



**1 EAST MAIN STREET
AFFORDABLE RENTAL HOUSING PROGRAM**

FIRST-COME FIRST-SERVED PROGRAM GUIDELINES

PLEASE READ CAREFULLY

Effective November 1, 2023-October 31, 2024

- I. **Program Description** – Through the cooperative efforts of the Town of Islip, Bay Shore Main & 4th, LLC (the “Owner/Manager”) is accepting applications for three affordable rental units located within the development known as “1 East Main Street.” 1 East Main is located at 1 East Main Street in Bay Shore, NY. Under the 1 East Main Street Affordable Rental Housing Program, two 1 bedroom units and one studio unit will be made available to households with incomes that do not exceed 80% of the Nassau/Suffolk area median income as established by the U.S. Department of Housing and Urban Development (“HUD”).

Applications will be accepted on a First-Come, First-Served basis. Income and program restriction apply as set forth below.

- II. **Income Guidelines** – Units are available to households with incomes that do not exceed 80% of the HUD area median income for Nassau/Suffolk, as required by the Town of Islip. The 2020 HUD area median incomes are as follows and are adjusted annually:

<u>STUDIO</u>	
Gross Household	
<u>Maximum Annual Income*</u>	<u>Minimum Annual Income **</u>
\$86,200	\$47,088
<u>1 BEDROOM</u>	
Gross Household	
<u>Maximum Annual Income*</u>	<u>Minimum Annual Income **</u>
\$98,500	\$53,280

*Includes all income – overtime, bonuses, pensions, social security, 401K distributions, tips, etc. Your gross income cannot exceed the maximum annual income for your household size. Income limits are subject to change annually and may be adjusted for rounding.

**Minimum income guidelines do not apply to those applicants with an approved rental assistance subsidy. Minimum incomes are set exclusively by the Owner and may not apply if sufficient liquid assets or other mitigating factors and/or guarantees are available as determined and approved solely by the Owner. If the Owner requires a guaranty, please be advised that the Owner may independently verify the income and credit/background of the guarantor and make a determination whether it is acceptable. The determination as to



whether to the guarantor meets the income and credit/background requirements and whether to accept the guaranty is the sole and exclusive determination of the Owner and LIHP has no authority to review, accept or reject a guarantor. The Owner will determine whether to accept or decline the guarantor and will notify LIHP who will then notify the applicant.

III. Rents***

Each apartment will be rented for an affordable price as per Town of Islip requirements.

<u>November 1, 2023 – October 31, 2024 Rents are set as follows:</u>	
<u>Apartment Size</u>	<u>Monthly Rent</u>
Studio	\$1,962
1 Bedroom	\$2,220

*****PLEASE NOTE THAT RENTS CHANGE ANNUALLY AND ARE CALCULATED AFTER A UTILITY ADJUSTMENT. THE TENANTS ARE RESPONSIBLE TO PAY UTILITIES.**

IV. Credit and Background Check – All applicants and household members age 18 and over will be subject to a credit and background check by Owner/Manager and must be approved. A fee may apply.

V. Application Process - Applications will be accepted on a first-come, first-served basis. Applicants are placed on the waiting list and will be processed for eligibility in the order in which their application is received. Once an application is received, the Owner/Manager will conduct a credit and background check. Applicants who do not meet the credit and background requirements will be advised by Owner/Manager of ineligibility. Applicants who qualify will be advised by Owner/Manager and will be required to submit all required income and eligibility documentation by the date specified by the Owner/Manager for purposes of determining the income eligibility of the applicant and other program requirements. Please note, only completed Applications, together with ALL required documentation, will be reviewed for program eligibility. Applicants must submit to Owner/Manager all documentation required, including **signed** copies of the last three (3) years of their federal income tax returns, W-2 and/or 1099 forms, four (4) most recent consecutive pay stubs and two (2) most recent consecutive bank statements for any and all bank accounts and investment accounts..

ALL HOUSEHLD MEMBERS 18 YEARS OF AGE OR OLDER MUST SIGN THE APPLICATION.

Applicants who meet the income and other eligibility requirements may be offered a unit to rent.

VI. Applications – Applications are available at the Owner/Manager’s website at www.1EASTMAINSTREET.COM. Applications may be submitted by mail to the Owner/Manager at C/O Greenview Properties, Inc., 5 Shore Lane, Bay Shore, NY 11706. Applications may also be submitted on-line at info@1EASTMAINSTREET.COM.



