Freedom Village at Woodstown
Housing That Supports Independence
21 Alloway Road, bldg. 600, Woodstown, NJ 08098
Phone 856-624-4179 / Fax 856-624-4478

Re: Application for Freedom Village at Woodstown

Dear Applicant,

Thank you for your interest in Freedom Village at Woodstown.

- Please complete the attached application and submit it for consideration.
- It is very important that you **complete all fields and include everyone who will be living in the unit (regardless of age).**
- An incomplete application could result in a returned application and a delay in getting on the waiting list.
- Applications are date and time-stamped when received.

There is a waiting list in each of our facilities, managed separately by each site manager. If you are interested in more than one of our sites, you must apply separately to each. General pre-applications for each site can be printed at **www.projectfreedom.org**.

- Please note the income requirements in place for the 1-, 2- and 3-bedroom units on the pre-app.
- To qualify, you must make the minimum specified for each size unit and not exceed the maximums per the number of people who will live in the unit.
- If you have an on-going rental assistance voucher, the income requirements may be adjusted.
- PO Box addresses are not acceptable and Social Security Numbers are required for each family member 18 and older.

If you are eligible, intermittently, we will communicate with you regarding your continued interest in the community. Keep us apprised of any change of address or contact information or we will not be able to reach you when your name comes up on the waiting list.

Sincerely,

Sammi DeMaris

Sammi Demaris
Property Manager/Social Service Coordinator
856-624-4179

Project Freedom, Inc. **is a 501(c)(3) non-profit organization that develops and operates barrier-free housing to enable individuals with disabilities to live independently. While it may not be a requirement for tenancy, all units are wheelchair accessible.**

Freedom Village at Woodstown

Beautifully designed

1, 2, and 3 Bedroom Apartments

Applicants must
Meet minimum income requirements and cannot exceed maximums

Project Freedom Inc. Office
21 Alloway Road, Bldg 600, Woodstown, NJ 08098
856-624-4179 (p) / 856-624-4478 (fx)
sdemaris@projectfreedom.org

Minimum income for eligibility is:

$23,000 for one bedroom,
$25,000 for two bedrooms and
$27,000 for three bedrooms per household per year.

Office Hours: Monday –Friday 9-5 PM – Summer Hours: 9:00 – 4:30 PM

MAXIMUM INCOME LIMITS

Household Size (# of people)	1 person	2 people	3 people	4 people	5 people	6 people	7 people
Maximum Income 60% (low)	$51,540	$58,920	$66,300	$73,620	$79,560	$85,440	$91,320

Rents (To be eligible for units you must be within income restrictions for each type)

1 Bedroom **$871**
2 Bedroom (60% Unit) **$1041**
3 Bedroom (60% Unit) **$1192**

NOTE: Tenant is responsible for Gas, Electric and Water Bills

Incomes and Rents subject to change
Housing Choice/Section 8 Vouchers Accepted
All Units Are Spacious and Wheelchair Accessible

Equal Opportunity Employer EQUAL HOUSING OPPORTUNITY **Equal Opportunity Housing**

Project Freedom, Inc
Pre-Qualifying Application
Freedom Village at Woodstown

YOU MUST HAVE A MINIMUM TOTAL HOUSEHOLD INCOME OF:

$23,000 – to qualify for a 1-bedroom apartment
$25,000 – to qualify for a 2-bedroom apartment
$27,000— to qualify for a 3-bedroom apartment

All fields are required (select desired bedroom size(s):

☐ 1 Bedroom ☐ 2 Bedroom ☐ 3 Bedroom

Applicant Name: _____ Social Security Number: _____

Street Address: _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____ Email address: _____

Date of Birth _____ Sex (M/F): _____ Married ☐ Single ☐ Divorced ☐ Separated: ☐

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Co-Applicant ☐ **Yes** ☐ **No**

Co-Applicant Name: _____ Social Security Number: _____

Street Address: _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____ Email address: _____

Date of Birth _____ Sex (M/F): _____ Married ☐ Single ☐ Divorced ☐ Separated: ☐

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Do you have a Rental Assistance Voucher? ☐ Yes ☐ No

