2605 Grand Concourse Apts. Application

INSTRUCTIONS:

1. **SUBMIT ONLY ONE APPLICATION PER HOUSEHOLD.**

2. **You must complete the first three sections (Sections A, B, and C) as well as sign and date the application in order for your application to be reviewed if it is selected for further processing.** The application should be completed very carefully. **Incomplete information for the number and names of household members applying to live in the unit, or their incomes, may result in disqualification.** In addition, do not use white-out or liquid paper anywhere on the application. If you need to correct a mistake, you should cross one line neatly through the information, write the revised information neatly next to it, and sign your initials near the change.

3. Only the application should be submitted at this time. If your application is selected for further processing, additional information will be requested at that time.

4. Mail completed application to:

2605 Grand Concourse Apts. (Applications)

42-06 235th Street
Douglaston, NY 11363

5. **No payment should be given to anyone in connection with the preparation or filing of this application.** No broker or application fees may be charged. If your application is selected for further processing, you have the option to provide evidence of 12 months of full rent payments or consent to a credit check. If the management company runs a credit check, a non-refundable credit check fee of a maximum of $20 per application may collected by the company at that time. Alternatively, you may provide a credit check run in the past 30 days to avoid a credit check and fee.

6. Income Eligibility: Please review the chart in the project advertisement which breaks down the mandatory income levels for the HPD/HDC housing program of the project you are applying to, based on household size. List all current income sources for all household members on the application. In general, gross income is calculated for most applicants, except that net income is used for self-employment income. Further, please note that if your application is selected for further processing, all sources of income will need to be documented and verified. If your application is selected, you will be contacted, via the method you select on the application (email or paper mail), with a list of such documentation that you will need to provide at that time.

7. Other Eligibility Factors: In addition to the income requirements, other eligibility factors will be applied. Eligibility factors may include, but are not limited to:
   a. 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.
   b. Criminal Background Checks
   c. 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.
   d. 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.
   e. Property Ownership – 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.
   f. 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 (4)-person household at the area median income (AMI) level for which the unit is designated.

Household Asset Limits:
Area Median Income (AMI): **60% AMI**
Asset Limit: **$97,200**
Area Median Income (AMI): **100% AMI**
Asset Limit: **$162,000**
Area Median Income (AMI): **130% AMI**
Asset Limit: **$210,600**

8. Primary Residence Requirement: Any applicant ultimately approved for this development must maintain the new apartment as their sole primary residence. If approved for an affordable housing unit, the applicant must surrender any unit where applicant is then currently residing. Each member of the applicant's household who leases rental residential real property must terminate the lease for and surrender possession of such rental property on or before the move-in date for a rental affordable unit.

9. Submission of False or Incomplete Information: Prospective applicants should be aware that this is a governmentally assisted housing program. The submission of false or knowingly incomplete information (either in this application or in any subsequently provided verification documents) will not only result in an applicant's disqualification, but will be forwarded to the appropriate authorities for further action – including the possibility of criminal prosecution. All paperwork and documents submitted by applicants are subject to review by the New York City Department of Investigation, a fully empowered law enforcement agency of the City of New York.

A. Name & Address (Required)

First, Middle Initial, & Last Name, Suffix:	
Current Address Line 1:	
Current Address Line 2:	
City:	
State:	
Zip Code:	
Cell Phone:	
Home Phone:	
Work Phone:	
Email:	

How long have you lived at this address? _____ Years, _____ Months

Please select **one** of the following, email or paper mail as your preferred method of communication for ALL future correspondence regarding this application. If your preferred mailing address is different than the one listed above, please indicate the preferred mailing address in the space provided:

☐ Email: _____

☐ Paper Mail (specify if mailing address is different than above): _____

B. Household Information (Required)

PRIVACY ACT NOTIFICATION - The Federal Privacy Act of 1974, as amended, requires agencies requesting Social Security Numbers to disclose (a) whether compliance with the request is voluntary or mandatory, (b) why the information is requested; and (c) how it will be used. Providing Social Security Numbers and/or Taxpayer Identification Numbers on this application is voluntary. Social Security Numbers and Taxpayer Identification Numbers which are voluntarily disclosed on this application will be used only to establish an organized and specific method of identifying applicants who are seeking affordable housing within the City of New York, will be kept in a secure location, and will not be used or disclosed for any other purpose. Failure to provide a Social Security Number or Taxpayer Identification Number on this application will not result in an applicant's disqualification at this time. If your application is selected for further processing, the building's landlord will have the right to require this information at that time in order to perform a credit check.

How many persons, including yourself, will live in the unit for which you are applying? _____

List ALL OF THE PEOPLE who will live in the unit for which you are applying, starting with yourself (Head of Household), and provide the following information. Please indicate if the household member has a disability. If yes, would you describe the disability as a mobility impairment **(MI)**, visual impairment **(VI)**, or hearing impairment **(HI)**:

First, Mid. Initial, & Last Name, Suffix	SSN/TIN (Optional)	Relationship to Applicant	Birth Date (MM/DD/YY)	Sex	Occupation	Disabled?		
						MI	**VI**	**HI**
		Head of Household						

Are you or a member of your household a Veteran of the U.S. Armed Forces? ☐ **Yes** ☐ **No**
*Please see Definition of Eligibility below.