- VII. **Fees** – Certain fees apply to applicants who are approved and elect to sign a lease. The Fees are set forth on Schedule A. Fees are subject to change by Owner/Manager without notice.
- VIII. **Annual Recertification** - The maximum household income requirements are adjusted annually by HUD. Recertification of income will be required annually to remain eligible for the Program. To preserve the units for occupants who meet the income guidelines, the following will apply: Occupants of the affordable Studio unit whose income increases above 100 % of the then current applicable HUD area median income, based on a household of 1, will no longer be eligible for the Program and will be required to vacate. Occupants of the affordable 1 bedroom units whose income increases above 100 % of the then current applicable HUD area median income, based on a household of 2, will no longer be eligible for the Program and will be required to vacate.
- IX. **Pets** – Pets are permitted with certain restrictions. One pet (dog or cat only) under 25 pounds. A photo and evidence of vaccinations required. The restrictions do not apply to service or assistance animals or as required under fair housing laws.
- X. **Residential Property** - An applicant cannot have an ownership interest in residential property at the time of application, which shall include, but is not limited to, a single family home, a condominium or a cooperative unit.
- XI. **No Smoking** – 1 East Main Street is a smoke free facility
- XII. **Fair Housing** - All Fair Housing Laws shall be complied with. Owner/Manager shall not discriminate on the basis of race, creed, color, national or ethnic origin, sex, sexual orientation, gender identity, familial status, source of income, religion, disability, veterans status, age, or any other basis prohibited by law.
- XIII. **Limited English Proficiency** - Applications and Program Guidelines are available in English and Spanish and will be made available in other languages as requested. Owner/Manager will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) and persons, who have a limited ability to speak, read, or write English, or who need accommodations, will have meaningful access and an equal opportunity to participate in the Program. Interpreters, translators and other aids needed to comply with this policy shall be provided as reasonably necessary. If you have any questions regarding the guidelines, or need language assistance or other assistance including translation and/or oral interpretation services, please contact the Owner/Manager at info@1eastmainstreet.com.



**LONG ISLAND HOUSING PARTNERSHIP (LIHP) FORMAL PROGRAM APPLICATION FOR
NON-AGE RESTRICTED RENTALS**

1 EAST MAIN STREET AFFORDABLE RENTAL HOUSING PROGRAM IN BAY SHORE, NY

SECTION A. GENERAL INFORMATION

Applicant's Name: _____

Home Address: _____

Street
Apt #
City
State
Zip

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

In apartment applying for: How many persons, including yourself, will live there? _____

Are you presently receiving a tenant-based Section 8 Housing Voucher or Certificate or other rental subsidy?

Yes No

SECTION B. HOUSEHOLD COMPOSITION

List ALL persons who will live in the apartment you are applying for. Include all persons for whom this unit will be a permanent residence/address. List the head of household first.

Name	Relationship To Head	Sex M/F/ Other	Age	Birth Date	Social Security Number	Occupation (If in school, write "student")
	Head					



Do you anticipate any additions to the household in the next twelve months? Yes No

If yes, explain _____

Have any of the household members (both adults and children) been full time students during five months or more of this calendar year? Yes No

If yes, who?

SECTION C. INCOME

List below ALL current sources of income for ALL HOUSEHOLD MEMBERS, including yourself, listed in Section B - "Household Composition"

EMPLOYMENT INCOME: Include all full-time, part-time and self-employment income.

Household Member Name	Name & Address of Employer	How Long Employed (From / To)	Status =FULL TIME =PART TIME S=SELF EMPLOYED	Gross Annual Earnings
Total Gross Annual Employment Income:				



OTHER INCOME: Include gross periodic payments from: public assistance (including housing allowance), AFDC, TANF, unemployment, disability, veteran’s social security, SSI, alimony, child support, annuities, pensions, retirement funds, insurance policies and other regular income. Also, include interest, dividends, net rental income and other income from assets listed in Section D – “Assets”

Household Member Name	Source of Income	Gross Income		Period Received (weekly, bi-weekly, semi-monthly, quarter)	Annual Gross Amount
		\$	per		\$
		\$	per		\$
		\$	per		\$
		\$	per		\$
		\$	per		\$
		\$	per		\$
Total Gross Annual “Other Income”					\$
TOTAL GROSS ANNUAL INCOME: (Employment PLUS “Other Income)					\$

Do you or any household member anticipate any changes in income in the next 12 months?

Yes No

If yes, explain: _____



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: 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, insurance policies (except Term policies), equity in real estate and all other assets.

Household Member Name	Type of Asset (checking, savings, CD, etc.)	Name of Financial Institution	Current \$ Value/ Account Balance
TOTAL VALUE OF ASSETS			\$

Do you or any household member have a pension or retirement account other than an IRA or Keogh? Yes No

If yes, do the terms of the account permit you to withdraw funds from the account now? Yes No

Have you or any household member received any lump sum payments, such as inheritance, gambling winnings, insurance?

Yes No If yes, when? _____ How much? _____

Are these funds reflected in your asset list above? Yes No



If not, describe why: _____

Have you or any household member previously owned a dwelling or dwelling unit? Yes No

Do you or any household member own any property, including the home you live in? Yes No

If yes, type of property _____

Location of property _____

Appraised Market Value \$ _____

Mortgage or outstanding loans principal balance due \$ _____

If rental property, net annual rental income \$ _____

Have you or any household member sold/disposed of any real property in the last 24 months?

