For the Home Buyer…

Welcome to the Affordable Homes at Cambridge Crossing Simsbury, CT

We are pleased that you are interested in the affordable homes at Cambridge Crossing, Simsbury CT. We hope you will find it to be a place where you can enjoy affordable homeownership and find a thriving and friendly community.

Sixteen single family homes at Cambridge Crossing will be reserved as affordable. Affordable homes will be reserved for a household with an income up to 80% of the Area Median Income (AMI) for ownership or rental. Those incomes, as published by the U.S. Department of Housing and Urban Development (HUD) as their Maximum Annual Income Limits 2026-2027 are as follows:[*]

Number in Household	***Up to 80% of Area Median Income***
1	$ 72,352
2	$ 82,688
3	$ 93,024
4	$ 103,360
5	$ 111,629
6	$ 119,898
7	$ 128,166
8	$ 136,435

These income limits are subject to change by HUD and do change annually.

Your deed will have a 30-year affordability restriction as follows:

- Purchased homes must be owner-occupied (they cannot be rented);
- They can only be sold to households whose income is no greater than 80% of the Area Median Income at the time of sale, adjusted for household size; and
- The sale price must be affordable to an income-eligible household utilizing a 20% down payment but any down payment amount is allowed. The Administrator of the Affordability Plan will determine the maximum allowable sales price so as to satisfy Conn. Gen. Stat. § 8-30g.

[*] For this determination, the Area Median Income is the lesser of the statewide median income for Connecticut or the median income for the Norwich-New London HUD HFMA -New London County, CT, both as determined by the US Department of Housing and Urban Development (HUD).

Please see the actual deed restriction at the end of this section of the application on page 4. Please note that a seller must notify the Affordable Housing Designee, Alodgio Consulting, LLC at 681 Fairfield Beach Road, Fairfield CT 06824 tel: 646-647-1300, x4. The Designee shall establish a sales price in compliance with this plan and the regulations of the Town of Simsbury.

Once you have been introduced to the property by the Seller's Broker; Jenna Talbot with Re/Max One of West Hartford CT, email: jenna.a.talbot@gmail.com, mobile: 860-937-7488, you should begin to complete the Income Eligibility Application, which you will find at the end of this document. You should return the completed Application to us, together with a bank check or money order for $1,329.38 ($1,250.00 plus $79.38 CT sales tax) payable to *Alodgio Consulting, LLC*, which covers the processing fee from the initial application up through to the final income certification. You should mail the check and the application to:

Alodgio Consulting, LLC
c/o Madeline Iacurto
20 Albion Road
New Fairfield CT 06812

Alternatively, you can pay via PayPal. If you are interested in this method, please let us know and we will email you an invoice through PayPal for you to use to pay online. PayPal imposes a small fee. You can also pay by ACH although this may take a while for us to receive, approximately 1 week. If you want to use PayPal or ACH, you may contact Madeline Iacurto at 845-206-6506, or at mpi@alodgio.com for further information.

After reviewing your application, we will make an informal, preliminary estimate of your income eligibility. This typically takes 2-3 weeks. If our preliminary review determines that you are not eligible, then we will not proceed to the next step and will refund half of the processing fee to you.

Next, assuming a favorable preliminary review, we will ask you for documentation of your income and assets. This typically includes:

- your two most recent federal income tax returns;
- the closing statement on the sale of your home, if applicable;

- the most recent statement for any investment accounts including IRA, 401k, and standard investments;
- your two most recent account statements for all bank checking, savings, and money market accounts, if applicable;
- a pay stub within the past month, if applicable.

We will also ask you to complete and sign forms that will enable us to verify your income and assets. We will send out those forms to the appropriate parties and review them when returned. This process can take as long as 6 weeks, depending on how quickly your employer and financial institutions complete and return the verifications to us. Then we will issue a final determination of eligibility.

In the meanwhile, you should be applying for a mortgage and doing everything else as you would for any other real estate purchase. Your buyer's broker should be able to assist you with this.

If you have any questions, you may contact Madeline Iacurto at 845-206-6506, or at mpi@alodgio.com for further information.

