



CITY OF OCEAN CITY AFFORDABLE HOUSING PROGRAM MARKET TO AFFORDABLE CONDOMINIUMS FOR SALE

Pre-applications are currently being accepted to qualify to buy affordable units in The City of Ocean City. In order to be eligible for an affordable housing unit, you must meet certain income limits as determined by the New Jersey Affordable Housing guidelines.

Three units will be available for sale through the program and will be scattered throughout the City. The sales price for these one-bedroom units will be based upon household income and range from \$62,500 to \$111,709. The maximum household incomes permitted are \$40,868 for a one-person household, and \$46,706 for a two-person household. Interested households will be required to submit a pre-application in order to place your name on a waiting list.

Triad Associates has been designated by the City of Ocean City to act as the program Administrative Agent to qualify and assist homebuyers through the application process. Units will be deed restricted to ensure continued affordability. Applicants will be required to have a minimum credit score of 640 (with no recent judgments, bankruptcies or foreclosures) in order to obtain mortgage pre-approval.

How to Apply

If you are interested in applying to purchase one of the affordable units, pre-applications can be obtained by calling Jason Hanusey at Triad Associates, **856-690-5749**, via email at jhanusey@triadincorporated.com or at www.triadhousingprograms.com.



**Pre-Applications must be returned to
Triad Associates**

**1301 W. Forest Grove Road, Vineland, NJ 08360
Pre-applications can also be faxed to (856) 690-5622**

The program is authorized through the New Jersey Council on Affordable Housing Program
Visit www.njhrc.gov for more affordable housing opportunities.



**Phone (856) 690-5749
www.triadhousingprograms.com**

City of Ocean City Affordable Housing

Preliminary Application for Affordable Housing : (Please print clearly!)

Name of Head of Household _____

Current Street Address _____ City _____ State _____
Zip Code _____

() _____ () _____ () _____
Home Phone No. Work Phone Ext. # Cell Phone No.

Email Address: _____
(required)

Number of Bedrooms? One ___

Require a handicap accessible home? Yes ___ No ___

*Do You Currently Receive Rental Assistance? Yes ___ No ___

GROSS INCOME IS INCOME BEFORE ANY DEDUCTIONS. EXAMPLES OF INCOME ARE ALIMONY, CHILD SUPPORT, PENSION, SOCIAL SECURITY, UNEMPLOYMENT, EMPLOYMENT, ANNUITIES, ETC.

HOUSEHOLD COMPOSITION: (Please print clearly!)

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

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. If any information provided on this pre-application changes, I agree to notify Triad Associates immediately.

X _____
Signature of Head of Household

Date

This pre-application is only to place your name on a waiting list. It is not an approval to purchase a unit. Please do not contact us as email confirmations will be sent out. Applicants will only be contacted when their name is next on the waiting list. All other applicants will remain on the waiting list for future affordable housing opportunities.