

# Atlantic County Department of Family & Community Development

SOCIAL SERVICES FOR THE HOMELESS (SSH)

## APPLICANT DOCUMENT CHECKLIST

### ALL DOCUMENTS LISTED ARE REQUIRED TO COMPLETE AN APPLICATION

You will **NOT** be seen and will have to be re-scheduled for another appointment.

All household members 18 yrs. older **MUST** be present at interview.

- a. **Social Security Award Letter/s** (Social Security Retirement, Social Security Disability, and Survivors Benefits) SSI Recipient is not eligible for this grant. \_\_\_\_\_
- b. **Child Support Court Order and 3 months of transaction history printouts** (Paid out and/or received) and **Current Dispersion sheet of deposits.** \_\_\_\_\_
- c. **Unemployment stub and 3 months printout of statements** (see back of card for instructions) \_\_\_\_\_
- d. **Last (4) consecutive weekly pay stubs or if paid bi-weekly last (2)**  
(for each HH member employed) \_\_\_\_\_  
\***Employee Verification letter**, if newly employed (start date, hours, rate of pay required) \_\_\_\_\_  
\*If **self-employed**; must provide 2 years of tax returns \_\_\_\_\_
- e. **Section 8 FINAL portion letter or other housing voucher portion letter** \_\_\_\_\_
- f. **Other income**; Pension letter/statement, Veterans statement of income \_\_\_\_\_

### **\*\*PROOF OF HARDSHIP REQUIRED FOR ANY ASSISTANCE REQUESTED\*\***

- a. **CURRENT SIGNED LEASE** or Mortgage statement or paid Deed with Tax Bill \_\_\_\_\_  
All adult household members must be on lease  
\***Do NOT Move in Before Approval for Security Deposit Assistance\*** \_\_\_\_\_
- b. **Identification (MUST be Valid Atlantic County, New Jersey DMV ID), Social Security Card, Birth certificate**, for **ALL** Household members required \_\_\_\_\_
- c. **ALL household expenses** (Car payment, Car Title (if NO loan), Car Insurance, Water Bill, Sewer Bill, Gas Bill, Cable Bill, Electric Bill, **Cell Phone** Bill and **ALL** other monthly debt payments, **including** credit cards) \_\_\_\_\_
- d. **Certificate of Occupancy and Fire Certificate Required** (Atlantic City req. both C/o and Fire) (REQUIREMENT FOR SECURITY DEPOSIT) \_\_\_\_\_
- e. **Eviction Court Summons/Settlement or Stipulation Court Agreement/Warrant of Removal & Updated Rent Ledger from Landlord** (for all back rent assistance) \_\_\_\_\_
- f. **Foreclosure/Default Letter** (Mortgage Statement & Taxes) \_\_\_\_\_
- g. **Shut off notice** (Electric, Gas, water) and **most recent month utility statement/s required** \_\_\_\_\_
- h. **Receipt for applicant's portion of payment \$** \_\_\_\_\_ **Rent (late & legal fees) /Electric/Gas/Mortgage** \_\_\_\_\_
- i. **Liquid Resources** (401K, **3 current month's bank statements\***checking and/or savings) **Includes; 3 months printed transaction statements for employer debit cards, prepaid cards & Cash app's.** (REQUIREMENT FOR ALL APPLICATIONS) \_\_\_\_\_
- j. **Documentation for ALL Cash app transactions; Must be provided** \_\_\_\_\_
- k. **Proof of children/s residence** (School records, report card with current address. If college student, must provide semester schedule) If all children are included on the lease, not necessary to bring school/med. Documents. \_\_\_\_\_

#### **250% Federal Poverty Level for Calendar Year (2019)**

Persons in family	Monthly Gross Income
1	\$ No Limitation
2	\$ 3,523
3	\$ 4,444
4	\$ 5,365
5	\$ 6,286
6	\$ 7,207
7	\$ 8,128
8	\$ 9,048
Additional Family Members	+ \$921.00 per person

Rev. 2/24/2020

**\*\*\* APPLICATION PROCESS IS 4-6 WEEKS Customer Acknowledged Initial's \_\_\_\_\_ \*\*\***