APPLICATION FOR HOUSING

Low-Income Housing Tax Credit Property

PLEASE PRINT CLEARLY

IMPORTANT:

- Completed applications must be mailed to: <u>North Hempstead Housing Authority, 899</u> <u>Broadway Suite #121, Westbury, NY 11590</u>
- Do <u>NOT</u> send more than one application. Applicants who submit more than one application will be penalized.
- Applications mailed to any address other than that listed below will be discarded.

	Project:	The Homestead AKA Grand Street Apartments
This is an application for housing at:	Address:	252 Grand Street
		Westbury/New Cassel, NY 11590
	Name:	The Homestead at Grand Street Senior Apartments
Please complete this application and	Address:	899 Broadway Suite #121 (Attn: Karen Estrella)
return to:		Westbury, New York 11590

An applicant may be interviewed only after the receipt of this tenant application which must be fully completed and signed by all adult members. Please answer every question. Partially completed applications may be disqualified.

	For	office use Only	
	<u> 1:01 :</u>	onice use Only	
Date/Time Received] •	_ Staff Signatu	ret
Duto 11mo 1teceno		_ Stan Digitate	

Eligible Applicants must meet income criteria:

zppmen	mes muse meet	income criteria	l.		
_ v					Annual Household
NE FI					Income ³ (Minimum -
	Unit Size	Monthly Rent ¹	Units Available	Household Size ²	Maximum) ⁴
	1BR	\$710	21	1 person	\$20,664 - \$32,340
RE/ E (4		7/10	4.1	2 people	\$20,664 - \$36,960
30% AREA MEDIAN NCOME (AMI) UNIT				2 people	\$24,336 - \$36,960
30% AREA MEDIAN NCOME (AMI) UNITS	2BR	\$854	5	3 people	\$24,336 - \$41,580
				4 people	\$24,336 - \$46,170
\ s					Annual Household
A F					income ³ (Minimum -
	Unit Size	Monthly Rent ¹	Units Available	Household Size ²	Maximum) ⁴
	1BR	\$948	2	1 person	\$29,232 - \$43,120
REA E (A	101	Ş540 	2	2 people	\$29,232 - \$49,280
40% AREA MEDIAN NCOME (AMI) UNITS				2 people	\$34,560 - \$49,280
409 NCC	2BR	\$1,138	1	3 people	\$34,560 - \$55,440
				4 people	\$34,560 - \$61,560
S			** 1-1-1-1		Annual Household
A					Income ³ (Minimum -
	Unit Size	Monthly Rent ¹	Units Available	Household Size ²	Maximum) ⁴
	1BR	\$1,184	27	1 person	\$37,728 - \$53,900
50% AREA MEDIAN NCOME (AMI) UNITS	401	Ψ ±,±0¬	2,	2 people	\$37,728 - \$61,600
A M				2 people	\$44,820 - \$61,600
509 NC(2BR	\$1,423	4	3 people	\$44,820 - \$69,300
				4 people	\$44,820 - \$76,950
S		i			Annual Household
A P				:	Income ³ (Minimum -
	Unit Size	Monthly Rent ¹	Units Available	Household Size ²	Maximum) ⁴
ΣW	1BR	\$1,422	10	1 person	\$46,296 - \$64,680
60% AREA MEDIAN NCOME (AMI) UNITS	101	41,72	10	2 people	\$46,296 - \$73,920
A %				2 people	\$55,044 - \$73,920
609 NCC	2BR	\$1,707	6	3 people	\$55,044 - \$83,160
				4 people	\$55,044 - \$92,340

¹Rent includes water, sewer and refuse removal. Other utilities paid by tenant; however, a utility allowance will be deducted from the above monthly rent.

²Household size includes everyone who will live with you. Subject to occupancy criteria.

³Household earnings include salary, hourly wages, tips, Social Security, child support and other income. Income guidelines subject to change.

⁴ Minimum incomes listed may not apply to applicants with Section 8 or other qualifying rental subsidies.

