

Red Hook Commons Phase 2
Rt. 9
Red Hook, NY

Thank you for your interest in Red Hook Commons Phase 2. Please fill out the attached application, sign and mail it to:

Red Hook Commons Phase 2
15 Laura Lane - Office
Red Hook, NY 12571
(845)-758-0651

Below are a few points to keep in mind:

- A) You must be 55 years of age to submit an application and to live in Red Hook Commons Phase 2. If two people will be on the application both must be 55 or older.
- B) Your gross annual income and income from assets cannot exceed \$35,040.00. If two people will be living in the apartment you cannot exceed \$40,080.00 combined.
- C) All income and assets must be verifiable. Income will be re-certified annually.
- D) All apartments are one bedroom and approximately 665 sq. ft., and have central air conditioning.
- E) Each building has an elevator and laundry room.
- F) We have a small pet policy

Please do not send a deposit at this time.

If you have any questions please call the office between 9:00am and 3:00pm
Monday – Friday.

Sincerely,

Management

Official Use Only

Red Hook Commons Phase 2 Rental Application

Official Use Only

Date received _____

The undersigned hereby makes application to rent at Red Hook Commons Phase 2 for a lease term of one year. In connection with such application, the undersigned provides the following information which is certified as true and correct as of the date herein.
PLEASE PRINT

HEAD OF HOUSEHOLD:

Name _____ Social Security # _____ Birthdates _____

Handicap Yes ___ No ___ Phone# _____

OTHER OCCUPANTS:

Name _____ Social Security # _____ Birthdates _____

Handicap Yes ___ No ___

RENTAL HISTORY:

Current Address: _____ Monthly Rent \$ _____ own ___ Rent ___

How Long: _____ Landlord Name: _____ Landlord phone# _____

Reason for moving _____

Prior Address: _____ Monthly Rent \$ _____ own ___ Rent ___

How Long: _____ Landlord Name: _____ Landlord phone# _____

Reason for moving _____

CREDIT REFERENCES:

Bank Name: _____ Checking # _____ Savings # _____

Bank Name: _____ Checking # _____ Savings # _____

Bank Name: _____ Checking # _____ Savings # _____

Driver's License# _____ State: _____ Expires: _____

Driver's License# _____ State: _____ Expires: _____

Vehicle Model: _____ Year: _____ Plate: _____

Vehicle Model: _____ Year: _____ Plate: _____

OTHER INFORMATION:

Filed for bankruptcy? ___ Yes ___ No
Have either of you ever: Been Evicted from Tenancy? ___ Yes ___ No
Been convicted of a felony? ___ Yes ___ No

Emergency Contact: _____ Phone # _____

EMPLOYMENT:

Circle all applicable: Employed full-time Employed part-time Self-employed
 Non-employed Unemployed Retired

Current Employer: _____ Position: _____ How Long: _____

Address: _____

Supervisor: _____ Phone: _____ Fax: _____

Current Wages: \$ _____ per hour week bi-weekly monthly yearly (circle one)

Average hours worked/week: _____ Average tips/week \$ _____ Do you have a second job? _____

OTHER INCOME:

Note: Applicants must complete this section in order to determine qualification for residency within the Federal Low Income Housing Tax Credit Program. Although this information is voluntary under the Federal Fair Housing Act, failure to provide such income may result in non-qualification for residency for any rental unit in Affordable Housing Program.

Other Income Includes: Alimony, child support, welfare, unemployment, aid to dependent children, social security, annuities, whole life insurance policies, retirement benefits, pensions, disability, gifts from family, and other regular periodic payments.

If none check here: No other sources of income

1) _____ Type of income	_____ Annual amount	_____ Contact address or phone number
2) _____ Type of income	_____ Annual amount	_____ Contact address or phone number
3) _____ Type of income	_____ Annual amount	_____ Contact address or phone number
4) _____ Type of income	_____ Annual amount	_____ Contact address or phone number
5) _____ Type of income	_____ Annual amount	_____ Contact address or phone number

RENTAL ASSISTANCE:

No Rental Assistance Rental Assistance From: _____

Voucher Certificate Tenant Portion: \$ _____

ASSETS:

Assets include: cash (wherever held), trust corpus, equity in real estate or capital investments, notes receivables, stocks, bonds, money market accounts, certificates of deposit, IRAs, retirement and pension funds, and luxury personal property (gems, jewelry, art, coin collections, etc.). You must also include the value of any assets disposed of in the past 24 months at less than fair market value.

Assets do not include: Necessary personal property such as clothing, furniture, daily-use autos, tools, dishes, etc. Also excluded is any special equipment for use by the handicapped, and assets of a business.

Are the assets, as defined above, of the whole household more than \$5,000? Yes No
Have you disposed of any assets at less than fair market value within 24 months? Yes No

CERTIFICATION:

I hereby apply to lease the above described premises on substantially the terms set forth herein. As an inducement to Red Hook Commons Phase 2 to accept this application, I certify that all information contained herein is true. Material falsification of information provide may result in the rejection of this application or in the termination of the Lease Agreement.

I understand at this time no deposit is required however at the time that I am called for an apartment and before the final paperwork is started one may be required. The applicant hereby waives any claim to damages by reason of non-acceptance.

By execution of this application, I hereby authorize Red Hook Commons Phase 2 or its agents to make such investigations into my credit, employment, rental and criminal history as they may deem appropriate, and release all parties from all liability for any damage that may result from their furnishing information to you.

I understand that this property limits the number of occupants to two persons per bedroom.

Applicant: _____ Date _____

Applicant: _____ Date _____

Asset Addendum

Applicant/Resident Name: _____ Date: _____

You have applied to live in an apartment that is governed by the Housing Credit Program. This Program requires us to certify all of your income, asset and eligibility information as part of determining your household's eligibility. We must determine this prior to granting your eligibility and, if such eligibility is granted each subsequent year you remain in the unit.

Have you or anyone in the household disposed of asset(s) for LESS THAN FAIR MARKET VALUE in the last 2 years? YES _____ NO _____

If YES, please complete the table below

If NO, please sign below

Type of Asset	Fair Market	Actual Amount	Difference	Date of disposal
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Explanation: _____

I certify that the information given above is true and complete to the best of my knowledge. I understand that providing false or misleading information is a breach of my lease and may be subject to criminal penalties.

Signature of Applicant/Resident: _____ Date _____