

# <u>IMPORTANT! PLEASE READ THIS ENTIRE NOTICE</u>

# Completed Applications May Be Returned by email to: apply@ccmanagers.com by Fax to 212-348-3670 or by Mail. Do NOT return page 1 & 2 with your application

YOU MUST BRING <u>PHOTOCOPIES ONLY</u> OF THE REQUIRED DOCUMENTATION TO YOUR ELIGIBILITY APPOINTMENT. DOCUMENTS WILL NOT BE RETURNED. WE CANNOT MAKE COPIES OF DOCUMENTS.

EVERYONE 18 YEARS OF AGE AND OVER WHO IS LISTED ON THE APPLICATION <u>MUST</u> ATTEND THE ELIGIBILITY APPOINTMENT.

A MANDATORY CREDIT\* AND CRIMINAL BACKGROUND CHECK\*\* IS REQUIRED FOR ALL HOUSEHOLD MEMBERS OVER THE AGE OF 18. IF PROCESSED YOU WILL BE PROVIDED WITH INSTRUCTIONS ON THE PROCEDURE FOR THE CREDIT/BACKGROUND SCREENING.

\*\*\*\*\*\*APPLICANTS WITH SECTION 8 <u>MUST</u> BRING THEIR TRANSFER
PACKAGE, IF IN POSSESSION\*\*\*\*\*

\*\*\*\*\*APPLICANTS WITH TENANT BASED SUBSIDY <u>MUST</u> BRING PROOF
OF VOUCHER. IF INPOSSESSION\*\*\*\*\*

\*WE ACCEPT EVIDENCE OF MONTHLY RENTAL PAYMENTS FOR THE PAST 12 MONTHS IN LIEU OF A CREDIT CHECK REPORT.

\*\*IF AN INELIGIBLE BACKGROUND HISTORY IS FOUND WE WILL PERMIT YOU THE OPPORTUNITY TO REVIEW, CONTEST, EXPLAIN THE CIRCUMSTANCES, AND PROVIDE US WITH EVIDENCE OF REHABILITATION BY APPEALING WITHIN 14 DAYS OF BEING INFORMED OF THE FINDING.





If contacted for an eligibility appointment the following PHOTOCOPIED documentation will be requested to determine eligibility for income restricted units. If determined eligible a credit & background fee not exceeding what the landlord pays will be required; all household members 18 years or older will be screened.

### **Required Income Documents:**

- If Employed- Last Six (6) consecutive pay stubs for ALL working household members over the age of 18.
- If Employed All 2020 W2(s), 1099s and complete tax return including all schedules.
- If a household member(s) is receiving - Social Security, Pension, Worker's Compensation, Unemployment disbursement history, Annuity payments, Public Assistance (TANF) etc. Current budget letters and/ award letters for household member(s) receiving
- If receiving child support- Child support and/ or alimony court order documents or other verifiable forms of child support and/ or alimony. www.newyorkchildsupport.com
- If receiving Veteran's Benefits-Current Award Letter
- If receiving Pension payments-Current award letter & most recent quarterly pension statement
- If Self Employed- 2020 & 2019
   Complete signed tax returns;
   including all schedules, W2 & 1099

### **Asset Documents:**

- Checking accounts- Last Six (6)
   complete consecutive checking
   account statements (all pages ex 1 of
   6, all 6 pages must be submitted) for
   <u>all household members 18+</u> with a
   checking account.
- Savings accounts- Most recent complete savings account and/ or CD statement (all pages ex: 1 of 3, all 3 pages must be submitted) for all

- household members 18+ with a savings account.
- Money Market Acct- latest statement
- Most recent 401K/ 403b statement
- Most recent IRA, Mutual Funds, Trust Etc. - Documentation verifying income received.