If you checked either mobility, visual, or hearing impairment, do you or a member of your household require a special accommodation?

☐   Yes – please specify the accommodation required: _____

☐   No

*Definition of veteran from 38 U.S.C. 101(2):

The term "veteran" means a person who served in the active military, naval, or air service, and who was discharged or released there from under conditions other than dishonorable.

C. Income (Required)

Question 1	
Are you or a member of your household an employee of the City of New York, the New York City Housing Development Corporation, the New York City Economic Development Corporation, the New York City Housing Authority, or the New York City Health and Hospitals Corporation?	☐ Yes ☐ No
If "yes," please specify the agency or entity at which you or a member of your household is employed.	
Question 2	
If you answered "yes" to Question 1 above, have you personally had any role or involvement in any process, decision, or approval regarding the housing development that is the subject of this application?	☐ Yes ☐ No

Note: If you answered "yes" to Question 1 above, you may be required to submit a statement from your employer that your application does not create a conflict of interest. If you answered "yes" to Question 2 above, you will be required to submit a statement from your employer that your application does not create a conflict of interest. Such statement would not be required

until later in the application process, after you have been selected through the lottery, when you will also be required to provide other documents to verify income and eligibility.

HPD EMPLOYEES ONLY: If you are an HPD employee, please read the Commissioner's Order regarding conflicts of interest and consult with the agency's Office of Legal Affairs before you submit your application.

1. Income from Employment

List all full and/or part time employment income for ALL HOUSEHOLD MEMBERS including yourself, WHO WILL BE LIVING WITH YOU in the residence for which you are applying. Include self-employment earnings:

Household Member	Employer Name & Address	Length of Employment		Earnings	Period (weekly, every other week, twice a month, monthly, annually)	Annual Gross Income
		Years	**Months**			
Head of Household						

2. Income from Other Sources

List all other income sources for each household member, for example, welfare (including housing allowance), AFDC, Social Security, SSI, pension, workers' compensation, unemployment compensation, interest income, babysitting, care-taking, alimony, child support, annuities, dividends, income from rental property, Armed Forces Reserves, scholarships and/or grants, gift income, etc.

Household Member	Type of Income	Dollar Amount	Period (weekly, every other week, twice a month, monthly, annually)	Annual Gross Income
Head of Household				

3. **TOTAL ANNUAL HOUSEHOLD INCOME**

   Add ALL Annual Gross Income (Sections 1 & 2 above) and list the TOTAL ANNUAL HOUSEHOLD INCOME:

4. **Assets**

Are there assets for this household? Examples of assets include checking account, savings account, investment assets (stocks, bonds, vested retirement funds, etc.), real estate, cash savings, miscellaneous investment holdings, etc.	☐ Yes ☐ No

	If "yes," please indicate assets for each household member:	
Household Member	**Type of Asset/Account**	**Branch**
Head of Household		

D. Rental Subsidy

Are you presently receiving a Section 8 Housing Voucher or Certificate, or any other form of rental assistance? Please check the appropriate box at right. Examples of other rental subsidies/certificates include CITYFEPS, FEPS, LINC, NHTD (Medicaid Waiver), Individual Services and Supports (ISS), Traumatic Brain Injury (TBI) Waiver, SEPS, and VASH. This information will not affect the processing of the application. Minimum income listed may not apply to applicants with Section 8 or other qualifying rental subsidies.	☐ No ☐ Yes – HPD Section 8 voucher ☐ Yes – NYCHA Section 8 Voucher ☐ Yes – Other Rental Subsidy/Certificate

E. Current Landlord

☐ **New York City Housing Authority (NYCHA)**

☐ **Other City Owned (In Rem)**

☐ **A Company or Organization**

☐ **An Individual**

Landlord Name (Company, Organization, or Individual Name)	Landlord Address	Landlord Phone #
What is the total rent on the apartment where you currently live or are temporarily staying?	_____ monthly	
How much do you contribute to the total rent of the apartment? If nothing, write "0."	_____ monthly	

F. Source of Information

How did you hear about this development? Please check all that apply:	
Newspaper	City "affordable housing hotline"
Local organization or church	Friend
Sign posted on property	www.nyc.gov/housingconnect
Community Board	Elected representative
Other website:	Other:

G. Ethnic Identification

This information is optional and will not affect the processing of the application. Please check the group(s) that best identifies the household:

White (non-Hispanic origin)	Black
Hispanic origin	Asian or Pacific Islander
American Indian/Native Alaskan	Other:

H. Language

In what language would you like to be contacted about your application? Please choose one. If you do not choose a language, communication will be in English.	
English	한국어 (Korean)
简体中文 (Chinese)	Русский (Russian)
Kreyòl Ayisyen (Haitian Creole)	Español (Spanish)
العربية (Arabic)	

I. Signature (Required)

I (WE) DECLARE THAT STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY (OUR) KNOWLEDGE. I (We) have not withheld, falsified, or otherwise misrepresented any information. I (We) fully understand that any and all information I (we) provide during this application process is subject to review by The New York City Department of Investigation (DOI), a fully empowered law enforcement agency which investigates potential fraud in City-sponsored programs. I (we) understand that consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my (our) application, the termination of my (our) lease (if discovery is made after the fact), and referral to the appropriate authorities for potential criminal prosecution.

