



# Tenant Information

Dear Tenant:

Your landlord has recently applied for one of the City of Long Branch Home Repair Programs. Approval of the application is based, in part, on the income of each of the households occupying the building.

Please complete the attached tenant portion of the application, and supply the paperwork listed on the checklist on the last page. You may give this application to your landlord, or you may submit it directly to the Office of Community and Economic Development, 228 Broadway, Long Branch, NJ, 00740.

Your household must meet the income guidelines established by the state in order for your landlord to qualify for this program. You must disclose ALL sources of income, whether taxable or not, earned by all members of your household 18 years of age and older.

You must include copies of the last three paystubs for each working member of your household, Social Security or Pension statements, as well as statements from all other sources of income including welfare, food stamps, Section 8, child support, alimony, etc.

You must also include copies of your most recent tax return, either filed by an accountant or verified by the IRS. To receive an IRS verification, please call them directly at 1-800-772-1213. Please be aware that this process can take several weeks.

If you have any questions, please call our office at 732-923-2045. We will be happy to assist you.

**CITY OF LONG BRANCH  
MULTI-FAMILY HOME REPAIR PROGRAM  
APPLICATION**

## A. **Tenant Information**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Spouse: \_\_\_\_\_ Age: \_\_\_\_\_

Address

Long Branch, NJ Phone:

### Number of Household Members:

**B. Income Verification**

1. Employer's Name \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Years At Job: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Yearly Salary: \_\_\_\_\_
  
2. Employer's Name \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Years At Job: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Yearly Salary: \_\_\_\_\_
  
3. Employer's Name \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Years At Job: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Yearly Salary: \_\_\_\_\_
  
4. Employer's Name \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Years At Job: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Yearly Salary: \_\_\_\_\_

**PLEASE TOTAL ALL SOURCES OF INCOME. YOU MUST PROVIDE PROOF OF ALL INCOME.**

Employment	\$ _____	Interest Income	\$ _____
Social Security	\$ _____	Unemployment	\$ _____
S.S.I.	\$ _____	Rental Income	\$ _____
Pension(s)	\$ _____	Other	\$ _____
Child Support	\$ _____	<b>TOTAL HOUSEHOLD INCOME</b>	\$ _____

## **Part 2: Financial Information**

Monthly Rent: \_\_\_\_\_

Amount Subsidized by Section 8 (if applicable) \_\_\_\_\_

Monthly Gas Bill \_\_\_\_\_

Monthly Electric Bill \_\_\_\_\_

Monthly/Quarterly Water Bill \_\_\_\_\_

**Note: This application and all information relating to it will be kept confidential**

## **Part 3: Certifications**

I hereby agree to permit the City of Long Branch Office of Community and Economic Development to verify my employment, income, and any other information provided in this application.

I hereby certify that the information and documentation furnished herein is true and correct to the best of my knowledge.

I understand that deliberate concealment of income or other falsification of information in this document may result in denial of the landlord's application.

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(Tenant 1)

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Date

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Social Security Number

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(Tenant 2)

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Date

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Social Security Number

The information in this section is requested for HUD statistical purposes only. You are not required to answer, however, your cooperation will be appreciated.

Please check the appropriate category:

<input type="checkbox"/> White	<input type="checkbox"/> Asian/Pacific Islander
<input type="checkbox"/> Black	<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> Hispanic	

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Witness

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Date

## FINANCIAL PRIVACY NOTICE TO APPLICANTS

This is notice to you as required by the Right to Financial Privacy Act of 1978 that the Department of Housing and Urban Development has a right of access to financial records held by any financial institution in connection with the consideration of administration of the program to which you have applied.

Financial records involving your transactions will be available to the City of Long Branch during the term of the contract and three (3) years thereafter without further notice or authorization but will not be disclosed or released to another Agency or Department without your consent, except as required or permitted by law.

