

SOUTH PLAINFIELD, NJ AFFORDABLE APARTMENTS!



NOW LEASING!



Pre-applications are currently being accepted for new Senior (55+) affordable 1 and 2 bedroom apartments. The apartments are located at Celebrations at South Plainfield, NJ. Applicants will be required to submit income documentation for qualifying criteria. Veterans who qualify based on income and provide proper identification will receive waitlist priority.

PRICING OF AFFORDABLE APARTMENTS

AFFORDABILITY	1 BEDROOM 576 sq. ft.	2 BEDROOM 715-808 sq. ft.
VERY LOW	\$621	\$748
LOW	\$1,157	\$1,391
MODERATE	\$1,398	\$1,680

INCOME REQUIREMENTS

# OF PEOPLE IN HOUSEHOLD	MAX ANNUAL INCOME (VERY LOW)	MAX ANNUAL INCOME (LOW)	MAX ANNUAL INCOME (MODERATE)
1	\$30,009	\$50,015	\$80,024
2	\$34,296	\$57,160	\$91,456
3	\$38,583	\$64,305	\$102,888
4	\$42,870	\$71,450	\$114,320

In order to be eligible for these affordable housing units, you must meet certain income limits as determined by the New Jersey Department of Community Affairs.

Interested households are required to complete a preliminary application and submit it with household income in order to qualify for these affordable units.

To obtain a pre-application, email celebrations@edgewoodproperties.com, call (732)839-3700, visit CelebrationsatSouthPlainfield.com or visit in person at the Celebrations leasing office located at 1636 Stelton Road, Suite 318, Piscataway, NJ 08854.



**1 Campbell Street,
South Plainfield, NJ 07080**





CELEBRATIONS

AT SOUTH PLAINFIELD

Thank you for visiting Celebrations at South Plainfield.

Please complete the attached pre-application, fully sign, date and return to our office via email at celebrations@edgewoodproperties.com, mail or in person.

The purpose of this form is to gather basic information and will be used only for determining eligibility for referral to an affordable housing unit.

We thank you for your interest.

Sincerely,

Celebrations at South Plainfield
(732)839-3700

SITE: Celebrations at South Plainfield, NJ

SECTION I: APPLICANT INFORMATION: (Please print clearly)

Name of Head of Household

Current Street Address City State Zip Code

Home Phone No. (Landline only)

Work Phone

Cell Phone No.

Email Address:

Number of Bedrooms? One Two Three Require a handicap accessible home? Yes No

***DO YOU CURRENTLY RECEIVE RENTAL ASSISTANCE?**

Yes No

***IS A HOUSEHOLD MEMBER A VETERAN?**

Yes No

SECTION II: HOUSEHOLD COMPOSITION

Name	Relationship to Head of Household	Gender	Date of Birth	Annual Income (Monthly x12 months)	Source of Income
1.	Head of Household			\$	
2.				\$	
3.				\$	
4.				\$	
5.				\$	
TOTAL HOUSEHOLD INCOME				\$	

SECTION III: I AM INTERESTED IN:

<input type="checkbox"/> Market Rate Apartments 1 or 2 Bedroom Only	Affordable Rate Apartments 1 Bedroom 2 Bedroom
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SECTION IV: HOMEOWNERS ONLY

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).

Market Value: \$ _____ Equity: \$ _____

SECTION V: SIGNATURE

I certify that the information provided herein is true and complete to the best of my knowledge and that any misrepresentation of income or household size herein shall be cause for program disqualification. I also understand that this information is to be used only for determining my eligibility for referral to an affordable housing unit and does not obligate me in any way.

X _____ **Signature Head of Household** _____ **Date**