## **Compliance Documents:**

- Valid Photo id (ex. Driver's License, non- driver's Id, etc.) & social security cards for all household members
- Birth certificates for <u>all household</u> members under 18
- Marriage Certificate or Domestic Partnership Cert. if applicable
- School letters and student status documents
- Current lease, residency letter or notarized landlord letter
- Six (6) recent Rent receipts
- Most recent electricity and/ or telephone bill

### **OVERALL CREDIT HISTORY**

In lieu of a credit report applicants can provide documentation to support positive rental history for the last 12 months (canceled checks, rent ledger or bank statements, other documentation can be submitted for review) or a copy of a credit report within the last 30 days. Background checks are required of all applicants 18 years and older. You can request a free annual credit report at www.annualcreditreport.com







# **RENTAL APARTMENT APPLICATION**

Desired Apt Size  ☐ Studio	Lo		ed (Number Your , 294 E 162nd St	Preference 1,2 OR 3) reet	
Desired Contact Method: ☐ Email I	⊐Mail				
Instructions: 1. Only one (1) application per family. 2. All areas of the application must be 3. This application must be signed by					
A. Name and Address				$\cup$	
Name ————				_	
Current Address:			(Numbe	er, Street, Apt. #)	
		$\Delta$		(City, State, Zip)	
How long have you been living at this ad	dress?	years	mor	nths	
Home Phone No. ( )_	Work Phone No. (	)——		_	
Cellular Phone No. ( )	_ F-mail Address	, ,			
B. Household Information  How many persons in your household,  ———	including yourself, W	ILL LIVE IN	THE UNIT FOR	WHICH YOU ARE APPLYING	ì?
List all of the people WHO WILL LIVE IN The information. Add additional pages if necessary					airment.)
Full Name	Relationship To Applicant	Age	Sex M/F	Occupation (Write  "In School", if  attending school	
	SELF				
	-				







# **C.** Income from Employment

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

sehold Member	Name & Address of Employer		Period (Years, Months)	Gross Annua Earnings
			<b>\</b>	
Total Gross Househo	old Farnings	\$	<b>Y</b>	
	er Sources , for example, welfare (including h	ousing allowance)		
List all other income, disability, compensati support, annuities, div	er Sources , for example, welfare (including h tion, unemployment compensation vidends, ,income from rental proper	nousing allowance), nousing allowance), nous interest income,	babysitting, care ta	aking, alimony, d
List all other income, disability, compensation support, annuities, div	er Sources , for example, welfare (including h tion, unemployment compensation	nousing allowance),	babysitting, care ta	aking, alimony, d
List all other income, disability, compensation support, annuities, divided Household Member 1.	er Sources , for example, welfare (including h tion, unemployment compensation vidends, ,income from rental proper	nousing allowance), no, Interest Income, ty, Armed Forces F	babysitting, care ta	aking, alimony, d
List all other income, disability, compensate support, annuities, div	er Sources , for example, welfare (including h tion, unemployment compensation vidends, ,income from rental proper	nousing allowance), Interest Income, ty, Armed Forces F	babysitting, care ta Reserves, scholarship	aking, alimony, d
List all other income, disability, compensation support, annuities, divided Household Member 1.	er Sources , for example, welfare (including h tion, unemployment compensation vidends, ,income from rental proper	nousing allowance), interest Income, ty, Armed Forces F	babysitting, care ta Reserves, scholarship per	aking, alimony, d
List all other income, disability, compensation support, annuities, divided the support of the s	er Sources , for example, welfare (including h tion, unemployment compensation vidends, ,income from rental proper	nousing allowance), interest Income, ty, Armed Forces F	babysitting, care ta Reserves, scholarship per per	aking, alimony, d
List all other income, disability, compensation support, annuities, divided Household Member 1.  2.  3.	er Sources , for example, welfare (including h tion, unemployment compensation vidends, ,income from rental proper	ousing allowance), Interest Income, ty, Armed Forces F  Amount  \$	babysitting, care ta Reserves, scholarship per per per	aking, alimony, d
List all other income, disability, compensation support, annuities, divided Household Member 1.  2.  3.	er Sources , for example, welfare (including hitton, unemployment compensation vidends, ,income from rental proper    Type of Income   Type   Type	sousing allowance), Interest Income, ty, Armed Forces F	babysitting, care ta Reserves, scholarship per per per	aking, alimony, o





