Preliminary Application

Minimum Income Requirements

1 Bedroom, Low Income
Min. Income: $24,754

1 Bedroom, Moderate Income
Min. Income: $33,755

2 Bedroom, Low Income
Min. Income: $29,691

2 Bedroom, Moderate Income
Min. Income: $40,506

Maximum Annual Income Limits for Essex County, NJ

<table>
<thead>
<tr>
<th>Persons</th>
<th>Low Inc. Maximum</th>
<th>Moderate Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>One</td>
<td>$30,630</td>
<td>$49,008</td>
</tr>
<tr>
<td>Two</td>
<td>$35,006</td>
<td>$56,009</td>
</tr>
<tr>
<td>Three</td>
<td>$39,381</td>
<td>$63,010</td>
</tr>
<tr>
<td>Four</td>
<td>$43,757</td>
<td>$70,011</td>
</tr>
</tbody>
</table>

Income Limits are subject to change without notice.

Fairfield Township Accessory Apartments

Thank you for taking a look at The Accessory Apartment Program in Fairfield, Essex County, NJ. In cooperation with individual developers and owners, the Township is in the process of providing a number of apartments at reduced rents to qualified low and moderate income-qualified households. Minimum and maximum income, credit standards and other requirements will apply.

To become eligible for the low- and moderate- income apartments, please complete and return a Preliminary Application. We will process your application and send you a confirmation within two weeks. When apartments become available, we will contact a limited number of applicants who are on our list for the size and income category of the apartment that will be available. A final application and documentation to verify identity and income will be required and processed at that time.

If you are interested in applying to rent an affordable in the township of Fairfield, you can download an application by clicking Fairfield Preliminary Application; e-mail us at Fairfield@HousingQuest.com; or call us at 609-786-1100, then press 5 to request an application. If you leave a message by email or phone, please be sure to refer to "Fairfield accessory" and spell out your contact information for us. If you are interested in developing an apartment under this program, please contact the Township of Fairfield, at 973-882-2700.

Please complete the Preliminary Application as soon as possible and fax or mail it directly to us, at:

Piazza & Associates, Inc.
216 Rockingham Row
Princeton Forrestal Village
Princeton, NJ 08540
Fax: 609-786-1105.

Note: Additional information about this program, such as income eligibility, can be found on the application form.
IMPORTANT:
All of the information contained on this site is provided as a courtesy to those seeking an affordable home. Piazza & Associates, Inc. is not responsible for any offers or errors contained herein.
On behalf of the Township of Fairfield, New Jersey, I want to thank you for your interest in our affordable accessory apartment program. In cooperation with individual developers and owners, the Township is in the process of providing a number of apartments at reduced rents to qualified low and moderate income-qualified households.

Our firm has been engaged to assist you in the application process and to ensure that every qualified applicant has an equal opportunity to live in an accessory apartment in the Township. If you are interested in an affordable apartment in Fairfield, please complete a Preliminary application (attached). You can fax it to our office at 609-786-1105, or mail it directly to:

Piazza & Associates, Inc.
216 Rockingham Row
Princeton, NJ 08540.

Within two weeks, you will receive a letter of determination with regard to your preliminary eligibility for the program. We will contact you, again, once an apartment becomes available. At that time, we will send you a final application and ask that you document your income. Maximum and minimum income, credit standards and other requirements will apply.

This is a Preliminary Application, only. This program is under development and the apartments will be constructed and leased over the course of time. They are not immediately available. Rental rates for each apartment will be published as it nears completion.

Please give us a call if you have any questions regarding the application process.

Sincerely,

Frank Piazza

<table>
<thead>
<tr>
<th>Number of Bedrooms</th>
<th>Income Category</th>
<th>Minimum+ Income</th>
<th>Maximum Income by Household Size</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1 Person</td>
<td>2 Persons</td>
</tr>
<tr>
<td>One</td>
<td>Low</td>
<td>$24,754</td>
<td>$30,630</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>$33,755</td>
<td>$49,008</td>
</tr>
<tr>
<td>Two</td>
<td>Low</td>
<td>$29,691</td>
<td>$35,006</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>$40,506</td>
<td>$56,009</td>
</tr>
<tr>
<td>Three</td>
<td>Low</td>
<td>$34,325</td>
<td>$39,381</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>$46,807</td>
<td>$63,010</td>
</tr>
</tbody>
</table>

Rental rates will be published as each apartment becomes available. Each apartment will be owned and operated by individual landlords. Applicants may be subject to additional restrictions, set forth by the landlord. Income limits are subject to change without notice. Other restrictions apply.

+ Minimum Income standards generally do not apply to applicants with Section 8 Rental Assistance.
Fairfield Township
Accessory Apartment Program

Preliminary Application
for
Affordable Housing

Affordable Housing Application Information: 609-786-1100
For Owner information, call Township: 973-882-2700

This is a Preliminary Application only. Do not send supporting documentation at this time. You will be notified as to the status of your preliminary eligibility based on the information that you provide in this application. When an affordable apartment becomes available, eligible candidates will be contacted. At that time, we will provide you with a list of documentation that you will need to support and verify the information submitted in this application. We can not and do not guarantee housing based on the approval of this Preliminary Application.