We look forward to working with you to achieve your goal of affordable home ownership.

DEED RESTRICTIONS

The language below shall be inserted in each deed for a Workforce Home for the duration of the thirty (30) year sale price restriction period.

This dwelling unit is an affordable housing dwelling unit within a set aside development as defined in Conn. Gen. Stat. § 8-30g and in accordance with the Housing Affordability Plan For Cambridge Crossing Simsbury CT Revised and Updated April 2026 and on file with the Town of Simsbury, CT, Planning and Zoning Department and is therefore subject to a limitation, at the date of purchase, on the maximum annual income of the household that may purchase the unit, and is subject to a limitation on the maximum sale or resale price. These limitations shall be strictly enforced and may be enforced by the person identified in the Plan as Administrator. Said dwelling unit is subject to the following restrictions (the "Restrictions"):

TO BE INSERTED IN A DEED FOR AN EIGHTY PERCENT HOME:

The owner of said dwelling unit shall sell or transfer said unit only to a family or household whose income is no greater than eighty (80%) percent of the area median income for the Town of Simsbury, CT ("Town"), as determined by the Connecticut Department of Housing and the U.S. Department of Housing and Urban Development ("HUD"). The designation as a moderate-income home shall remain in place for the duration of the price restriction period. Determination of a potential purchaser's eligibility shall be made by the Administrator (as defined in that certain Affordability Plan (the "Plan") for the Community of which said dwelling unit is a part, a copy of which site plan is on file in the Town's Planning and Zoning Department).

TO BE INSERTED IN ALL HOME DEEDS:

In the event said owner desires to make said dwelling unit available for sale, said owner shall notify the Administrator in writing. The owner shall pay the Administrator a fee to cover the cost of administering the sale. The Administrator shall then provide notice of the availability of said dwelling unit for purchase. Such notice shall be provided, at a minimum, by advertising at least two times in newspapers of general circulation in the Town. The owner shall bear the cost of such advertisement. The Administrator shall also provide such notice to the North Stonington Planning and Zoning Commission and the Town of Simsbury CT. Such notice shall include a description of said dwelling unit, the eligibility criteria for potential purchasers, the Maximum Sale Price and the availability of application forms and additional information. All such notices shall comply with the Federal Fair Housing Act, 42 U.S.C. 3601 et seq. and the Connecticut Fair Housing Act, Conn. Gen. Stat. §§ 46a-64b, 64c. Said owner may hire a real estate broker or otherwise individually solicit offers, independent of the Administrator's action,

from potential purchasers. Said owner shall inform any potential purchaser of the affordability restrictions before any purchase and sale agreement is executed by furnishing the potential purchaser with a copy of the Plan. The purchase and sale agreement shall contain a provision to the effect that the sale is contingent upon a determination by the Administrator that the potential purchaser meets the eligibility criteria set forth in the Plan. Once the purchase and sale agreement is executed by said owner and the potential purchaser, the potential purchaser shall immediately notify the Administrator in writing. The Administrator shall have thirty (30) days from such notice to determine the eligibility of the potential purchaser in accordance with the application process set forth in the Plan. The Administrator shall notify said owner and the potential purchaser of its determination of eligibility in writing within said thirty (30) day period. If the Administrator determines that the potential purchaser is not eligible, the purchase and sale agreement shall be void, and said owner may solicit other potential purchasers. If the Administrator determines that the potential purchaser is eligible, the Administrator shall provide the potential purchaser and said owner with a signed certification, executed in recordable form, to the effect that the sale of the particular Workforce Home has complied with the provisions of the Plan. The owner shall bear the cost of recording said certification.

Said owner shall occupy said dwelling unit as said owner's principal residence and shall not lease said dwelling unit.

Said owner shall maintain said dwelling unit. Said owner shall not destroy, damage, or impair said dwelling unit, allow said dwelling unit to deteriorate, or commit waste on said dwelling unit. When said dwelling unit is offered for re-sale, the Administrator may cause said dwelling unit to be inspected.

