



Hudson County  
Housing Resource Center

830 Bergen Avenue, Suite 5A • Jersey City, NJ 07306  
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Case Number: \_\_\_\_\_(HCO to generate)

Referral Source: Agency / HUD Website / Other

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Contact Type: Home / Cell / Email

Demographics (Select One)

Race: American Indian/Alaskan Native \_\_\_\_\_ Asian \_\_\_\_\_ Black/African American \_\_\_\_\_  
Native Hawaiian/Other Pacific Islander \_\_\_\_\_ Caucasian \_\_\_\_\_ Other \_\_\_\_\_

Ethnicity: Hispanic or Latino \_\_\_\_\_ Not Hispanic or Latino \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Number of Dependents: \_\_\_\_\_

Household Size: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Preferred Language: \_\_\_\_\_

English Proficiency Status: Limited English \_\_\_\_\_

Not Limited English \_\_\_\_\_

Disabled: YES / NO

Highest Level of Education Completed: \_\_\_\_\_

Head of Household: YES / NO

Female Head of Household YES / NO

Single Head of Household YES / NO

US Veteran YES / NO

Owned a home in the last 3 years YES / NO

**OFFICE USE ONLY**

\_\_\_ Case Documents: Uploaded

\_\_\_ Agreement/Disclaimer Form: Signed

\_\_\_ Budget: Reviewed

\_\_\_ Action Plan: Entered



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**BUDGET**

**HOUSEHOLD INCOME** (For everyone over 18, living at home):

Source 1 \_\_\_\_\_ Amount: \_\_\_\_\_ Weekly / Monthly

Source 2 \_\_\_\_\_ Amount: \_\_\_\_\_ Weekly / Monthly

Source 3 \_\_\_\_\_ Amount: \_\_\_\_\_ Weekly / Monthly

**MONTHLY EXPENSES:**

Housing \$ \_\_\_\_\_

Utilities \$ \_\_\_\_\_

Cable \$ \_\_\_\_\_

Telephone \$ \_\_\_\_\_

Food \$ \_\_\_\_\_

Transportation \$ \_\_\_\_\_

Credit Cards \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

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**Financial Summary**

Estimated (Total) Monthly Income: \_\_\_\_\_

Estimated (Total) Monthly Expenses: \_\_\_\_\_

Estimated Available Funds: \_\_\_\_\_



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**DISCLAIMER FORM**  
(PLEASE READ CAREFULLY AND SIGN BELOW)

**Hudson County Housing Resource Center (HCHRC)** offers bilingual comprehensive rental counseling services to assist renters and landlords. In addition, HCHRC administers the following programs:

**Cornerstone Outreach Program** provides tenant based rental assistance to disabled persons of low income. Please speak to a Cornerstone staff member for eligibility information on this program.

**Community Development Housing Organization (CHDO):** HCHRC has developed one (1) building with eight (8) apartments for low-income persons. There is currently a waitlist. To obtain an application, please speak with a staff member.

Our services are available through the financial support of the U.S. Department of Housing and Urban Development (HUD), including the HOME Investment Partnership Program.

This form is currently being used to obtain authorization from clients to share information with HUD. Housing counseling clients are not obligated to use any of the services offered by the agency, its affiliates, or partners. HCHRC will provide information on alternative services, programs, and products. Clients should consider a variety of resources and options and upon evaluation select the resources that best meet their needs.

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Date

**DECLARACION**  
(FAVOR DE LEER Y FIRMAR AL FINAL)

**Hudson County Housing Resource Center (HRC)** ofrece servicios para educar y informar a inquilinos y propietario acerca de sus derechos. Además, HRC les ofrece los siguientes servicios:

**Cornerstone Outreach Program:** provee ayudas del alquiler a individuos incapacitados. Para obtener más información acerca de este programa, favor de hablar directamente con un miembro de Cornerstone.

**Community Development Housing Organization (CHDO):** CHDO ha desarrollado un edificio con ocho (8) unidades de habitaciones para individuos/familias de bajos ingresos y esta administrado por West New York Housing Authority.

Los serviços som disponíveis através do suporte del Departamento de Habitação e Desenvolvimento Urbano (HUD), incluindo o programa de HOME Investment Partnership.

Nuestros clientes no tienen la obligación de utilizar nuestros servicios. **HRC** le provea información de servicios, programas, y agencias. Nuestros clientes deben de considerar todas sus opciones y elegir los recursos que mayor sirvan sus necesidades.

\_\_\_\_\_  
Signatura/Firma del cliente / Firma Del Cliente

\_\_\_\_\_  
Fecha