gov/oag/dcr/housing.html, or available for pickup in any of DCR's four (4) regional offices.

31 Clinton Street, 3rd Floor	1601 Atlantic Avenue, 6th Fl.			
Newark, NJ 07102	Atlantic City,	Atlantic City, NJ 08401		
5 Executive Campus	140 East Fro	140 East Front Street, 6th Floor		
Suite 107, Bldg. 5	Trenton, NJ 08	3625		
Cherry Hill, NJ 08002				
Housing Provider Signature		Date		
Applicant's Signature		Date		

Co-Applicant's Signature

Date