# THE LENNIGER RESIDENCE APPLICATION



All information obtained is confidential and will be used for application review purposes only. The Lenniger Residences maintains a firm commitment to equal opportunity for all applicants. The Lenniger Residences does not discriminate based on race, sex, age, color, national origin, religion, sexual orientation, HIV status, or disability.



### Dear Applicant,

Thank you for your interest in The Lenniger Residences. These newly constructed buildings offer 24-hour security, a gym, computer lab, on-site laundry, and backyard gardens. Per your request, an application for an apartment is enclosed. The completed application must be returned by mail to:

Breaking Ground Central Intake Unit 520 Eighth Avenue 21<sup>st</sup> Floor, Suite 2100 New York, NY 10018

Mail only one application per household for the respective building; you will be disqualified if more than one application per household is received for The Lenniger Residence. When completed, this application must be returned by regular mail only; please do not send registered or certified mail. **Do not give a broker's or an application fee to anyone in connection with the obtaining, preparing or filing of this application for housing.** 

The rent, household size, apartment size and income distribution for these apartments is as follows:

| Apartment<br>Size    | Household Size   | Total Annual Income Range *<br>Minimum – Maximum  | Monthly Rent ** |
|----------------------|------------------|---|-----------------|
| Studio (310 sq. ft.) | 1<br>2           | \$24,210 - \$65,220<br>\$24,210 - \$74,580  | \$795**         |
| 1 BR (600 sq. ft.)   | 1<br>2<br>3      | \$26,210 - \$65,220<br>\$26,210 - \$74,580<br>\$26,210 - \$83,880                           | \$867**         |
| 2 BR (639 sq. ft.)   | 2<br>3<br>4<br>5 | \$31,470 - \$74,580<br>\$31,470 - \$83,880<br>\$31,470 - \$93,180<br>\$36,180 - \$100,620   | \$1,049**       |
| 3 BR (935 sq. ft.)   | 4<br>5<br>6<br>7 | \$36,180 - \$93,180<br>\$36,180 - \$100,620<br>\$36,180 - \$108,060<br>\$36,180 - \$115,560 | \$1,206**       |

\* Income eligibility is based on the Federal Low Income Housing Tax Credit guidelines and is subject to change.

\*\* Includes heat

\*\* Tenants pay for electricity independently to Con Edison, account expected to be open in tenant's name on day of lease signing.

#### Additional Eligibility Requirements:

- Full-time students are <u>not</u> eligible for residency (there are exceptions under the IRS code).
- Pets are not allowed.

#### Application Process:

Each application will be processed in the order it was received. Applicants will be notified of their status by mail. When a vacancy arises, the Central Intake Unit will contact you to collect documentation to confirm your income and program eligibility. In addition to the income requirements, other eligibility factors will be applied, which may include, but are not limited to: (1) Credit Review or Rent Payment History—applicants may choose to consent to a credit review or, instead, provide evidence of full payment of rent for the past 12 months; (2) Criminal Background Checks; (3) Qualification as a Household – the Agency's housing programs are designated for individuals, families and households who can document financial interdependence as a household unit. These affordable programs are not intended for "roommate situations" and so such applicants will not be eligible under this household criterion. (4) Continuing Need – Applicants to HPD/HDC's affordable housing programs must demonstrate a continuing need for housing assistance through an analysis of their assets

and recent income history. (5) Applicants to rental units may not own residential property, or shares in a co-op, in or within one hundred (100) miles of New York City. (6) Asset Limits –There is a limit to the amount of total household assets allowed (excluding specifically designated retirement and college savings accounts). The household asset limit for rental units is equal to the maximum income limit for a four person household at the area median income (AMI) level for which the unit is designated. Household Asset Limits: Area Median Income (AMI): 60%, Asset Limit: \$71,580. AT NO TIME IN THE APPLICATION PROCESS ARE YOU GUARANTEED AN APARTMENT UNTIL YOU HAVE SIGNED A LEASE.

Please note that once your application and supporting documents have been submitted, they are property of Breaking Ground. It is the responsibility of the applicant to keep a copy of the application and documents being submitted.

