FAIR & AFFORDABLE RENTAL HOUSING APPLICATION

APPLICATION FOR MAYFAIR SENIOR HOUSING FOR 62+
1 Westhelp Drive, Greenburgh, NY 10603 (Westchester County)
All Household Members Must Be 62+

APPLICATION DEADLINE: February 19, 2021 | Lottery: March 2, 2021

Mail or Hand Deliver Completed Application to:
Housing Action Council at 55 South Broadway, Tarrytown, NY 10591

<table>
<thead>
<tr>
<th>Unit Type</th>
<th># of Units at 40% AMI or less</th>
<th>Rents 40% AMI</th>
<th># of Units at 50% AMI or less</th>
<th>Rents 50% AMI</th>
<th># of Units at 60% AMI or less</th>
<th>Rents 60% AMI</th>
<th># of Units at 80% AMI or less</th>
<th>Rents 80% AMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Bedroom</td>
<td>18</td>
<td>$943</td>
<td>16</td>
<td>$1179</td>
<td>4</td>
<td>$1415</td>
<td>8</td>
<td>$1887</td>
</tr>
<tr>
<td>Two Bedroom</td>
<td>1</td>
<td>$1132</td>
<td>3</td>
<td>$1415</td>
<td>1</td>
<td>$1698</td>
<td>3</td>
<td>$2264</td>
</tr>
</tbody>
</table>

2020 Maximum Income Guidelines

<table>
<thead>
<tr>
<th>Area Median Income (AMI)</th>
<th>1 Person</th>
<th>2 Person</th>
<th>3 Person</th>
<th>4 Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>40%</td>
<td>$35,240</td>
<td>$40,280</td>
<td>$45,320</td>
<td>$50,320</td>
</tr>
<tr>
<td>50%</td>
<td>$44,050</td>
<td>$50,350</td>
<td>$56,650</td>
<td>$62,900</td>
</tr>
<tr>
<td>60%</td>
<td>$52,900</td>
<td>$60,400</td>
<td>$69,200</td>
<td>$75,500</td>
</tr>
<tr>
<td>80%</td>
<td>$70,480</td>
<td>$80,560</td>
<td>$90,640</td>
<td>$100,640</td>
</tr>
</tbody>
</table>

*Rents & Maximum Household Income as of April 2020, Subject to Change.

1. APPLICANT INFORMATION:

Name: ____________________________________________________________

Address: _________________________________________________________ Apt#: ______________

City: __________________ State: __________ Zip: __________________

Home Phone: ______________ Cell Phone: ______________ Work Phone: ______________

SSN: ____________________ DOB: __________________ Gross Income: __________________

Email: ___________________________________________________________

*Rents & Maximum Household Income as of April 2020, Subject to Change.

12/2020
2. **CO-APPLICANT INFORMATION:**

Name: ______________________________________________________________

Address: ____________________________________________________________

Apt#: ______________________________________________________________

City: __________________________________ State: ____________________ Zip: __________

Home Phone: _______________ Cell Phone: _______________ Work Phone: _______________

SSN: ___________________________ DOB: ___________________ Gross Income: _______________

Email: _______________________________________________________________________

3. **LIST ALL PERSONS WHO WILL LIVE WITH YOU, PLEASE START WITH YOURSELF:**

<table>
<thead>
<tr>
<th>FULL NAME</th>
<th>RELATIONSHIP</th>
<th>DATE OF BIRTH</th>
<th>SEX</th>
<th>ATTENDING SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Security #: __________________________</td>
<td>Occupation: __________________________</td>
<td></td>
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<tr>
<td>b.</td>
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<tr>
<td>Social Security #: __________________________</td>
<td>Occupation: __________________________</td>
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<td>c.</td>
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<tr>
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<td>Occupation: __________________________</td>
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<tr>
<td>d.</td>
<td></td>
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</tr>
<tr>
<td>Social Security #: __________________________</td>
<td>Occupation: __________________________</td>
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</tr>
<tr>
<td>e.</td>
<td></td>
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</tr>
</tbody>
</table>

Do you expect any change (s) in your family size in the next 12 months? _____ YES _____ NO

If YES, EXPLAIN: ____________________________________________________________________________
4. **STATISTICAL INFORMATION**

a. The following information is needed for statistical purposes only in order to determine the degree to which programs are utilized by people of different racial & ethnic backgrounds. Provide information for the head of household only.

**RACIAL GROUP IDENTIFICATION:** Used for statistical purposes only. (Please check only one from this group for the head of household only).

<table>
<thead>
<tr>
<th>Single Race</th>
<th>Multi-Race</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ White</td>
<td>___ American Indian or Alaska Native &amp; White</td>
</tr>
<tr>
<td>___ Black or African American</td>
<td>___ Asian &amp; White</td>
</tr>
<tr>
<td>___ Asian</td>
<td>___ Black or African American &amp; White</td>
</tr>
<tr>
<td>___ American Indian or Alaska Native</td>
<td>___ American Indian or Alaska Native &amp; Black or African American</td>
</tr>
<tr>
<td>___ Native Hawaiian or Other Pacific Islander</td>
<td>___ Other Multi Racial</td>
</tr>
</tbody>
</table>

b. **ETHNICITY:** (check only one from this group) ___ Hispanic ___ Non-Hispanic

5. **ACCESSIBILITY/ADAPTABILITY:**

Would any household member benefit from special features of an accessible apartment? Check all that apply: ___ Wheelchair accessible? _____ Hearing Impaired? ___ Visually Impaired?

