NEWLY CONSTRUCTED APARTMENTS FOR RENT www.Wavecrestrentals.com



Homeport I LLC is pleased to announce applications are now being accepted for affordable housing rental apartments at 7 & 8 Navy Pier Court, in the Stapleton Section of Staten Island, NY. The size, rent, and targeted income distribution for the apartments are as follows:

| Apartment Size | Monthly Rent* | Household Size** | Total Annual Income Range Minimum Maximum*** |
|-------------------|------------------|------------------|---|
| Studio | \$947 | 1 | \$34,355 - \$40,080 |
| 1 Bedroom | \$1,017 | 1 | \$36,823 - \$40,080 |
| | | 2 | \$36,823 - \$45,840 |
| | | 2 | \$39,943 - \$45,840 |
| 2 Bedroom | \$1,230 | 3 | \$39,943 - \$51,540 |
| | | 4 | \$39,943 - \$57,240 |

^{*}Tenant responsible for Electric **Subject to occupancy criteria ***Income guidelines subject to change

Qualified Applicants will be required to meet income guidelines and additional selection criteria. To receive an application, mail a SELF ADDRESSED STAMPED ENVELOPE to: Navy Pier Court c/o: The Wavecrest Management Team, 87-14 116th Street, Richmond Hill, NY 11418, or download an application from www.NavyPierCourt.com.

Submit completed applications by <u>regular mail only</u> to the post office box number listed on the application postmarked by <u>September 15, 2015</u>. No priority, certified, registered, expressed or overnight mail will be accepted. Applications postmarked after <u>9/15/15</u> will be set aside for possible future consideration. Applications will be selected by lottery; applicants who submit more than one application will be disqualified. Disqualified applications will not be accepted. Current and eligible residents of **Staten Island Community Board 1** will receive preference for 50% of the units. Eligible households that include persons with mobility impairments will receive preference for 5% of the units; eligible households that include persons with visual and/or hearing impairments will receive preference for 2% of the units.

No Broker's Fee. No Application Fee.



New York State Housing Finance Agency
James S. Rubin, Commissioner

www.nyhousingsearch.gov









7 & 8 Navy Pier Court

| Log | # |
|-----|---|
| | |

INSTRUCTIONS

- 1. <u>Mail only one (1) original application per household</u>. 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. **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.
- 3. Mail Completed Applications to: Navy Pier Court

87-14 116th Street

Richmond Hill, NY 11418

SECTION A. GENERAL INFORMATION

| Zip |
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| permanent |
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| pation write "student") |
| pation write "student") |
| pation write "student") |
| |

| Do you anticipate any additions to the If yes, explain | household in the next tw | relve months? | l Yes | | No | |
|---|------------------------------|--|------------|--|--------------------------|------------------------|
| Check if you or any member of your had Describe any special accommodation | - | | - | □ Vi your ho | | _ |
| Have ALL of the household member | s (both adults and childre | en) been full-tim | ne studen | ts durii | ng five months or i | nore of previous |
| calendar year or will they be in curren | t year? ☐ Yes ☐ N | If Yes, | answer t | he foll | owing questions: | |
| (1) Is the household comprised of a si | ngle parent and children, | none of whom a | are depen | dents o | on the tax return of | someone outside |
| the household? \square Yes \square No; (2) A | are all adult members of | the household m | narried an | d have | they filed a joint t | ax return for the |
| most recent tax year? □ Yes □ No; | • | | | | | □ No; (4) Is any |
| member of the household enrolled in a | a Federal, State of local jo | ob training progr | am? 🗆 Y | 'es □ | No | |
| | SECTION | C. INCOM | E | | | |
| List below ALL current sources of "Household Composition". | f income for ALL HOU | USEHOLD ME | MBERS, | includ | ling yourself, liste | d in Section B. |
| EMPLOYMENT INCOME | | | | | | |
| 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 | Name & Address of Employer Employed P= | | Status F=Full-Time P=Part-Time S=Self-Employed | Gross Annual Earnings | |
| 1. | | | | | | \$ |
| 2. | | | | | | \$ |
| 3. | | | | | | \$ |
| 4. | | | | | | \$ |
| | Total | Gross Annual | Employn | nent Ir | ncome = | \$ |
| OTHER INCOME | | | | | | |
| Include gross periodic payments from veteran's, social security, SSI, alimor income. Also, include interest, divide | ny, child support, annuiti | es, pensions, ret | irement fi | unds, i | nsurance policies, a | and other regular |
| Household Member Name | Source of Income | Gross Amount | | Period Received | | 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 ant If yes, explain: | icipate any changes in inc | come in the next | 12 month | ıs? □ | Yes □ No | |