I (WE) DECLARE THAT NEITHER I (WE), NOR ANY MEMBER OF MY (OUR) IMMEDIATE FAMILY, ARE EMPLOYED BY THE BUILDING OWNER OR ITS PRINCIPALS.

Signature: _____ Date: _____

Signature: _____ Date: _____

Are you interested in other housing opportunities? ☐ Yes ☐ No

If yes, which area? ☐ Queens ☐ Manhattan ☐ Brooklyn ☐ Bronx

What bedroom size? ☐ Studio ☐ 1 Bedroom ☐ 2 Bedroom ☐ 3 Bedroom

OFFICE USE ONLY:

Person with Disability: [ ] Mobility [ ] Visual [ ] Hearing
Community Board Resident: [ ] Yes [ ] No
Municipal Employee: [ ] Yes [ ] No
Size of Apartment Assigned: [ ] Studio [ ] 1BR [ ] 2 BR [ ] 3 BR [ ] 4 BR
Family Composition: Adult (Males) _____ Adult (Females) _____
  Children (Males)_____ Children (Females) _____
TOTAL VERIFIED HOUSEHOLD INCOME: $_____ PER YEAR

Immediate Vacancies & Replenish Waiting List
Grand Concourse
[2605 Grand Concourse](#), Bronx, NY, 10468

New York City is committed to the principle of inclusivity in all of its neighborhoods, including supporting New Yorkers to reside in neighborhoods of their choice, regardless of their neighborhood of origin and regardless of the neighborhood into which they want to move.

Amenities: On-Site Super, parking lot*, laundry room* (*additional fees may apply)
Transit: D/4 Train, Bx1, Bx2, Bx9, Bx12, Bx22, Bx34, Bx28, Bx41
No application fee • No broker's fee • Pet FRIENDLY building

Applications are now being accepted for immediate vacancies and to replenish the waiting list. Individuals or households who meet the income and household size requirements listed in the table below may apply. Qualified applicants will be required to meet additional selection criteria such as asset limits.

UNITS FOR WAITING LIST

Unit Size(s)	Monthly Rent Range[1]	House-hold Size(s)[2]	Annual Household Income[3] Minimum – Maximum[4]	Disability Designation
60% AREA MEDIAN INCOME (AMI)				
Studio – 3 Bedroom	$1,000- $2,300	1 person – 7 people	$38,091 -$120,540	N/A
100% AREA MEDIAN INCOME (AMI)				
Studio – 3 Bedroom	$1,100 - $2,500	1 person – 7 people	$41,520 - $200,900	N/A
130% AREA MEDIAN INCOME (AMI)				
Studio – 3 Bedroom	$1,300 - $2,900	1 person – 7 people	$48,377 - $261,170	N/A

UNIT AVAILABLE FOR IMMEDIATE LEASING

Unit Size(s)	Monthly Rent Range[1]	House-hold Size(s)[2]	Annual Household Income[3] Minimum – Maximum[4]	Disability Designation
130% AREA MEDIAN INCOME (AMI)				
3 Bedroom	$2,386.36*	3 people	$82,697 - $189,540	Mobility
		4 people	$82,697 - $210,600	
		5 people	$82,697 - $227,500	
		6 people	$82,697 - $244,400	
		7 people	$82,697 -$261,170	

[1] Tenant is responsible for Electricity for Cooking and Light
[2] Household size includes everyone who will live with you, including parents and children. Subject to occupancy criteria.
[3] Household earnings includes salary, hourly wages, tips, Social Security, child support, and other income. Income guidelines subject to change.
[4] Minimum income listed may not apply to applicants with Section 8 or other qualifying rental subsidies. Asset limits also apply.
* Listed rent for available 3bd unit reflects current Rent Stabilized limit for 1yr lease; amount subject to change due to term/law.

How Do You Apply?		
By Mail **(Send a self-addressed envelope)**	**By Email / Calling**	**Online**
2605 Grand Concourse Apts. ***(Applications)*** 42-06 235th Street, Douglaston, NY 11363	Cm_Leasing@cmnyc.com **347-287-3100**	https://www.clintonmanagement.com/availabilities/affordable/

What Happens After You Submit an Application?

Applications are logged in the order in which they are received. As units become available, applicants on the waiting list who appear to qualify will be contacted to submit documents that verify their household size, identity of members of the household and household income.

Mayor Eric Adams • **HPD** Acting Commissioner Ahmed Tigani • **HDC** President Enderlin