A site plan for this community was approved by agencies of the Town of Simsbury CT based in part on the condition that a defined percentage of the homes in the community would be preserved as affordable homes. The Restrictions are required by law to be strictly enforced.

A violation of the Restrictions shall not result in a forfeiture of title, but the Simsbury CT Planning and Zoning Commission or its designated agent shall otherwise retain all enforcement powers identical to those granted by the Connecticut General Statutes, including § 8-12, which powers include, but are not limited to, the authority, at any reasonable time, as permitted by law, to inspect said dwelling unit and to examine the books and records of the Administrator to determine compliance of said dwelling unit with the affordable housing regulations.

APPLICATION FOR INCOME ELIGIBILITY

Affordable Homes at Cambridge Crossing, Simsbury CT

Please Print Clearly

APPLICANT NAME	EMAIL ADDRESS	TELEPHONE NUMBER

Welcome to the affordable homes at Cambridge Crossing, Simsbury CT! Alodgio Consulting, LLC is here to help you obtain the income eligibility certificate that you will need to purchase this unit. Should you need help in completing this application, please contact the Alodgio Consulting, LLC office using the contact info listed below. If necessary, persons with disabilities may ask for this application in large print type or other alternate formats.

Please complete this application and return to:

ALODGIO CONSULTING, LLC
c/o Madeline Iacurto
20 Albion Road
New Fairfield CT 06812
Questions can be sent to mpi@alodgio.com
Or 845-206-6506

EQUAL HOUSING OPPORTUNITY

I. FAIR HOUSING STATEMENT

Neither Alodgio Consulting, LLC nor G&F Associates Cambridge Crossing, LLC will discriminate against any applicant on the basis of race, color, sex, sexual orientation, age, gender identity or expression, religion, political affiliation, national origin, ancestry, disability, marital status, disability, lawful source of income, familial status, or any other status protected by statute.

II. PURCHASE INFORMATION, AFFORDABILITY AND RESALE RESTRICTIONS

Sixteen affordable homes will be built at Cambridge Crossing in Simsbury, CT.

Jenna Talbot of Re/Max One of West Hartford CT, email: jenna.a.talbot@gmail.com, mobile: 860-937-7488, is accepting Offers to Purchase or Rent on behalf of the seller.

One important thing for you to know is that there will be a 30-year income and price restriction in the deed to ensure long-term affordability of these homes. This provides opportunities for homeownership to households who are unable to qualify for a market rate home when you are ready to sell your affordable home.

Below is a description of the qualifications that must be met to purchase an affordable home at Cambridge Crossing, Simsbury CT.

Purchase Information

- As described above, there are deed restrictions that limit the resale price of the home.
- The purchase price is set at an "affordable price" for a moderate-income purchaser.
- A purchased home must be owner-occupied and cannot be rented or subleased, in whole or in part.
- Applicants must be able to qualify for a mortgage and have proof of a sufficient cash down payment.

Affordability Restrictions

- The sixteen affordable homes will be reserved for households, with an income not to exceed 80% AMI. To qualify, your household income cannot exceed the applicable HUD Maximum Annual Income Limits, as detailed on page 1 of this document. These incomes change on a yearly basis.
- Total income of all household members from all sources (employment, child support and/or SSI, Social Security disability, retirement, pensions, and other benefits) must be included.

- To qualify, your household income cannot exceed the current (2026-2027) U.S. Department of Housing and Urban Development (HUD) Maximum Annual Income Limits, as follows:

Number in Household	***Up to 80% of Area Median Income***
1	$ 72,352
2	$ 82,688
3	$ 93,024
4	$ 103,360
5	$ 111,629
6	$ 119,898
7	$ 128,166
8	$ 136,435

These income limits are subject to change by HUD.

Prices and Resale Restrictions

- Sales prices will depend on the income level restriction for the home you are purchasing and this restriction will be in the deed.
- Resale prices (i.e., when you go to sell your home) will be restricted for thirty years. The resale price will be determined by a calculation based on the price a moderate-income buyer can afford according to the HUD income guidelines at the time you want to sell. The restriction will be similar to the one on your unit when you bought it.
- You should not expect the value of your home to appreciate as others might. For more information on this, ask us.