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 |
|---|--------------------------|---------------------------|------------------------------|--------------------------------------|
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| | | | | |
| | | TOTAL | VALUE OF ASSETS = | |
| | | TOTAL | VALUE OF ASSETS | |
| Do you or any household member | have a pension or retire | ment account other than | n an IRA or Keogh? 🗆 Y | es □ No |
| If Yes, do the terms of the account | permit you to withdraw | funds from the accoun | t now? □ Yes □ N | No |
| Have you or any household member | er received any lump su | m payments, such as in | heritance, gambling winni | ings, insurance? |
| | • • | * * | Iow much? | • |
| Are these funds reflected in your a | | | | |
| | | | | |
| Do you or any household member | own any property, inclu | ding the home you live | in? □ Yes □ No | |
| If Yes, Type of property | | | | |
| Location of property Appraised Market Value \$ If rental property, net annual rental | | Mortgage or outstanding | ng loans principal balance | due \$ |
| If rental property, net annual rental | l income \$ | | | |
| Have you or any household member | er sold/disposed of any | property in the last 24 n | nonths? □ Yes □ N | lo |
| If Yes, Type of property: Market value when sold/disposed S | | | ansactionold/disposed for \$ | |
| Market value when sold/disposed S | <u> </u> | Amount s | old/disposed for \$ | |
| Have you or any household memb | | | in the last 24 months? (| Examples: Given away |
| money to relatives or set up Irrevo | | | | |
| If Yes, describe the asset Date of disposition: | | Amount dis | posed \$ | |

SECTION E. ADDITIONAL INFORMATION

RESIDENCE HISTORY (FIVE YEARS)

(Signature of Co-Tenant)

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 | | | ddress of Landlord | |
|--|----------------------|-----------------------------|-----------|-----------|--------------------|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Current monthly rent or mortgage payment amount: \$ | | | Your co | ntributio | n: \$ | |
| Check utilities paid by you: ☐ Heat ☐ Electricity | | | □ Gas | | ☐ Other (specify) | |
| Are you presently receiving a tenant-based Section 8 Housing Voucher or Certification 2 (1997) Are you presently receiving a tenant-based Section 8 Housing Voucher or Certification 2 (1997) Are you presently receiving a tenant-based Section 8 Housing Voucher or Certification 2 (1997) Are you presently receiving a tenant-based Section 8 Housing Voucher or Certification 2 (1997) Are you presently receiving a tenant-based Section 8 Housing Voucher or Certification 2 (1997) Are you presently received a tenant-based Section 8 (1997) Are you presently received a tenant-b | | | cate? □ | l Yes | □ No | |
| Are you or any member of your household currently using an illegal substance? ☐ Yes ☐ No | | | | | | |
| Have you or any member of your household ever been convicted of a felony? | | | □ Yes | □ No | If Yes, when? | |
| Have you or any member of your household ever | been evicted from h | nousing? | □ Yes | □ No | If Yes, when? | |
| Have you or any member of your household ever | filed for bankruptcy | y? | □ Yes | □ No | If Yes, when? | |
| Do you or any household member have any pets? If yes to any questions above, explain | | | □ Yes | □ No | If Yes, type? | |
| | | | | | | |
| PLEASE CHECK THE GROUP(S) WHICH BES | | | | | | |
| ☐ White (Non-Hispanic origin) ☐ American Indian or Alaskan native | | | | ive | | |
| ☐ Black or African American (Non-Hispanic ori | gin) □ Asi | ian or Pacifi | c Island | er | | |
| ☐ 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. SIGNATURE(S): All adult applicants, 18 or older, must sign application. | | | | | | |
| (Signature of Tenant) | Date | (Sig | gnature o | f Co-Tena | nt) Date | |
| (Signature of Co-Tenant) | Date | (Sig | gnature o | f Co-Tena | nt) Date | |

Date

(Signature of Co-Tenant)

Date