

### **APARTMENT APPLICATION**

**Directions:** 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 Add	ress:								
Apartment #:		Street Address:					City	<u> </u>	
State:	Zip Co	ode:Phor	ne #:			Phone	#:		
		<del></del>							
<b>Head of House</b>	hold: (M	ust be completed. Head	of household r	nust be 18 yea	rs of	age or olde	r.)		
	Last Name	9	Firs	st Name		So	ocial Securi	ty No.	Age
Co-Head of Ho	usehold:	(Complete if applicable	Co-head mu	ist he 18 vears	of a	ge or older )			
<u> </u>	Last Name			st Name	<i>0,</i> u,		ocial Securi	ty No	٨٥٥
	Last Name		FIIS	ot Name		30	ociai Securi	ty NO.	Age
		l .							
Other Househo	old Memb	ers: (List all other per	sons who will	reside in apartı	ment	.)			
	Last Name	e	Firs	st Name		So	ocial Securi	ty No.	Age
	sons) 🗌 1	one or two sizes. Housel   Bdrm (1-2 persons)		_			_	4 Bdrm (5-{	8 persons)
Special Requir	ements:	(Note that special require	ements can ex	rtend vour wait	for a	an anartmen	<i>f</i> )		
opoolal Roquii	<u> </u>	rvoto triat opeoidi regani	omonio dan ox	iona your wait	707 0	тараптот	,		
Gross Househ	old Incon	ne: \$						ousehold men	nbers,
<u> </u>	<u> </u>	<u>.</u> .		- from all so	ource	es, for the ne	ext 12 month	18.)	
	eteran's sur	eference: If hear viving spouse, who serv mission preference.		of household is luty in time of w					
		o a Presidentially Hurricane Irene, check b						usehold is a v	victim/or is
Certification: (/	Head of hou	sehold and co-head mus	st sign and da	te.)					
		rect to the best of my		have no obje	ectior	n to inquirie	s for the p	urpose of ve	rifying this
information and I agree to furnish all required documentation.  Head of Household Signature:									
Co-Head of Household Signature: Date:									
For Housing Company Use For HCR Use									
Application Date (date original application stamped received): / / AWL #:						Approved b			
Is this original application? (Check yes/no; if no, attach original application.)  Yes No									
Bldg #:		Apt #:	# Bdrms:			Rental Rms	:	Date: /	1
Basic Rent:		Excess Income:		Total Mthly I	Rent	t:		Comment:	

Comment:



## **APARTMENT APPLICATION**

Approved by:	Date: / /	

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.

## **CURRENT RENTAL RATES**

APARTMENT SIZE	UNIT SIZE STANDARDS	RENTS*
STUDIO	1 TO 2 PERSONS	\$760.00-\$924.00
1 BEDROOM	1 TO 2 PERSONS	\$961.00-\$1,291.00
2 BEDROOM	2 TO 4 PERSONS	\$1,118.00-\$1,359.00
3 BEDROOM	4 TO 6 PERSONS	\$1,354.00-\$1,646.00
4 BEDROOM	5 TO 8 PERSONS	\$1,515.00-\$1,842.00
5 BEDROOM	8 TO 10 PERSONS	\$1,529.00-\$1,859.00

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

#### **CURRENT MINIMUM INCOME LIMITS**

APARTMENT SIZE	MINIMUM INCOME
STUDIO	\$22,800.00
1 BEDROOM	\$28,830.00
2 BEDROOM	\$33,540.00
3 BEDROOM	\$40,620.00
4 BEDROOM	\$45,450.00
5 BEDROOM	\$45,870.00

# **FY 2014 INCOME SUMMARY**

HOUSEHOLD	MAXIMUM INCOME
1 PERSON	\$35,280.00
2 PERSONS	\$40,320.00
3 PERSONS	\$45,360.00
4 PERSONS	\$50,340.00
5 PERSONS	\$54,420.00
6 PERSONS	\$58,440.00
7 PERSONS	\$62,460.00
8 PERSONS	\$66,480.00
9 PERSONS	\$70,500.00
10 PERSONS	\$74,520.00



## **APARTMENT APPLICATION**

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.