III. APPLICATION

Please fill in all sections completely. For those questions or requests for information that do not apply to you, please write in "N/A" which means not applicable. Failure to complete this application truly and completely to the best of your knowledge and belief will result in processing delays or rejection of your application. When asked for income information, please fill in the ***gross, pre-tax amount***.

Additional documents will be required after this application is reviewed. This may include documents that will show all sources of income for each household member, pay stubs, payment statements, award letters, copies of social security cards and birth certificates for all household members, income tax returns, picture identifications for all persons 18 and older, bank statements and other proof of assets. In addition, we will need to verify this information by calling and talking to the relevant persons.

The applicant's eligibility will be reviewed based on verification of income sources and assets.

If an application is rejected, the applicant will be informed in writing and provided with the reasons for the rejection. If you need a reasonable accommodation to apply or live in our development, the Owner will consider your request. Please let us know what you need.

A. GENERAL INFORMATION				
Applicant Name (s):			Email address(es)	
Street & Apt #		City	State	Zip Code
Daytime phone		Evening Phone		Cell:
Preferred means of communication and time of day:				
No. of bedrooms in current unit:		**Do you now: RENT or OWN? (circle one)**		
Amount of current monthly rent or mortgage payment: $				
If owned, do you receive monthly rental income from property? Yes No (circle one)				
Circle utilities paid by you:	Heat	Electricity	Gas	Other (specify)
Approximate monthly cost of utilities paid by you (excluding phone and cable TV) $				

B. HOUSEHOLD COMPOSITION List **ALL** persons who will live in the home. List the head of household first.					
	Name	**Relation-ship To Head of Household**	**Birth Date**	**SS#**	**Student Yes or No**
Head					
Co-Head					
3.					
4.					
5.					
6.					
7.					
8.					
Have there been any changes in household composition in the last twelve months? Yes No Circle one					
If yes, explain:					
Do you anticipate any changes in household composition in the next twelve months? Yes No Circle					
If yes, explain:					
Is there someone not listed above who would normally be living with the household? Yes No Circle					
If yes, explain:					

STUDENT STATUS	
Has anyone in the household been a full-time student during five calendar months of this year or plan to be a full time student in the next calendar year at an educational institution (other than a correspondence school) with regular faculty and students? Yes No Circle one	
• Are any full-time student(s) married and filing a joint tax return?	Yes No Circle one

• Are any student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act?	Yes No Circle one
• Are any full-time student(s) a TANF or a title IV recipient?	Yes No Circle one
• Are any full-time student(s) a single parent living with his/her minor child who is not a Dependent on another's tax return and whose children are not dependents of anyone other than a	Yes No Circle one
• Is any student a person who was previously under the care and placement of a foster care program (under Part B or E of Title IV of the Social Security Act)?	Yes No Circle one

C. INCOME

List **ALL** sources of **household** (gross) income as requested below. If a section does not apply, cross out or write NA.

Household Member Name	**Source of Income**	**Gross Monthly Amount**
	Social Security	$
	Social Security	$
	Social Security	$
		$
	SSI Benefits	$
	SSI Benefits	$
	SSI Benefits	$
	Pension (list source)	$
	Pension (list source)	$
	Disability Payments (source)	$
	Veteran's Benefits (list claim #)	$
	Veteran's Benefits (list claim #)	$
	Unemployment Compensation	$
	Unemployment Compensation	$
	Title IV/TANF	$
	Contributions to the Household (monetary or not)	$

	Full-Time Student Income (18 & Over Only)	$
	Financial Aid	$
	Student grants/scholarships	
	Interest Income (source)	$
	Interest Income (source)	$
	Annuity Payments (source)	$
	Long Term Medical Care Insurance Payments in excess of $180/day	$
	Dividend Income (source)	$
	Dividend Income (source)	$
	Scheduled Payments from Investment	$
	Other: Identify	