Add all income listed above and indicate the total earned for the year: \$\_



# F. Assets

	Name of Bank/Branch Address
Checking Accounts	
	Y
Savings Account	
CD's, Stocks, Bonds, Pension Plan	

G. Current Landlord Landlord's Name:	
(If you are living in a public housing project write "NYCHA". If you write ("HPD"). If you live with relatives write "Relative/Parents" of	, , ,
Landlord's Address:	(Number, Street, Apt#)
Landlord's Phone No. ( )	(City, State, Zip)
H. Current Rent What is the total rent on the apartment where you currently live or are \$00 per month  How much do you contribute to the total rent on the apartment? (If you \$00 per month)	







Why are you moving? Check all that apply:	
<ul> <li>□ Living with parent</li> <li>□ Not enough space</li> <li>□ Homeless</li> <li>□ Bad housing conditions</li> <li>□ Current apartment not suitable for person(s) with disabilities</li> <li>□ Health Reasons</li> </ul>	☐ Do not like neighborhood ☐ Living with relatives or another family ☐ Rent too high ☐ Increase in your family size (marriage, birth) ☐ Other:
I. Housing Assistance  Are you presently receiving a Section 8 housing certific  ☐ Yes ☐ No  Are you presently receiving any housing assistance pr	
☐ Yes ☐ No  If yes, what type?	
Please answer "Yes" or "No". This information will not	affect the processing of the application.
J. Source of Information	
How did you hear about this development?  ☐ Newspaper ☐ Local Organization or Church ☐ A City "affordable housing" hotline listing new ads for a M New York/METRO Paper (please specify): ☐ Other:	☐ Sign Posted on Building ☐ Friend or the month
K. Statistical Information	
The following information is required for statistical pur may determine the degree to which its programs are uti Providing this information will not affect the processing of your processing your processin	
RACIAL GROUP IDENTIFICATION (Please check only one	from this group which best identifies the applicant.
☐ White ☐ Asian ☐ American Indian or Alaska Native & White ☐ Asian & White ☐ American Indian or Alaska Native & Black or African Ame	☐ Black or African American ☐ American Indian or Alaska Native ☐ Native Hawaiian or Other Pacific Islander ☐ Black or African American & White
ETHNICITY: (check only one from this group)	
Hispanic	Non-Hispanic







### L. Credit Authorization

I/We hereby authorize C&C Apartment Management LLC to use RentGrow, Inc and/ or CoreLogic SafeRent, a screening and risk management services agency employed by such, to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to my employment history, credit, prior tenancies, character, general reputation, personal characteristics and mode of living, to obtain a consumer report and such other credit information which may result thereby, and to disclose and furnish such information to the owner/agent listed above in support of this application. I/We have been advised that I/We have the right, under Section 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. I/We have been advised that I/We am/are entitled to a free annual tenant screening report, from each national consumer reporting agency, in addition to a credit report that should be obtained from www.annualcreditreport.com <a href="http://www.annualcreditreport.com">http://www.annualcreditreport.com</a>

I/We certify that all information and answers to the above questions are true and complete to the best of my/our knowledge. I/We consent to release the necessary information to determine my/our eligibility. I/We understand that providing false information or making false statements may be grounds for denial of my application. I/We understand that my occupancy is contingent on meeting management's residency selection criteria and requirements.

# M. Signature

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 local, state, and federal regulatory agencies, including 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 the consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my application, the termination of my lease (if discovery is made after the fact), and referral to the appropriate authorities for potential criminal prosecution.

I DECLARE THAT NEITHER I, NOR ANY MEMBER OF MY IMMEDIATE FAMILY IS EMPLOYED BY THE NEW YORK CITY HOUSING DEVELOPMENT CORPORATION OR ITS SUBSIDIARIES, OR THE BUILDING OWNERS OR ITS PRINCIPALS (ALL PERSONS OVER THE AGE OF 18 MUST SIGN).

Y	
Applicant Signature	Date
Co-Applicant's Signature	Date
Co-Applicant's Signature	Date
Co-Applicant's Signature	 Date



