Affordable Senior Apartments For Rent

Canterbury House LP is pleased to announce that applications are now being accepted for a limited number of available affordable senior housing apartments and for to replenish the waiting list for **1331 Bay Street** in **Staten Island**. This building was constructed through the Low Income Housing Tax Credit (LIHTC) program of New York State Homes & Community Renewal. The size, rent and targeted income distribution for the available senior apartments are as follows:

Apartments are designated for the elderly, one of whom must be at least 62 years of age.

Apartment Size	Household Size	Monthly Rent*	Total Annual** Income Range Minimum Maximum
1 Bedroom	1 Person	$769	$27,738 – $30,250
1 Bedroom	2 People	$769	$27,738 – $34,550
1 Bedroom	1 Person	$931	$33,326 – $36,300
1 Bedroom	2 People	$931	$33,326 – $41,460

*Includes gas for cooking
**Income guidelines subject to change

Qualified senior applicants will be required to meet income guidelines and additional selection criteria.

Applications will be accepted until all remaining units are filled and the waiting list is replenished. Applications may be **requested by regular mail from:**

Canterbury House LP
C/O Wavecrest Management Team
87-14 116th Street
Richmond Hill, NY 11418

Please include a **self-addressed envelope** with your request.

You may also download an application by visiting
www.wavecrestrentals.com

No Broker's Fee. No Application Fee.

NEW YORK STATE OF OPPORTUNITY. Homes and Community Renewal

Andrew M Cuomo, Governor
Darryl C. Towns, Commissioner / CEO
New York State Homes and Community Renewal
www.nyhousingsearch.gov

EQUAL HOUSING OPPORTUNITY

Canterbury House LP

Log #_____

INSTRUCTIONS

1. **Mail *only one (1)* original application per household**. You may only be a household member on one application. You will be disqualified if you submit more than one application or a photocopy of an application.
2. You must provide Social Security or Individual Tax Identification Numbers for all adult members of the household and all adult members of the household must sign the certification on the last page of the application. If you fail to do these things, your application will be disqualified.
3. **No payment or fee should be given to anyone** in connection with the preparation or filing of this application for housing, and no broker's fee should be given to receive an apartment.
4. **When completed, mail application in the pre-addressed envelope by regular mail *only*;** do not send by registered or certified mail, Fed Ex or UPS.
5. **Mail Completed Applications to:** **Canterbury House LP**
   C/O The Wavecrest Management Team
   87-14 116th Street
   Richmond Hill, NY 11418

SECTION A. GENERAL INFORMATION

Applicant Name(s): _____

Home Address: _____
Street Apt. # City State Zip

Mailing Address, if different: _____
Street Apt. # City State Zip

Phone No: (home)_____ (work) _____ (cell) _____

Email Address: _____

In current unit: Number of bedrooms _____ Number of persons living there? _____

In apartment applying for: How many persons, including yourself, will live there? _____

Briefly describe your reasons for moving: _____

How did you hear about the development? _____

In case of emergency, notify: _____ Relationship: _____
Address: _____ Daytime Phone: _____

SECTION B. HOUSEHOLD COMPOSITION

List ALL persons who will live in the apartment you are applying for. Include all persons for whom this unit will be a permanent residence/address. List the head of household first.

Name	Relationship to Head	Sex (M/F)	Age	Birth Date	Last four digits of Social Security (or Tax I.D.) Number	Occupation (If in school, write "student")
	Head					

Do you anticipate any additions to the household in the next twelve months? ☐ Yes ☐ No
If yes, explain _____

Check if you or any member of your household has a disability: ☐Mobility ☐ Visual ☐ Hearing
Describe any special accommodation needed in your residence if you or any member of your household is disabled _____

_____

Have ALL of the household members (both adults and children) been full-time students during five months or more of calendar year 2014 or will they be in calendar year 2015? ☐ Yes ☐ No **If Yes, answer the following questions:**

(1) Is the household comprised of a single parent and children, none of whom are dependents on the tax return of someone outside the household? ☐ Yes ☐ No; (2) Are all adult members of the household married and have they filed a joint tax return for the most recent tax year? ☐ Yes ☐ No; (3) Does any member of the household receive AFDC or TANF? ☐ Yes ☐ No; (4) Is any member of the household enrolled in a Federal, State of local job training program? ☐ Yes ☐ No; (5) Has any member of the household ever been a foster child or in the foster care system? ☐ Yes ☐ No.

SECTION C. INCOME

List below ALL current sources of income for ALL HOUSEHOLD MEMBERS, including yourself, listed in Section B. "Household Composition".

EMPLOYMENT INCOME

Is anyone on the household a Municipal Employee for the City of New York? ☐ Yes ☐ No

Include all full-time, part-time and self-employment income.(*Business income must reflect the amount that would be reported on IRS Form 1040, Line 12 and Schedule C, line 31)

Household Member Name	Name & Address of Employer	How Long Employed (From/To)	Status F=Full-Time P=Part-Time S=Self-Employed	Gross Annual Earnings
1.				$
2.				$
3.				$
4.				$
			Total Gross Annual Employment Income =	**$**

OTHER INCOME

Include gross periodic payments from: public assistance (including housing allowance), AFDC, TANF, unemployment, disability, veteran's, social security, SSI, alimony, child support, annuities, pensions, retirement funds, insurance policies, and other regular income. Also, include interest, dividends, net rental income and other income from assets listed in Section D. "Assets".

