



90 WOODBRIDGE CENTER DRIVE * SUITE 600 * WOODBRIDGE, NJ 07095
Phone Number 1-888-302-7303

August 3, 2021

Dear Resident,

We hope this letter finds you and your family in good health. Attached to this letter is an authorization form which will allow management to facilitate the process of determining eligibility for rental assistance. Kindly fill out and sign the highlighted portions of the authorization letter. Please return the authorization letter using one of the below methods:

1. Take a picture with your phone or scan the letter. Please email a clear copy to customerservice@middlesexmgmt.com; or
2. Mail a copy of the authorization form using the enclosed prepaid envelope; or
3. Drop the letter off at the leasing office at your property or at the Best Rent Showcase located at: 1012 US-1, Edison, NJ 08817.

Sincerely,

Middlesex Management
Rental Assistance Department
customerservice@middlesexmgmt.com
Ph: 1-888-302-7303



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Re: State Programs to Provide Rental Assistance

Dear Tenant,

In recognition of the financial hardship that the COVID-19 pandemic has caused to many renters in New Jersey, the Federal Government has created a variety of programs to help renters who have fallen behind on their rent. In order for us to work with a state, county, and/or municipal rental assistance agency to determine whether or not you are eligible for any of these programs, we need your consent to do so as we will need to disclose the information in your tenant file with representatives from the state, county, and/or municipality. Therefore, if you would like management to facilitate the process of determining eligibility for rental assistance, the below acknowledgement will need to be completed and returned to management. There is no obligation to participate in this program. However, if the state, county, and/or municipality is not given your information, they cannot make a determination on your eligibility, and therefore, you may not receive rental assistance funds that you are eligible for.

As stated above, if you would like management to pursue these rental assistance funds on your behalf, please complete the below acknowledgement and forward same back to management.

Very truly yours,

Middlesex Management

I, **(Insert Name)** _____

the tenant residing in the apartment at **(insert all information below)**

Account #: _____ (This number appears on your rental bill)

Complex Name: _____

Street: _____ **Apt #** _____

City/Town: _____ **Zip Code:** _____

Email Address: _____

Mobile Phone Number: _____

hereby consent to the landlord sharing my personal confidential information with the state, county, and/or municipality for the purpose of determining if I am eligible for the rental assistance funds provided by the Federal Government. I understand that the landlord assisting me in applying for rental assistance does not modify my lease obligation.

X _____

Signature