If you have any questions or experience difficulty completing the forms, please contact the Intake office at (646) 870-8350.

Sincerely, Central Intake Unit Common Ground Management C/O Breaking Ground

Please complete all sections and questions and sign the last page. If one does not apply, please draw a line through the question or write "N/A." If additional space is required please use blank space and/or attach a sheet of paper and clearly label the specific question you are answering (i.e. "Continuation from Question D1"). <u>PLEASE PRINT.</u>

## A. CONTACT INFORMATION

| 1 | NAME                  |   |               |             |
|---|-----------------------|---|---------------|-------------|
|   | First                 | Middle  | Last          |             |
| 2 | STREET ADDRESS        |   |               | APT. NO     |
| 3 | CITY                  | STATE   | ZIP           |             |
| 4 | HOME/CELL PHONE       | ( )   | WORK PHONE () |             |
| 5 | EMAIL (if applicable) |   |               |             |
| 6 |                       | How would you perfer to be contacted (<br>tion is selected, you will be contacted b | . ,           | POSTAL MAIL |

## **B. HOUSEHOLD COMPOSITION AND CHARACTERISTICS**

1 How many people plan on living in the apartment (including you)?

2

Please list each person that plans on living in the apartment. <u>Do not</u> include household members who do not plan on living in the apartment. (**Note**: a full-time student is one who attends school at least 5 months out of a calendar year and has full-time student status for those 5 months, unless the individual qualifies for an exception under IRS code).

|          | HOUSEHOLD<br>MEMBER (NAME)   | RELATIONSHIP | BIRTH DATE | SEX | FULL-TIME<br>STUDENT? (Y/N) | PART-TIME<br>STUDENT? (Y/N) | FULL-TIME STUDENT<br>AT ANY POINT IN THE<br>CURRENT CALENDAR<br>YEAR? (Y/N) |
|----------|--|--------------|------------|-----|-----------------------------|-----------------------------|---|
| L        |  | HEAD/SELF    |            |     |                             |                             |   |
| <u> </u> |  |              |            |     |                             |                             |   |
|          |  |              |            |     |                             |                             |   |
|          |  |              |            |     |                             |                             |   |
|          |  |              |            |     |                             |                             |   |
|          |  |              |            |     |                             |                             |   |
| 3        | Does anyone live with you currently who is not listed above?   |              |            |     |                             |                             |   |
| 4        | Does anyone plan to live with you in the future who is not listed above?                                   |              |            |     |                             |                             |   |
| 4        | Do you or any member of your household require a special accommodation in your residence?                  |              |            |     |                             |                             |   |
|          | If yes, please check which disability applies:<br>Mobility impairment Visual impairment Hearing impairment |              |            |     |                             |                             |   |
| 5        | Please specify the accommodatio  | n required:  |            |     |                             |                             |   |
|          |  |              |            |     |                             |                             |   |

## **C. HOUSING INFORMATION**

| 1 | Present landlord  | Phone            | e <u>(</u> | )           |        |    |
|---|---|------------------|------------|-------------|--------|----|
| 2 | Landlord's address  |                  |            |             |        |    |
| 3 | Is your apartment leased directly to you?   |                  |            |             | YES    | NO |
| 4 | Monthly rent  |                  |            |             |        |    |
| 5 | How long have you lived at this address?  | Years            |            | N           | lonths |    |
| 6 | Do you or any member of your household currently have a Housing Cho<br>portable voucher (aka rental subsidy)? | ce (Section 8) \ | Voucher    | r or simila | r YES  | NO |

## **D. INCOME AND ASSET INFORMATION**

1 List all full and/or part time employment. Include self-employment and/or freelance income earnings.

If you freelance, are multiply employed, or commonly receive 1099s from employers, please list all current contracted positions. If not currently working, please list any positions held within the last 12 months. If you are self-employed, please provide us with the name of your company and the anticipated net income from your business.