Received \_\_\_\_\_

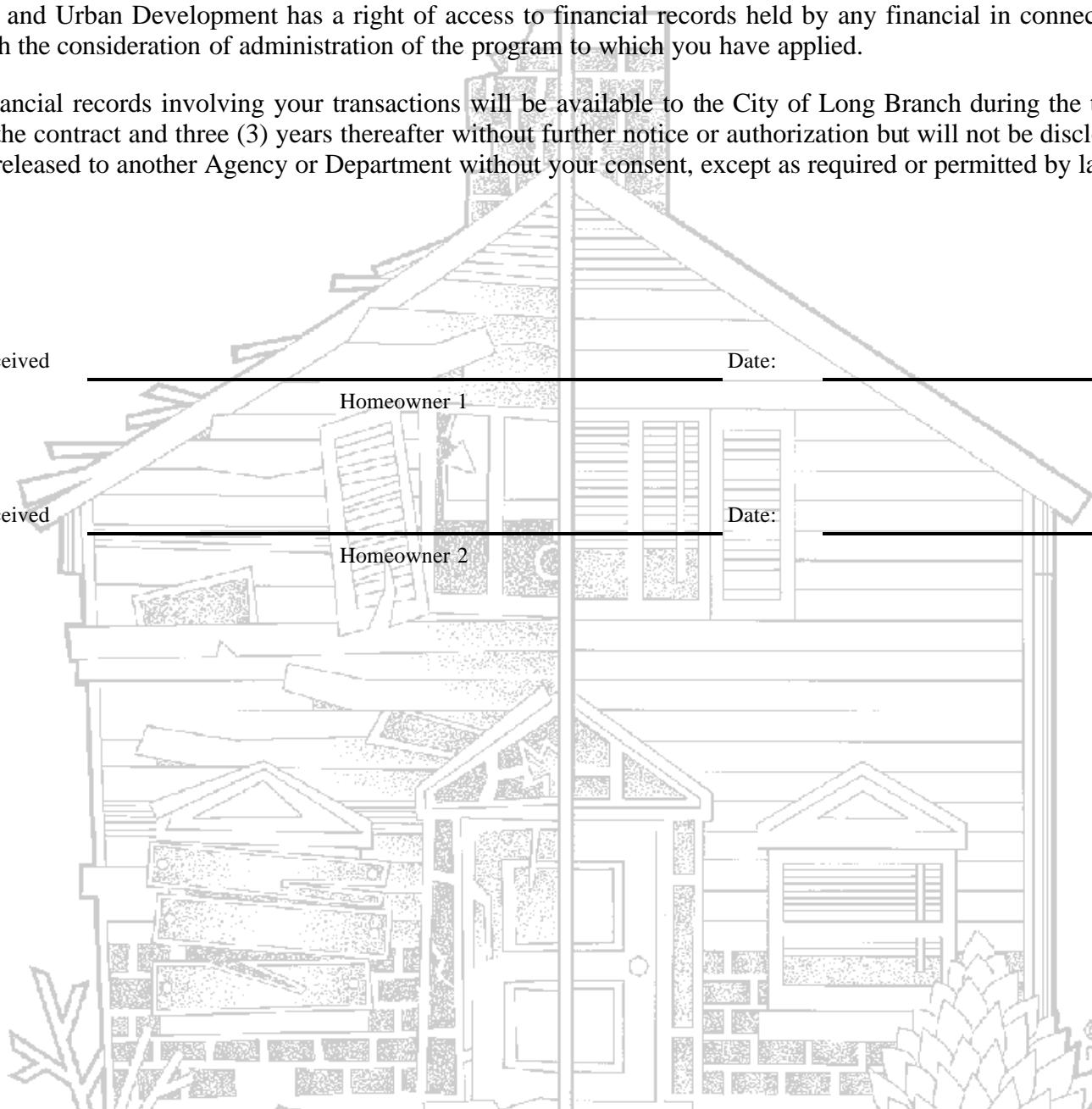
Date: \_\_\_\_\_

Received \_\_\_\_\_

Date: \_\_\_\_\_

Homeowner 1

Homeowner 2



## Home Repair Application Document Checklist

1. Application — all pages completely filled in, signed by all tenants, witnessed and dated where necessary
2. Most recent tax return filed by an accountant or verified by the IRS
3. Social Security Statement (if applicable)
4. Statement of pension (if applicable)
5. Last three paystubs (if applicable)
6. Documentation of any other source of income
7. Copy of divorce settlement (if applicable)
7. Copy of death certificate of spouse (if widow/widower)