

**HARDYSTON TOWNSHIP
CONFIDENTIAL PRELIMINARY APPLICATION FOR AFFORDABLE HOUSING**

Applicant Name (head of household)			
Current Address	Street:	State:	Zip:
	City:		
Telephone #	Home:	Work:	
Do you or any members of your household live or work in the following counties: <input type="checkbox"/> Sussex <input type="checkbox"/> Bergen <input type="checkbox"/> Hudson <input type="checkbox"/> Passaic			
Number of individuals in household	Adults:	Children:	
Desired number of bedrooms			
Where did you learn of this housing opportunity?			

People who will be part of my household in the housing for which I am applying:					
Name	Relationship to Applicant	Sex	Age	Annual Income	Source(s) of income
Applicant	Self				

Total Income: _____

Signed _____ Date _____