Household Member Name	Source of Income	Gross Monthly Amount
	Employment amount	**$**
	Employer:	
	Position Held:	
	How long employed:	
	Employment amount	**$**
	Employer:	
	Position Held	
	How long employed:	
	Employment amount:	$
	Employer:	
	Position Held:	
	How long employed:	
	Alimony	
	Are you ***legally entitled*** to receive alimony?	Yes No Circle one
	If yes, list the amount you are ***entitled*** to receive.	$
	Do you receive alimony?	Yes No Circle one
	If yes, list amount you receive.	$
	Child Support	

	Are you ***legally entitled*** to receive child support?	Yes No Circle one
	If yes, list the amount you are ***entitled*** to receive.	$
	Do you receive child support?	Yes No Circle one
	If yes, list the amount you receive.	$
	Net Income from Business	$
	Net Income from Real Estate	$
	Other Income	$
TOTAL GROSS ANNUAL INCOME *(Based on the monthly amounts listed above x 12)*		$
TOTAL GROSS ANNUAL INCOME FROM PREVIOUS YEAR		$
Do you anticipate any changes in this income in the next 12 months?		Yes No Circle one
Is any member of the household legally entitled to receive income assistance?		Yes No Circle one
Is any member of the household likely to receive income or assistance ***(monetary or not)*** from someone who is not a member of the household as listed on Page 2)?		Yes No Circle one
If yes to any of the above, explain:		
Do you receive this income?		Yes No Circle one

D. ASSETS*
If your assets are too numerous to list here, please request an additional form.
If a section does not apply, cross out or write NA.

Cash	Where kept:		Balance $
Checking Accounts	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Savings Accounts	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Trust Account	#	Bank	Balance$
Certificates	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance$
Credit Union	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Savings Bonds	#	Maturity Date	Value $

	#	Maturity Date	Value $
Other:			Amount $

MUTUAL FUNDS

Name:	# Shares:	Interest or Dividend $	Value*$
Name:	#Shares:	Interest or Dividend$	Value $
Name:	# Shares:	Interest or Dividend $	Value $

STOCKS

Name:	# Shares:	Dividend Paid $	Value $
Name:	# Shares:	Dividend Paid $	Value $
Name:	# Shares:	Dividend Paid $	Value $

BONDS

Name:	# Shares:	Interest/Dividends	Value $
Name:	# Shares:	Interest/Dividends	Value $
Name:	# Shares:	Interest/ Dividends	Value $

*Please insert the market value of the asset as of the month of Application. This applies to all assets for which a value is requested.

IRA, 401K, KEOUGH, PENSION FUND OTHER RETIREMENT ACCOUNTS

Name:	# Shares:	Interest or Dividends	Value $
Name:	# Shares:	Interest or Dividends	Value $
Name:	# Shares:	Interest or Dividends	Value $

TRUSTS

Name:	# Shares:	Interest or Dividends	Value $
Name:	# Shares:	Interest or Dividends	Value $
Name:	# Shares:	Interest or Dividends	Value $

Investment Property Address(es)		**Appraised Value $**
Collectibles Held for Investment (jewelry, coins, etc.)		**Value $**

Real Estate Property: ***Do you own any property?***	Yes No Circle one
If yes, Type of property:	
Location of property:	
Appraised Market Value:	$
Mortgage or outstanding loans balance due:	$
Amount of annual insurance premium:	$
Amount of most recent property tax bill:	$

Does any member of the household have an asset(s) owned jointly with a person who is **NOT** a member of the household as listed in this application?	☐ **Yes** ☐ **No**
If yes, describe:	
Do they have access to the asset(s)?	Yes No Circle one

Have you sold/disposed of any property in the last 2 years?	Yes No Circle one
If yes*,* Type of property:	
Market value when sold/disposed:	$
Amount sold/disposed for	$
Date of transaction	

Have you disposed of any other assets in the last 2 years (Example: Given away money to relatives, set up irrevocable trust accounts)? Yes No Circle one	
If yes, describe the asset:	
Date of disposition:	
Amount disposed:	$

Do you have any other assets not listed above (excluding personal property)?	Yes No Circle one
If yes, please list***:***	Value $
	$
	$
	$

G. APPLICANT(S) DEMOGRAPHICS

The following information is requested by the Municipal Government to monitor compliance with FAIR HOUSING regulations. We ask you to complete it voluntarily, but **you are not required to furnish this information**, and if you do not, it will not be held against you.