A. GENERAL INFORMATION

Name of Applicant:					· ·			
Address:						·		
								
Daytime Phone:Evening Phone:								
Email Address:								
What is you preferred method of con	tact? □ Telepl	hone □ Email □	Mail					
Will you or any ADULT household	member requir	e a live-in care att	endant to l	ive inde	ependently?			
Describe:						 -		
Do you or any member of your house aids or apparatus for hearing assistan			s such as	wheelcl	nair accessibili	ty, visual		
Do you or your household receive real If yes, which subsidy do you currently	ntal subsidies, ly receive, MU	such as Section 8 ST submit proof v	HCV or an	nother r	ental subsidy?	□Yes □No		
Are you currently residing on proper If yes, what is your current unit size?						No		
Do you have a pet? ☐ Yes ☐ No								
	B. HOUSEH	OLD COMPOSI	TION					
List ALL the people who will live in	n the apartmen	t. List the head of	f househol	d first.				
<u>Name</u>	Relationship <u>to Head</u>	Marital Status D-divorced S-single L-legal separation E-estranged	Birth <u>Date</u>	Age	Social <u>Security #</u>	Full- Time Student <u>Y/N</u>		
Head								
2.								
Optional: Ethnicity:	Alaska Native				merican			
Will any of the persons in the house year or plan to be in the next calendary of the second of the				_				
	1 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4							
Do you anticipate any additions to t	he household i	n the next twelve	months?	☐ YES	S 🗆 NO			

If yes, explain:		 	

Incomplete applications may not be considered

C. INCOME

List ALL sources of income as requested below. If a section doesn't apply, cross out or write N/A.

Household Member Name	Source of Income	Gross Monthly Amount
	Social Security	\$
	SSI Benefits	\$
	Pension (list source)	\$
	Pension (list source)	\$
	Pension (list source)	\$
	Veteran's Benefits (list claim #)	\$
	Veteran's Benefits (list claim #)	\$
		\$
	Unemployment Compensation	\$
	Unemployment Compensation	\$
	TANF	\$
in the second se	TANF	\$
	Regular payments from a severance package?	\$
	Full-Time Student Income (18 & Over Only)	\$
	Interest Income (source)	\$
	Interest Income (source)	\$
	Regular gifts from anyone outside the household?	\$

Household Member Name	Source of Income	Monthly Amount			
	Employment amount (gross income)	\$			
	Employer:				
	Position Held				
	How long employed:				
	Employment amount (gross income)	\$			
	Employer:				
	Position Held				
	How long employed:	м,			
	Employment amount (gross income)	\$			
	Employer:				
	Position Held				
	How long employed:				
	Self-Employment amount	\$			
	Description:	The state of the s			
	How long has applicant been self-employed doing	this work?			
	Alimony				
	☐ Yes ☐ No				
	Are you <i>entitled</i> to receive alimony? If yes, list the amount you are <i>entitled</i> to receive.				
	Do you receive alimony?	□ Yes □ No			
	If yes, list amount you receive.	\$			
	Child Support				
	Are you entitled to receive child support?	☐ Yes ☐ No			
	If yes, list the amount you are <i>entitled</i> to receive.	\$			
	Do you receive child support?	☐ Yes ☐ No			
	If yes, list the amount you receive.	\$			
	Other Income (lottery winnings, etc.)	\$			
	Other Income	\$			
	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 inco	me in the next 12 months?	□ Yes □ No			
If yes, explain:		·			
		CHRISM Mandre dan mendengan pengapa pengapan Mandre Mandre Resident and mendengan pengapan pe			
		«Монимон програмприничення»			

