

TOMS RIVER, NJ AFFORDABLE APARTMENTS



Pre-applications are currently being accepted for new affordable 1, 2- and 3-bedroom apartments. The apartments are located at Gabrielle Run in Tom's River, NJ. Waitlist priority will be given to veterans. Applicants will be required to submit income documentation for qualifying criteria.

PRICING OF AFFORDABLE APARTMENTS

AFFORDABILITY	1 BEDROOM	2 BEDROOM	3 BEDROOM
VERY LOW	\$534	\$633	N/A
LOW	\$1,021	\$1,218	N/A
MODERATE	\$1,241	\$1,481	\$1,698

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. Income limits are:

INCOME REQUIREMENTS

# OF PEOPLE IN HOUSEHOLD	MAX ANNUAL INCOME (VERY LOW)	MAX ANNUAL INCOME (LOW)	MAX ANNUAL INCOME (MOD)
1	\$27,311	\$45,519	\$72,830
2	\$31,213	\$52,022	\$83,234
3	\$35,115	\$58,524	\$93,639
4	\$39,016	\$65,027	\$104,043
5	\$42,137	\$70,229	\$112,367
6	\$45,259	\$75,431	\$120,690

If you are interested in applying for one of these units, you must complete a Preliminary Application. Applicants can email gabriellerun@edgewoodproperties.com or call (848) 238-7840 to request a Preliminary Application. Pre-Applications are also available at the Gabrielle Run Clubhouse at 100 Jumper Drive, Toms River, NJ.





Thank you for visiting Gabrielle Run in Toms River, NJ!

Please complete the attached pre-application fully, sign, date, and return to our office by way of email, fax or in person. It can be emailed to gabriellerun@edgewoodproperties.com

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 in Gabrielle Run!

Sincerely,

*Gabrielle Run
100 Jumper Drive
Toms River, NJ 08755
(P) 848-238-7840*

Pre-Application
Return to: 100 Jumper Drive Toms River, NJ 08755

JSM at Hickory, LLC

Completed forms can also be emailed to gabriellerun@edgewoodproperties.com

SITE: Gabrielle Run, Toms River, 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:

☐ Market Rate Apartments 1 or 2 Bedroom Only	☐ Affordable Rate Apartments 1 Bedroom 2 Bedroom 3 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