**REASONABLE ACCOMMODATION:** If you are an individual with disabilities you may make a request for a reasonable accommodation. If you would like more information on how to make a request for a reasonable accommodation, contact Housing Action Council at (914) 332-4144 or hac@affordablehomes.org

6. **RENT:**

What is your Current Monthly Rent $___________

Check Utilities paid by you now:

- [ ] Heat $______________ per month
- [ ] Electricity $______________ per month
- [ ] Gas $______________ per month
- [ ] Water $______________ per month
- [ ] Other $______________ per month

Do you receive Rental Assistance from a third party, e.g., Housing Voucher? ____Yes ____No

If YES, source of Rental Assistance ____________________________________________________________
7. **INCOME:**

List **ALL** full-time, part-time, seasonal and/or temporary employment for **ALL** household members. Include overtime pay, commissions, fees, tips, bonuses and/or self-employed earnings.

<table>
<thead>
<tr>
<th>HOUSEHOLD MEMBER</th>
<th>EMPLOYER’S NAME/ADDRESS</th>
<th>GROSS EARNINGS (Pre-Tax)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>CURRENT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ANTICIPATED</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$</td>
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<td></td>
<td></td>
<td>Weekly/ biweekly/ monthly (circle one)</td>
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<td></td>
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<td>Weekly/ biweekly/ monthly (circle one)</td>
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<tr>
<td></td>
<td></td>
<td>Weekly/ biweekly/ monthly (circle one)</td>
</tr>
</tbody>
</table>

8. **OTHER SOURCES OF INCOME:**

(EXAMPLES: welfare, social security, SSI, pensions, disability compensation, unemployment compensation, interest, baby-sitting, care-giving, alimony, child support, regular payouts from annuities, 401ks and IRAs, dividends, income from rental property and/or Armed Forces/Reserves.)

<table>
<thead>
<tr>
<th>HOUSEHOLD MEMBER</th>
<th>SOURCE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
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<tr>
<td></td>
<td></td>
<td>Weekly/ biweekly/ monthly (circle one)</td>
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<tr>
<td></td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Weekly/ biweekly/ monthly (circle one)</td>
</tr>
</tbody>
</table>
9. **HOUSEHOLD ASSETS** (This includes but is not limited to Accounts for Checking, Savings, Money Market, CDs, Stocks, Bonds, Retirement accounts including IRA, Roth, Keogh, 401(k) and 403(b), annuities, whole life insurance policies, online accounts (e.g.Paypal)):

**Checking Accounts:**
Bank: ___________________________ Acct. No.: ___________________________ Amt.: ___________
Bank: ___________________________ Acct. No.: ___________________________ Amt.: ___________

**Savings Accounts:** (includes Passbook/Statement and Christmas/Vacation Clubs)
Bank: ___________________________ Acct. No.: ___________________________ Amt.: ___________
Bank: ___________________________ Acct. No.: ___________________________ Amt.: ___________

**Certificates of Deposit (CD’s):**
Bank: ___________________________ Acct. No.: ___________________________ Amt.: ___________
Bank: ___________________________ Acct. No.: ___________________________ Amt.: ___________

**Credit Union Shares:**
Credit Union Name: ___________________________ Amt.: ___________________________
Address ____________________________________________________________________________

**Stocks/ Bonds** (value): $ ________________  Savings Bonds (value): ________________

**Other Amt.:** (includes IRA’s, mutual funds, etc.) $ ________________

Does the applicant or co-applicant **NOW** own real estate: _____ YES _____ NO
If "yes", what is the value: _____________________________________________________________

Has the applicant or co-applicant **EVER** owned real estate? _____ YES _____ NO
If "yes", when? _______________________________________________________________________

**DOCUMENTATION WILL BE REQUESTED AFTER THE LOTTERY**

I (WE) DECLARE THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY(OUR) KNOWLEDGE. WARNING: WILLFUL FALSE STATEMENTS OR MISREPRESENTATIONS ARE PUNISHABLE UNDER FEDERAL LAW.

__________________________________________  __________________________
Applicant Signature                          Date

__________________________________________  __________________________
Co-Applicant Signature                          Date
BACKGROUND CHECK (Please read)

I/ We hereby authorize Housing Action Council and Marathon Development to use any consumer reporting agency, credit bureau or other investigative agencies employed by such, to investigate references, or statements or other data obtained from me or from any person pertaining to my employment history, criminal history, credit, prior tenancies, character, general reputation, personal characteristics and mode of living, to obtain a consumer report and such other information which may result thereby, and to disclose and furnish such information to Housing Action Council, to the owner, and management agent, and to agencies that made or will make funding available in connection with this property listed above in support of this application. I have been advised that I have the right, under 606B of the Fair Credit Reporting Act, to make a written request, within reasonable time, for a complete and accurate disclosure of the nature and scope of any investigation.

________________________________________   __________________________       _______________________
Applicant Signature                    Co-Applicant Signature        Date

10. HOW DID YOU HEAR ABOUT THIS DEVELOPMENT?

☐ Friend     If friend, how did your friend hear about this? ______________________________
☐ Employer    ☐ Sign Posted on Site
☐ Website/ Internet ______________________________ (list site)
☐ Church/ Synagogue (Identify): ______________________________
☐ Community Organization (Identify): ______________________________
☐ Other (Identify): ______________________________