	If yo		oo numerous 1		ease request an additional	form.		
Checking A	Accounts	#	section docum	Bank	out of willows.	Bala	nce \$	
		#		Bank		Bala	nce \$	
		#		Bank		Bala	nce \$	
Savings A	ccounts	#	***	Bank		Bala	nce \$	
		#		Bank		Bala	nce \$	
		#	· · · · · · · · · · · · · · · · · · ·	Bank		Bala	nce \$	
Trust Acco	ounts	#		Bank		Bala	nce \$	
IRA Accou		#		Where?			nce \$	
Certificate	s of Deposit	#		Bank			nce \$	
	-	#	1-1	Bank		Bala	nce \$	
		#		Bank			nce \$	
		#		Bank		Balance \$		
401(k)/403 Retirement	(b) t Accounts	#	Where?		Balance \$			
Credit Uni	on	#		Bank		Balance \$		
		#	#		Bank		Balance \$	
Savings Bo	onde.	#		Maturity Date		Valu	φ \$	
Davings De	JIIGS	#		Maturity Date		Value \$		
		#		Maturity Date		Valu		
I ifo Inguno	unaa Daliay	#				Coal	77-1 ¢	
	nce Policy nce Policy	#					Value \$ Value \$	
Mutual Funds	Name:	η π	#Shares:		Interest or Dividend \$	Cash	Value \$	
	Name:		#Shares:		Interest or Dividend \$		Value \$	
	Name:		#Shares:		Interest or Dividend \$	· *· · · · · · · · · · · · · · · · · ·	Value \$	
Stocks	Name:		#Shares:		Dividend Paid \$		Value \$	
Name:		#Shares:			Dividend Paid \$		Value \$	
			#Shares:	Dividend Paid \$			Value \$	
Bonds	Name:		#Shares:		Interest or Dividend \$		Value \$	
	Name:		#Shares:		Interest or Dividend \$		Value \$	
Name:			#Shares:		Interest or Dividend \$		Value \$	

Investment Property	Apprais Value								
Real Estate (home, land, camp, mobile home, etc.: Do you own any property?	П Уед	□ No							
If yes, Type of property	<u> </u>								
Location of property									
Appraised Market Value									
Mortgage or outstanding loans balance due	\$								
Amount of annual insurance premium	\$	<u>.,</u>							
Amount of most recent tax bill	\$								
Have you sold/disposed of any property in the last 2 years?	☐ Yes	s □ No							
If yes, Type of property									
Market value when sold/disposed	\$								
Amount sold/disposed for	\$								
Date of transaction									
If yes, describe the asset Date of disposition Amount disposed Do you have any other assets not listed above or are you holding jewelry, coins, stamps etc. as an investment (excluding personal property)? If yes, please list:	\$	□ No □ No							
E. ADDITIONAL INFORMATION									
Are you or any member of your family augmently using an illegal substance?									
Are you or any member of your family currently using an illegal substance?	□ Yes	□ No							
Have you or any member of your family ever been convicted of a felony?	□ Yes	□No							
If yes, describe									
Have you or any member of your family ever been evicted from any housing?	□ Yes	□ No							
If yes, describe		<u>-</u>							

Have you ever filed for bankruptcy?					□ Yes	□ No
If yes, describe						
Will you take an apartmer	nt when one is av	ailable?			□ Yes	□ No
Briefly describe your i	easons for apply	ing:				
	F. RE	FERENCI	E INFORMATION			
	Name:					
	Address:					<u></u>
Current Landlord	Home Phone:				1 200	
(If Applicable)	Bus. Phone:					
	How Long?					
Personal Reference #1:						
Address:						
Relationship:			Phone #:			
		CERT	TIFICATION			
I/We hereby certify that I of further certify that this will for this apartment prior to income limits and by manatrue to the best of my/our by law and will lead to car consent to have the Owner credit, landlord and person	I be my/our permoccupancy. I/We agement's selection of this everify all of the	nanent resid e understan on criteria. We underst application	ence. I/We understand that eligibility for he I/We certify that all it and that false stateme or termination of tens	d I/We must ousing will information ents or infor ancy after o	st pay a sec be based on in this appropriation are ccupancy.	urity deposit n applicable lication is punishable I/We further
All adult applicants,	18 or older, m	ust sign a	application.			
SIGNATURE (S):						
(Signature of Tenant)	······································			ī	Date	
(Signature of Co-Tenant)				I	Date	
(Signature of Co-Tenant)	<u>. </u>	-		I	Date	
(Signature of Co-Tenant)					Date	







Preliminary RENTAL Application Instructions for Grand Street Apartments. Please read this notice in full before completing your application

Eligibility Criteria

- 1. Applicants must be at least 18 years of age and must be able to execute a lease.
- 2. All members of the household must be aged 62 or older.
- 3. No pets permitted.
- 4. Must meet income guidelines as per household size:

TTUBE IIIC	l moonie galaoni	tes as per nousembre	· DIZO	T	
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5. INCOMPLETE APPLICATIONS MAY NOT BE CONSIDERED.