If yes, Case worker name: _____

Phone Number and Agency Name: _____

Are you eligible for DDD services? ☐ Yes ☐ No

(Division of Developmental Disabilities)

If yes, Case worker name: _____

Phone Number and Agency Name: _____

1. Have you, or any members of your household, ever been evicted? ☐ Yes ☐ No
2. Have you, or any members of your household, ever been convicted of a crime? ☐ Yes ☐ No
3. Are you, or any members of your household, subject to a lifetime registration requirement under the New Jersey State Sex Offender Registration Program or any other State's Sex Offender Registration Program? ☐ Yes ☐ No
4. Do you, or anyone else in your household, use a wheelchair or other mobility device? ☐ Yes ☐ No

While Project Freedom Inc. designs every housing unit **100% physically accessible for people with disabilities** who use wheelchairs or other mobility devices, it is not a requirement for tenancy. This development accommodates both disabled and non-disabled people/families.

Household Composition and Income: (Must include all members expected to live in the unit)

Name	Relationship to Head of House	Social Security #	Date of Birth	Marital Status	Sex (M/F)	Projected Gross Yearly Income	Full-Time Student? (12 credit/semester)
1.	Head of Hhold					$	☐Yes ☐No
2.						$	☐Yes ☐No
3.						$	☐Yes ☐No
4.						$	☐Yes ☐No
5.						$	☐Yes ☐No
6.						$	☐Yes ☐No
7.						$	☐Yes ☐No

Please list all the sources where household Income comes from:

SOURCES OF INCOME	Applicant's Current Gross Yearly Income	Co-Applicant's Gross Yearly Income	Other Household Member's Gross Yearly Income
Salary	$	$	$
Social Security	$	$	$
Pension	$	$	$
Child Support/Alimony	$	$	$
All Other Income	$	$	$
Total Annual Income	$	$	$

***** Add a separate page if additional family members have income.**

Release of Information Statement Provided by Applicant

I/We, _____ attest that the information provided in this pre-application is true, and to the best of my/our knowledge is correct and complete. I/We verify that I/we will provide prompt notice to Project Freedom Inc. should there be any change in my/our circumstances.

I/We authorize Project Freedom Inc. to contact any source listed for the sole purpose of verifying the information provided in this pre-application**. I/We understand that Project Freedom, Inc. will run a background check on all adults 18 years of age and older, prior to interview.**

I/We understand that the applicant(s) have a responsibility to remain in contact with Project Freedom when requested. I/We understand that failure to do so will result in the application becoming inactive. (everyone 18 or older who will live in the unit must sign)

Signed: _____ **Date:** _____

Signed: _____ **Date:** _____

Signed: _____ **Date:** _____

Signed: _____ **Date:** _____

If you pre-qualify, you will be sent an "eligible" letter.
If you do not pre-qualify, you will be notified in writing.



Equal Opportunity Employer – Equal Opportunity Housing

Mail this pre-qualifying application back to:

Freedom Village at Woodstown
Attn: Sammi DeMaris, Property Manager/Soc. Service Coord
21 Alloway Road, Bldg 600, Woodstown, NJ 08098

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, affectation 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 filing 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 affectation or sexual orientation.

If you feel you have been denied housing ore treated differently for one of the reasons listed about, 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

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

MULTIPLE DWELLING REPORTING RULE TENANT/APLICANT 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.

☐ Tenant ☐ Applicant Name:_____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Race/Ethnicity: Please check all that apply to leaseholders (tenants) or applicants.

☐ **Black or African American:** a person having origins in any of the original peoples of Africa

☐ **Hispanic or Latino:** a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish origin or culture, or a person having a Spanish surname

☐ **Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

☐ **American Indian or Alaska Native:** a person having origins in any of the original peoples of North or South America

☐ **Native Hawaiian or other Pacific Islander**: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

☐ **White or Caucasian:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Date: _____ Completed by: ☐ Tenant ☐ Applicant ☐ Landlord

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 to 5:00 Monday through Friday, or e-mail the MDRR unit at DCRMDRR@njcivilrights