The Accessory Apartments are privately owned and operated by individual Landlords, who are solely responsible for the rental offering and lease agreement; as well as the condition and maintenance of the apartment. Affordable housing certification and monitoring services are provided by Piazza & Associates, Inc. on behalf of the Township of Fairfield, New Jersey. This is an Equal Housing Opportunity. This program is subject to municipal and state affordable housing regulations, but no guarantee can be made that these homes are affordable to all applicants. This program is subject to availability. Rental rates, terms and conditions are subject to change without notice.
Affordable Housing
Fairfield Township
Policies and Requirements
Accessory Apartment Program

For All Applicants

♦ This is an equal housing opportunity. It is unlawful to discriminate against any person making application to rent a home with regard to race, color, religion, national origin, sex, handicapped or familial status.

♦ This affordable housing must be the intended primary residence of the applicant.

♦ All household members who intend to reside in the affordable apartment must be listed in the Preliminary Application. If changes in household composition occur during the application process or after occupancy, the applicant or resident is required to notify Piazza & Associates, Inc. and the apartment owner (if one has been identified) in writing, immediately.

♦ Applications must be truthful, complete and accurate. Any false statement makes the application null and void, and subjects the applicant to penalties imposed by law.

♦ Specific documentation to verify income and assets will be required at a later date, during the final portion of the application process.

♦ The Landlord (private Owner / Operator) may set forth additional requirements, including, but not limited to credit worthiness, income, rental history, identification, occupancy guidelines, a lease agreement and security deposit.

♦ Neither the Township of Fairfield, nor Piazza & Associates, Inc. can guarantee that any low- or moderate- income apartment will be affordable to any specific applicant.

♦ Once leased, rents will NOT be adjusted to accommodate fluctuations in household income. Rental rate increases may occur annually, but are subject to limitations set forth by the State of New Jersey.

DO NOT SEND SUPPORTING DOCUMENTATION WITH THIS APPLICATION.

Please detach the application form and fax to (609)786-1105 or mail to:

Piazza & Associates, Inc.
216 Rockingham Row - Princeton, NJ 08540
Preliminary Application for Affordable Housing

Fairfield Township
Accessory Apartment Program

A. Head of Household Information

Last Name: ____________________________
First Name: ____________________________
Home Address: ____________________________
P.O. Box or Apt. No.: ____________________________
City: ____________________________

Soc. Sec. No: _______--_______--_______
Home Phone: (___)______--_______
Work Phone: (___)______--_______
County: ____________________________
State: _______ ZIP: ____________________________

B. Household Composition and Income (List ALL sources of income, including, but not limited to Salary, Dividends, Social Security, Child Support, Alimony & Pensions. DO NOT include income from Assets listed in Section C.)

<table>
<thead>
<tr>
<th>Full Name (First, Middle &amp; Last)</th>
<th>Relation To</th>
<th>Date of Birth</th>
<th>Sex</th>
<th>Gross Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Head of Household</td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>#2</td>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>#3</td>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>#4</td>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

The total number of members in this household is: _______

Do you require a handicap-accessible apartment?: _______
Do you currently receive Section 8 Rental Assistance?: _______

C. Assets (Bank Accounts, Cert. of Deposit, Mutual Funds, Real Estate, Etc. If you own the home in which you live, clearly indicate BOTH the market value & your equity in the home. Your equity equals the market value less any outstanding mortgage principal.)

<table>
<thead>
<tr>
<th>Type of Asset</th>
<th>Current Market Value of Asset</th>
<th>Estimated Annual Income</th>
<th>Annual Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>%</td>
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<td></td>
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<td>%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>%</td>
</tr>
</tbody>
</table>

D. Current Situation

Do you currently:
□ Rent?
□ Own?
□ Other _______

If you own, what is the value of your home?
$ ____________

What is the principal Balance of your Mortgage?
$ ____________

E. Preferences

No. of Bedrooms (limited by number in household):
□ One?
□ Two?
□ Three?

Do you prefer:
□ 1st Floor?
□ 2nd Floor?
□ Will accept either 1st or 2nd.

F. Important Information (Must be signed by everyone over the age of 18.)

I(We) hereby authorize the Landlord and/or Piazza & Associates, Inc., their agents and/or employees to obtain information regarding the status of my(our) credit, and to check the accuracy of any and all statements and representations made in this application. I(We) certify that all information in this application is accurate, complete and true. I(We) understand that if any statements made are willingly false, the application is null and void, and I(we) may be subject to penalties imposed by law. THIS APPLICATION IS VOID IF NOT SIGNED.

Signed: ____________________________ Date: ____________________________
Signed: ____________________________ Date: ____________________________

Please use back of application for additional information.
Additional Information

Fairfield Township
Accessory Apartment Program

Please use this page to provide us with any additional information about your application.