Household Member Name	Source of Income	Gross Amount		Period Received Weekly, Bi-weekly, Semi-monthly, Monthly, Quarterly	Annual Gross Amount
		$	per		$
		$	per		$
		$	per		$
		$	per		$
				Total Gross Annual "Other Income" =	**$**
				TOTAL GROSS ANNUAL INCOME: ("Employment" PLUS "Other Income")	$

Do you or any household member anticipate any changes in income in the next 12 months? ☐ Yes ☐ No
If yes, explain: _____

_____

SECTION D. ASSETS

List below the current cash value of all assets held by ALL household members, including yourself, listed in Section B. "Household Composition". (Income from these assets must be listed in "Other Income" in Section C. "Income"). Include below: cash on hand, checking accounts, savings accounts, savings bonds, certificates of deposit, money market funds, mutual funds, stocks, bonds, IRA accounts, 401K accounts, other retirement and pension accounts, trust funds, life insurance policies (except Term), personal property held as an investment (e.g. jewelry, antiques or art), equity in real estate and all other assets.

Household Member Name	Institution Name	Type of Asset	Account #	Current $ Value/ Account Balance

TOTAL VALUE OF ASSETS =

Do you or any household member have a pension or retirement account other than an IRA or Keogh? ☐ Yes ☐ No

If Yes, do the terms of the account permit you to withdraw funds from the account now? ☐ Yes ☐ No

Have you or any household member received any lump sum payments, such as inheritance, gambling winnings, insurance?

☐ Yes ☐ No If yes, when? _____ How much? _____

Are these funds reflected in your asset list above? ☐ Yes ☐ No If not, describe why: _____

_____

Do you or any household member own any property, including the home you live in? ☐ Yes ☐ No
If Yes, Type of property _____
Location of property _____
Appraised Market Value $_____ Mortgage or outstanding loans principal balance due $_____
If rental property, net annual rental income $ _____

Have you or any household member sold/disposed of any property in the last 24 months? ☐ Yes ☐ No
If Yes, Type of property: _____ Date of transaction _____
Market value when sold/disposed $_____ Amount sold/disposed for $ _____

Have you or any household member disposed of or given away any other assets in the last 24 months? (Examples: Given away money to relatives or set up Irrevocable Trust Accounts)? ☐ Yes ☐ No

If Yes, describe the asset _____

Date of disposition: _____ Amount disposed $ _____

SECTION E. ADDITIONAL INFORMATION

RESIDENCE HISTORY (FIVE YEARS)

Starting with your current address, list in order all addresses where you have lived for the past five years.

Address	Dates (From/To)	Name* & Address of Landlord

Current monthly rent or mortgage payment amount: $_____ Your contribution: $_____

Check utilities paid by you: ☐ Heat ☐ Electricity ☐ Gas ☐ Other (specify)_____

Are you presently receiving a tenant-based Section 8 Housing Voucher or Certificate? ☐ Yes ☐ No

Do you or any household member have any pets? ☐ Yes ☐ No, if Yes, type? _____

Are you currently on a public housing waiting list or other existing waiting list for subsidized housing? ☐ Yes ☐ No

Are you currently living in sub-standard housing? ☐ Yes ☐ No

If YES please describe. Attach additional pages if necessary. _____

_____

_____

_____

_____

PLEASE CHECK THE GROUP WHICH BEST DESCRIBES THE HEAD OF HOUSEHOLD:

☐ White (Non-Hispanic origin) ☐ American Indian or Alaskan native

☐ Black or African American (Non-Hispanic origin) ☐ Asian or Pacific Islander

☐ Hispanic or Latino origin ☐ Other

(This information is used only for statistical purposes and is optional.)

CERTIFICATION

I/We certify that this will be my/our primary residence. I/We understand that eligibility for housing will be based on applicable income limits and management's selection criteria. I/We certify that all information in this application is true to the best of my/our knowledge, that I/We have revealed all income and assets, 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. Misleading or incomplete information is also grounds for rejection of an application.

In addition, I/We authorize a credit investigation firm retained by the owner to conduct inquiries concerning my/our income, credit history, residence, banking relationships, household composition, character and reputation to determine and verify my/our eligibility for an apartment pursuant to this application. My/Our signature here is consent to obtain such verification.

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

_____	_____	_____	_____
(Signature of Tenant)	Date	(Signature of Co-Tenant)	Date
_____	_____	_____	_____
(Signature of Co-Tenant)	Date	(Signature of Co-Tenant)	Date
_____	_____	_____	_____
(Signature of Co-Tenant)	Date	(Signature of Co-Tenant)	Date