

## **APARTMENT APPLICATION**

<u>Directions:</u> Print or type all requested information and sign certification. Original application will be time and date stamped upon receipt and entered into NYS Homes and Community Renewal's Automated Waiting List (AWL) in chronological order. Applicant will be given a print out of AWL summary with application number. Applicants can monitor waiting list position and update their contact information using the AWL's public access function @ www.nyshcr.org.

Applicant Ad	ldress:							
Apartment #:		Street A	ddress:				City:	
State:Zip Code:		Phone #:		Phone #:				
Persons to R	Reside in A	partment:	(Must be complete	ed. Head o	f household	d must be 18 y	ears of age or older	.)
Name		RELATIONSHIP TO HEAD OF HOUSEHOLD **		AGE*	Sex *	SOCIAL SECURITY NO.		
** Voluntary	Information.		n 21 years of age: vol	•			standards )	
							R (5-8 ppl)	(8-10 ppl)
		•	SON TO RESIDE		•	ры) 🗀 + ы	((3-0 ррі) ∐ 3 ві∢	(0-10 ppi)
Earnings (Inclu			SON TO TRESIDE			o. of Persons	Employed	
Name	·		R'S NAME AND	ZIP C		How Long		LEARNINGS
1474112	-		DDRESS		052	EMPLOYED		Est. Next YR
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
							\$	\$
Special Requ	<u>uirements</u> :	(Note that sp	ecial requirements	can extend	l your wait	for an apartme	ent.)	
Gross House	ehold Incor	<u>ne</u> : \$			•		income for all hou next 12 months.)	sehold members,
Veterans Adi Services, or suc attaches DD-214	h veteran's su	irviving spous	e, who served on				/ discharged veteran les in New York Sta	
			lentially Decla				o-head of househol preference.	d is a victim/or is
			o-head must sign a	·	and to the		mandadaa oo to fi	£ and Amora are seen
and complete. I the Information of	have no objec leclared is fals	tion to inquirie se, my applica	es being made for t	the purpose oid and I wi	e of verifyir Il lose my p	ng the facts he place on the w	knowledge and belie erein stated. I unders vailing list. I further ui partment to me.	stand that if any of
Head of Household Signature:				Date:				





#### **APARTMENT APPLICATION**

Co-Head of Household Signature:	Date:	

### **DHCR Exemptions:**

Marcus Garvey Village currently maintains an exemption from the requirement that HCR approve apartment assignments prior to tenant move-in. The exemption is maintained by submitting a Quarterly Tenant Selection Activity Report (HM-14a) to HRC within 30 days of the end of each quarter.

Please note that all applications are subject to review and approval by the housing company, credit investigation, and background check. Total household income must fall within the parameters listed below.

\*\*Rents are subject to change\*\*

\*\*Adjusted based on 30% of gross household annual income, per program guidelines\*\*

# **CURRENT RENTAL RATES**

APARTMENT SIZE	UNIT SIZE STANDARDS	RENTS**
STUDIO	1 TO 2 PERSONS	\$907.00
1 BEDROOM	1 TO 2 PERSONS	\$972.00
2 BEDROOM	2 TO 4 PERSONS	\$1165.00
3 BEDROOM	4 TO 6 PERSONS	\$1,347.00
4 BEDROOM	5 TO 8 PERSONS	\$1503.00
5 BEDROOM	8 TO 10 PERSONS	\$1658.00

#### **FY 2015 INCOME SUMMARY**

HOUSEHOLD	MINIMUM INCOME	MAXIMUM INCOME
1 PERSON	\$29,400	\$50,750
2 PERSONS	\$33,600	\$58,000
3 PERSONS	\$37,800	\$62,250
4 PERSONS	\$41,950	\$72,500
5 PERSONS	\$45,350	\$78,300
6 PERSONS	\$48.700	\$84,100
7 PERSONS	\$52,050	\$89,900
8 PERSONS	\$55,400	\$95,700
9 PERSONS	\$58,750	\$96,500
10 PERSONS	\$62,100	\$97,300

Please submit any changes to your application to the management office (i.e. change of address, income or household composition). Applicants will be immediately placed on the waiting list and contacted in the order received.

