

United States Department of the Treasury

HAF Annual Report

Submitted by William Schmidt

State of New Jersey Dept of Community Affairs - HAF AR 2024

Participant Information:

Entity Name	New Jersey
Type of Recipient	State/DC
UEID	NFGKVVF89Q55
TIN	216000928
DUNS+4	806417143
FAIN#	HAF0019
Address	101 South Broad Street
City	Trenton
State	New Jersey
Zip	08625-0800

Please report discrepancies (if any) on the above information.	
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Report Status:	Submitted
Date Submitted:	11/12/2024 3:37 PM
Submitted by	William Schmidt, wschmidt@njhmfa.gov
Certified by	William Schmidt

Point of Contact List:

Name	Title	Email	Roles
Jonathan Sternesky	Reporter	jsternesky@njhmfa.gov	HAF - Account Administrator;HAF - Authorized Representative
JORDAN MOSKOWITZ	New Jersey Housing and Mortgage Finance Agency	jmoskowitz@njhmfa.gov	HAF - Account Administrator;HAF - Authorized Representative
Melanie Walter	Executive Director-NJHMFA	mwalter@njhmfa.gov	HAF - Account Administrator
William Schmidt	Assistant Director, HAF	wschmidt@njhmfa.gov	HAF - Account Administrator;HAF - Point of Contact for Reporting;HAF - Authorized Representative
Katone Glover	New Jersey Housing and Mortgage Finance Agency	kglover@njhmfa.gov	HAF - Point of Contact for Reporting;HAF - Authorized Representative

Name	Title	Email	Roles
James Abrams	New Jersey Housing and Mortgage Finance Agency	jabrams@njhmfa.gov	HAF - Authorized Representative

Community Engagement and Outreach:

1. Did you continue outreach to communities once your HAF Program(s) began?	Yes
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2. Please quantify the total amount of funds spent on outreach.	\$0.00
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3. You identified the Community-based Organizations listed below in your HAF Participant Plan or a previous report. Please indicate whether or not you have performed outreach to these organizations using the checkboxes in the "Outreach performed" column.

Community-Based Organization	Type	Added on this report?	Outreach Performed?
Fair Share Housing Center	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal Services of New Jersey	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Local Initiatives Support Corporation	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
New Jersey Institute for Social Justice	Community Organization	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Consumer Credit and Budget Counseling, Inc.	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Housing Partnership of Morris County	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Navicore Solutions	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Consumer Credit Counseling Service of Delaware Valley dba Clarifi	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Isles, Inc.	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ocean, Inc.	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PRAHD	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tri-City Peoples Corporation	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
The Waterfront Project	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Community-Based Organization	Type	Added on this report?	Outreach Performed?
Housing and Community Development Network of New Jersey	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
New Jersey Citizen Action	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
New Jersey Organizing Project	Provider	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal Services of New Jersey	Provider	<input type="checkbox"/>	<input type="checkbox"/>

Performance Goals:

Title	Program Design Element	Status	New	Continue
Mortgage Reinstatement Assistance within 24 months	Mortgage Reinstatement	Goal Met	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Prevent Displacement	Payment Assistance for Delinquent Property Taxes	Goal Met	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Housing Counseling Services	Other measures to prevent homeowner displacement	Goal Met	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mortgage Payment Assistance	Mortgage Payment Assistance	Goal Met	<input type="checkbox"/>	<input checked="" type="checkbox"/>
AMI/SDI	Mortgage Reinstatement	On Track	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Methods for Targeting:

<p>1. Please provide an update on your targeting plan including challenges, successes, etc.</p>	<p>Continued marketing through our community partners has ensured steady applicant participation with no additional HAF Program costs required outside of normal billing for services performed. While volume has decreased somewhat, there has been an initiative to cooperatively review all applications within the NJ ERMA/HAF platform to ensure that approval rate and spend rate remain steadfast in assisting all applicants.</p>
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2. Is the targeting plan put forth in the HAF Plan achieving the desired results?	Yes
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Best Practices and Coordination:

1. Have you coordinated with any of these agencies? (FHA, VA, USDA, GSE's, State or Local Agencies that hold mortgage portfolios)	Yes
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<p>If so, please provide best practices and information on coordination efforts.</p>	<p>Attending periodic meetings and following forum discussions through the U.S. Treasury, NCSHA and MBA as well as initiating discussions with other HFAs to coordinate best practices, discuss issues and to compare trends, policies and procedures, and thoughts on impending program shut down.</p>
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2. Have you coordinated with servicers?	Yes
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	<p>Contact with servicers remains a daily activity with a team of dedicated CDF team members utilizing our</p>
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If so, please provide best practices and information on coordination efforts.

CDF portal to ensure turn times of less than 30 days. Currently, there are 0 applications with outstanding I-Records requests over 30 days old and more than half of the outstanding I-Records requests are less than 10 days old. Weekly aged reports are still being utilized, with the requests now being considered "aged" after 15 days, rather than the previous 30 days. This information is communicated daily to each servicer and it allows us to be proactive in determining possible issues that may arise that would prevent

	the timely return of a V-Record.
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Certification:

Statement

I certify that the information provided is accurate and complete after reasonable inquiry of people, systems, and other information available to the HAF participant. The undersigned acknowledges that any materially false, fictitious, fraudulent statement, or representation (or concealment or omission of a material fact) in this submission may be the subject of criminal prosecution under the False Statements Accountability Act of 1996, as amended, 18 USC 1001, and also may subject me and the HAF participant to civil penalties, damages, and administrative remedies for false claims or otherwise (including under 31 USC 3729 et seq.) The undersigned is an authorized representative of the HAF participant with authority to make the above certifications and representations on behalf of the HAF participant.

1. How much in interest did you earn on HAF award funds in your last fiscal year?	\$8,061,160
2. If you earned interest in excess of \$500, did you remit that excess earned interest to the Department of Health and Human Services Payment Management System (PMS)?	Yes