| HOUSEHOLD MEMBER (NAME) | EMPLOYER NAME AND ADDRESS | DATES EMPLOYED | GROSS EARNINGS |     |
|-------------------------|---------------------------|----------------|----------------|-----|
|                         |                           | FROM:          | ć              | 201 |
|                         |                           | TO:            | Ş              | per |
|                         |                           | FROM:          | ć              |     |
|                         |                           | TO:            | <b>?</b>       | per |
|                         |                           | FROM:          | ć              | per |
|                         |                           | TO:            | Ş              |     |
|                         |                           | FROM:          | ć              | per |
|                         |                           | то:            | Ŷ              |     |
|                         |                           | FROM:          | ć              | per |
|                         |                           | TO:            | Ş              |     |
|                         |                           | FROM:          |                |     |
|                         |                           | TO:            | Ş              | per |
|                         |                           | FROM:          | ć              |     |
|                         |                           | TO:            | Ş              | per |

2

List other income that you currently receive, such as public assistance, Social Security, Supplemental Security Income, pension, disability, unemployment compensation, alimony, child support, Armed Forces Reserves, regular financial support and/or grants.

| TYPE OF INCOME | AMOUNT |
|----------------|--------|
| 1)             | \$ per |
| 2)             | \$ per |
| 3)             | \$ per |

3 What is your household's total annual income?

\$\_\_\_\_\_

#### 4 List all assets of household members who will live in the apartment:

| HOUSEHOLD MEMBER<br>(NAME) | TYPE (CHECKING, SAVINGS, MONEY MARKET/TRUSTS, CDS, DIRECT DEPOSIT<br>ACCOUNTS, IRA/RETIREMENT ACCOUNTS, CREDIT UNION SHARES,<br>STOCKS/BONDS, ETC.) | FINANCIAL INSTITUTION |
|----------------------------|---|-----------------------|
|                            |   |                       |
|                            |   |                       |
|                            |   |                       |
|                            |   |                       |

#### 5 List any assets disposed of for less than their fair market value during the past two years:

| 6         | Do you or any member of your household own any real estate?   | YES           | NO                  |  |  |  |
|-----------|---|---------------|---------------------|--|--|--|
|           | If yes, what is the current market value?   |               |                     |  |  |  |
|           | What is the value less any mortgage or lien?  |               |                     |  |  |  |
|           | Do you or any member of your household receive any rent from tenant(s) living at the                            | nis property? |                     |  |  |  |
|           | If yes, how much?   |               | NO                  |  |  |  |
| 7         | Do you expect to receive income that you are not currently receiving?   | YES           | NO                  |  |  |  |
| <u>E.</u> | MARKETING INFORMATION   |               |                     |  |  |  |
| Ho        | How did you learn about the availability of these apartments? Please check and fill in all choices that apply): |               |                     |  |  |  |
|           | Newspaper   | Sign Poste    | d on Property       |  |  |  |
|           | City "affordable housing hotline" listing new ads for the month   | Friend        |                     |  |  |  |
|           | Web Site/Internet   | Local Orga    | anization or Church |  |  |  |

Other \_\_\_\_\_

## F. RACIAL GROUP / ETHNICITY IDENTIFICATION

The following information is required for statistical purposes by the U.S. Department of Housing and Urban Development. It will not affect the processing of this application. Please check one box in each "a" and "b" of which identifies the <u>HEAD OF THE HOUSEHOLD.</u>

| A | American Indian or Alaskan Native | Asian Black or African American |
|---|-----------------------------------|---------------------------------|
|   | Native Hawaiian/Pacific Islander  | White                           |
| В | Hispanic or Latino                | Not Hispanic or Latino          |

I hereby affirm that, to the best of my knowledge, the foregoing information is true, accurate and complete. I understand that misleading or false statements, misrepresentations, or incomplete information in this application will be grounds for rejection. I authorize Common Ground Management to contact my agencies, offices, other groups or organizations to obtain any information or materials deemed necessary to process my application, including verifying my financial, credit, housing and legal history. I understand that this information will be considered when determining my eligibility.

**APPLICANT'S SIGNATURE** 

DATE