- 6. 1 and 2 bedroom units available for individuals, couples and small families.
- 7. Your total household income and assets must be within the required limits.
 - <u>Include as Income:</u> For ALL household members aged 18 and older: gross income from employment including overtime; bonuses and commissions; pensions; annuities; dividends; interest on assets; social security; social security supplement; alimony and child support; veterans' benefits; unemployment and disability compensation; welfare assistance; regular gifts; etc.

<u>Included as Assets:</u> The current value of all savings, checking and investment accounts (including retirement and educational accounts), real estate, investment property etc. (Do not include the value of automobile(s) and other personal property.)

- 8. Your household size and composition must be appropriate for the unit size.
- 9. You have not committed any fraud in connection with any federal or state housing assistance program.
- 10. You intend to reside in the development as your primary residence.

Application Process

- 1. You must fill out the application <u>completely</u> and it must be returned to the address indicated on the application. Applications mailed to addresses other than the indicated address will be disqualified. If <u>unsigned or incomplete</u>, your application may not be considered.
- 2. The information provided on this Preliminary Application will be treated as confidential. All information provided will be verified. If you have intentionally falsified information, your application will be rejected.
- North Hempstead Housing Authority will conduct a background and credit check for all applicants. You have the right to
 review and contest the results of the background check and/or present evidence of rehabilitation if your application is denied
 due to criminal history.
- 4. Your household can file only one application, and no household member can appear on more than one application. If you file multiple applications, your application will not be considered.
- 5. Priority for the accessible units will be for individuals and families which require physical accommodation.
- 6. If you are disabled and require an accessible unit, an extra bedroom for equipment or for a Personal Care Attendant, a reasonable modification of the housing, or a reasonable accommodation of rules, policies, practices or services, please include a letter from your primary health care provider explaining such special requirements.
- 7. If your application number has been chosen, you will be required to attend an interview and complete a full application packet in order to complete your application.

It is unlawful to discriminate against any person because of race, color, religion, familial status, age, sex, sexual orientation, handicap, veteran's status, national origin, or ancestry.







WHAT TO BRING TO YOUR INTERVIEW

Records of Employment Income

- Pay stubs and information on current rate of pay and overtime pay.
- Information about any changes you expect in your pay or hours during the next 12 months.
- Information on other types of income you expect to receive in the next 12 months from tips, commissions, or other employment sources.

Records of Other Income

- Pensions and annuities (latest check stub from the issuing institution)
- Social Security (current award letter) <u>Call (1-800) 772-1213</u>
- Unemployment compensation (determination letter or latest check stub)
- SSI (award letter)
- TANF (award letter, recent check stub)
- Worker's Compensation (Form DOL 203, recent check stub)
- Alimony and/or Child Support (copy of court order)
- Education scholarships, grants and/or stipends (award letter)
- Trade union benefits (recent check stub)
- Other public assistance (award letter)
- Income from assets (credit union, bank statements, etc.)
- Regular support from family members or friends
- VA benefits

Asset Information

- <u>Last 6-months bank statements</u> for all bank accounts (savings, checking, CDs, Christmas Club, IRAs, and other accounts).
- Name, address, account numbers, and statements on value of any stocks, bonds, trusts, life insurance, 401(k) plans, or other investments.
- Information about any assets you have sold or given away within the past two years.

Records of Family Circumstances/Family Composition/Allowances

- Birth Certificate
- Social Security Card
- Driver's license or state issued photo I.D.

