



NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS  
PRE-APPLICATION FOR GRANT FUNDS

AFFORDABLE HOUSING TRUST FUND

Name of Applicant			
Contact Person	Phone Number	E-mail	
Street Address			
City	State	Zip Code	County
Name of Project			
Funding Allocation	<input type="checkbox"/> Municipal Settlement Fund <input type="checkbox"/> Neighborhood Partnerships Fund <input type="checkbox"/> Innovation Fund		
Total Cost of the Project	Requested Amount	Funds from Other Sources	
Project Location			
Street Address			
City	State	Zip Code	County

Briefly describe the project for which you are seeking funds, including how it will meet State priorities

Do you have site Control? If yes, explain

Do you have municipal support? If yes, explain

E-mail to [affordablehousing@dca.nj.gov](mailto:affordablehousing@dca.nj.gov)