APPLICATION FOR HOUSING

Low-Income Housing Tax Credit Property

PLEASE PRINT CLEARLY

IMPORTANT:

- **Completed applications must be mailed to: Concern Port Jefferson Station, 1599 Rt 112 Port Jefferson Station, NY 11776 and postmarked by 7/3/2023**

- **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.**

- **No hand delivered applications.**

This is an application for housing at:	**Project:** **Concern Port Jefferson Station**
	Address: **1599 Rt 112**
	Port Jefferson Station, NY 11776
Please complete this application and return to:	**Name:** **Concern Port Jefferson Station**
	Address: **1599 Rt 112**
	Port Jefferson Station, NY 11776

For Concern Staff Only
Date/Time Received: _____   Staff Signature: _____

Eligible Applicants <u>must</u> meet income criteria:

Unit Size	Rent	Household Size	Total Annual Income Range ** (Min-Max)
1 Bedroom	$924	1 2	*$36,960– $50,900 *$36,960– $58,150

*Minimum not applicable if you have a subsidy

Applications will be selected on first come first serve basis. An applicant may be interviewed only after the receipt of this tenant application which must be fully completed and signed by all adult household members. Please answer every question!

A. GENERAL INFORMATION

Applicant Name(s): _____

Address: _____

               Street   Apt.#   City   State   ZIP

Daytime Phone: _____ Evening Phone: _____

Do you currently have or have been approved for a

Section 8, HUD VASH, or other voucher?   ☐ Section 8   ☐ HUD VASH   ☐ Other

Bedroom size requested: ☐ One BR   ☐ Handicapped Accessible BR

Do you or any member of your household need any specific unit designs, such as wheelchair accessibility, visual aids or apparatus for hearing assistance? _____ Yes _____No.

If Yes, describe:_____
_____

Will you or any ADULT household member require a live-in care attendant to live independently?
Describe:_____

How did you hear about us? ☐ Newspaper _____   ☐ Drive By signage

☐ Other _____

B. HOUSEHOLD COMPOSITION

List ALL persons who will live in the apartment. List the head of household first.

	Name	Relationship to head	Marital Status D-divorced S-single L-legal separation E-estranged	Birth Date	Age	SS # or tax ID # prior address history	Full-Time Student Y/N
Head							
Co-T							
3.							
4.							
5.							
6.							
7.							
8.							

Optional:
Ethnicity: ☐ Hispanic ☐ Non-Hispanic
Race: ☐ American Indian or Alaska Native   ☐ Asian ☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander ☐ White   ☐ Other

Will any of the persons in the household be or have been full-time students during five calendar months of this year or plan to be in the next calendar year at an educational institution with regular faculty and students**?**
☐ *Yes* ☐ *No*

Do you anticipate any additions to the household in the next twelve months? ☐ YES   ☐ NO
If yes, explain

<u>Incomplete applications will not be considered</u>

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	$
	Social Security	$
	SSI Benefits	$
	SSI Benefits	$
	Pension (list source)	$
	Pension (list source)	$
	Veteran's Benefits (list claim #)	$
	Veteran's Benefits (list claim #)	$
		$
	Unemployment Compensation	$
	Unemployment Compensation	$
	TANF	$
	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:	
	Employment amount (gross income)	$
	Employer:	

	Position Held	
	How long employed:	
	Self-Employment amount	$
	Description:	
	How long has applicant been self-employed doing this work?	
	Alimony	
	Are you *entitled* to receive alimony?	☐ Yes ☐ No
	If yes, list the amount you are *entitled* 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 *entitled* 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 income in the next 12 months?	☐ **Yes**	☐ **No**
If yes, explain:		

Incomplete applications will not be considered

D. ASSETS			
If your assets are too numerous to list here, please request an additional form. If a section doesn't apply, cross out or write NA.			
Checking Accounts	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Savings Accounts	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
Trust Accounts	#	Bank	Balance $

IRA Accounts	#	Where?	Balance $
Certificates of Deposit	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
	#	Bank	Balance $
401(k)/403 (b) Retirement Accounts	#	Where?	Balance $
Credit Union	#	Bank	Balance $
	#	Bank	Balance $
Direct Express Card/ Prepaid ATM card	#	Card type	Value $

Life Insurance Policy	#		Cash Value $
Life Insurance Policy	#		Cash Value $

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 or Dividend $	Value $
	Name:	#Shares:	Interest or Dividend $	Value $
	Name:	#Shares:	Interest or Dividend $	Value $
Investment Property				Appraised Value $

Real Estate (home, land, camp, mobile home, etc.: ***Do you own any property?***	☐ Yes ☐ No
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 tax bill	$

Have you sold/disposed of any property in the last 2 years?	☐ Yes ☐ No
If yes, Type of property	

Market value when sold/disposed	$
Amount sold/disposed for	$
Date of transaction	

Has anyone in the household disposed of any other assets in the last 2 years (Example: Given away money, sold property to a relative for less than fair market value, set up Irrevocable Trust Accounts, etc.)?	☐ Yes ☐ No
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)?	☐ Yes ☐ No
If yes, please list:	

E. ADDITIONAL INFORMATION

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 ever filed for bankruptcy?	☐ Yes	☐ No
If yes, describe		
Will you take an apartment when one is available?	☐ Yes	☐ No
Briefly describe your reasons for applying:		

CERTIFICATION

I/We hereby certify that I do/we will not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We understand that eligibility for housing will be based on applicable income limits and by management's selection criteria. 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 or termination of tenancy after occupancy. I/We further consent to have the Owner verify all of the information contained in this Rental Application as well as my/our credit, landlord and personal references.

All adult applicants, 18 or older, must sign application.
SIGNATURE (S):

_____   _____
(Signature of Tenant)   Date

_____   _____
(Signature of Co-Tenant)   Date