Applicant:

__I do not wish to furnish this information

__White
__Black or African American
__Asian
__Black or African American & White
__Asian & White
__American Indian or Alaska Native
__American Indian or Alaska Native & White
__American Indian or Alaska Native & Black or African American
__Native Hawaiian or Other Pacific Islander
__Other Multi Racial

Hispanic ___ Yes ___No (check one)

__**Female** ___**Male**

Co-Applicant:

__I do not wish to furnish this information.

__White
__Black or African American
__Asian
__Black or African American & White
__Asian & White
__American Indian or Alaska Native
__American Indian or Alaska Native & White
__American Indian or Alaska Native & Black or African American
__Native Hawaiian or Other Pacific Islander
__Other Multi Racial

Hispanic ___Yes ___No (check one)

__**Female** ___**Male**

IV. Certifications

Please read before signing.

1. I/We hereby certify that I/We do not and will not maintain a separate residence in another location.
2. I/We further certify that this will be my/our permanent residence and that the workforce home must be used as a primary residence.
3. I/We understand that my/our eligibility for housing will be based on applicable income limits, my/our credit rating, and ability to obtain a mortgage, and my/our ability to supply a sufficient down payment.
4. I/We understand that there will be 30-year income and price restrictions in the deed to ensure long term affordability of these homes.
5. I/We certify that all information in this application is true to the best of my/our knowledge and I/we understand that false statements or information are punishable by law and will lead to cancellation of this application.
6. Individually, I hereby affirm that my answers to the questions on the application are true and correct and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.
7. I/We hereby authorize you to verify any and all information contained in this application. I/we release all concerned parties from any liability in connection with any information that they may provide.
8. I/We understand that all information given in the application will be accessible to the owner and its agents, as well as mortgage funders.
9. I/We understand that all adult applicants, 18 or older, must sign this application.

Signature(s):

Applicant #1: _____ Date: _____

Applicant #2: _____ Date: _____

Applicant #3: _____ Date: _____

Applicant #4: _____ Date: _____

GENERAL AUTHORIZATION FOR RELEASE OF INFORMATION

CONSENT
I/We give consent to Alodgio Consulting, LLC to use any information received in determining my/our eligibility for a home at Cambridge Crossing Simsbury CT.

PURPOSE
Alodgio Consulting, LLC may use this authorization to obtain information as part of the income eligibility application process. All information is regarded as confidential.

INFORMATION COVERED
Verifications and inquiries that may be requested include but are not limited to:

Identity	Marital Status	Employment	Income
Assets	Medical Allowances	Childcare Expenses	Residences
Rental History	Credit History	Family Composition	
Federal, State, Tribal or Local Benefits		Social Security Number	

INDIVIDUAL OR ORGANIZATIONS THAT MAY RELEASE INFORMATION
Any individual or organization including any government organization may be asked to release information. For example, information may be released from:

Banks & Other Financial Institution	Courts	State Dept. of Labor	Credit Bureaus
Law Enforcement Agencies	Landlords	Employers (Past & Present)	

Providers of: Alimony, Childcare, Credit, Medical Care, Social Security, Veteran's Benefits, Pensions and Welfare.

CONDITIONS
I agree that a photocopy of this authorization may be used for the purposes stated above. The original authorization will remain on file in the office of Alodgio Consulting, LLC.

ALL ADULT HOUSEHOLD MEMBERS, 18 YEARS OR OLDER, MUST SIGN, PRINT NAME AND DATE BELOW:

1. _____

Applicant Signature **Print Name** **Date**

2. _____

Applicant Signature **Print Name** **Date**

3. _____

Applicant Signature **Print Name** **Date**

4. _____

Applicant Signature **Print Name** **Date**