Yes No

If yes, Type of property: _____ Date of transaction: _____

Market value when sold/disposed of: \$ _____ Amount sold/disposed for: \$ _____

Have you or any household member disposed of or given away any other assets in the last 24 months?
(Examples: Given away money to relatives or set up Irrevocable Trust Accounts)?

Yes No

If yes, describe the asset: _____ Date of disposition: _____

Amount disposed: \$ _____



AFFORDABLE HOUSING RENTAL PROGRAM AUTHORIZATIONS, CERTIFICATIONS AND DISCLAIMERS

AUTHORIZATIONS:

The undersigned is applying to the Long Island Housing Partnership (LIHP) for the Program named above. To be considered for the Program, the undersigned agrees as follows:

1. LIHP is hereby authorized and permitted to disclose and/or verify any and all information (a) contained in the undersigned’s application and in other documents submitted for the Program, and/or (b) regarding the undersigned’s participation in the Program, to or with any third party, including, but not limited to, government agencies, housing authorities, employers, landlords, mortgage lenders/servicing companies, property managers, credit reporting agencies, funders, or brokers (“Third Parties”), as applicable, as part of the undersigned’s application to or recertification under the Program. Without limiting the foregoing, LIHP may request information which includes, but is not limited to, sources of personal and business income, social security numbers and any additional information as necessary.
2. The undersigned hereby authorizes any Third Party to provide to LIHP any and all information and documentation that LIHP may request in connection with the Program, including but not limited to, information regarding rent, household size, income, mortgage, employment, credit, income, bank, money market and similar accounts (including balances), and income tax returns.
3. A copy of this Authorization may be accepted as an original. This authorization will remain in effect until revoked in writing by the undersigned.

CERTIFICATIONS.

- 1) **I/WE CERTIFY THAT I/WE HAVE NOT READ AND UNDERSTAND THE PROGRAM GUIDELINES FOR THE AFFORDABLE HOUSING RENTAL PROGRAM. SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE ELIGIBILITY AND ELIGIBILITY IS SUBJECT TO COMPLIANCE WITH ALL PROGRAM GUIDELINES.**
- 2) **I/WE CERTIFY THAT I/WE HAVE BEEN PROVIDED WITH A CHECKLIST OF DOCUMENTS AND INFORMATION REQUIRED TO BE PROVIDED TO BE CONSIDERED FOR ELIGIBILITY FOR THE AFFORDABLE HOUSING RENTAL PROGRAM. I/WE UNDERSTAND THAT FAILURE TO PROVIDE SUCH DOCUMENTS AND INFORMATION WILL MAKE ME/US INELIGIBLE FOR SUCH PROGRAM.**
- 3) **THE INFORMATION PROVIDED IS TRUE AND ACCURATE. I UNDERSTAND THAT PROVIDING FALSE INFORMATION MAY DISQUALIFY ME FOR CONSIDERATION IN THIS PROGRAM. IF ANYTHING CHANGES WITH MY/OUR INCOME OR STATUS ON OUR APPLICATION, PRIOR TO THE TIME OF ENTERING INTO A CONTRACT AND/OR A LEASE, I/WE MUST NOTIFY LIHP IMMEDIATELY AS THIS MAY AFFECT APPLICANT’S ABILITY TO QUALIFY FOR AN APARTMENT IN THIS PROGRAM AND MY STATUS MAY NEED TO BE UPDATED. LIHP HAS THE RIGHT TO RE-VERIFY APPLICANT’S PROGRAM STATUS UP UNTIL A FORMAL CONTRACT AND/OR LEASE IS SIGNED.**



DISCLAIMER OF LIABILITY/RELEASE

APPLICANT ACKNOWLEDGES THAT LIHP IS NEITHER THE OWNER, MANAGER, LANDLORD OR LEASING AGENT. LIHP’S ROLE IS LIMITED TO REVIEWING YOUR HOUSEHOLD INCOME TO DETERMINE IF YOU MEET THE MAXIMUM INCOME QUALIFICATIONS FOR THE PROGRAM. THE COMPLEX IS/WAS CONSTRUCTED AND IS OPERATED INDEPENDENTLY BY THE OWNER/MANAGER AS LANDLORD AND LIHP HAS NO ROLE IN UNIT OCCUPANCY, UNIT SELECTION, REVIEW OF YOUR SUITABILITY FOR TENANCY, FEES ASSESSED, THE LEASE TERMS, THE LEASE-UP PROCESS BY OWNER/MANAGER, THEIR AFFILIATES OR AGENTS, PROCESSING OF ANY HOUSING VOUCHER, UNIT LAYOUT AND LOCATION, OR THE OPERATIONS, STATEMENTS, ACTS OR OMISSIONS, AND POLICIES/PROCEDURES, OF THE COMPLEX OR THE OWNER/MANAGER AND ITS AFFILIATES OR AGENTS WHATSOEVER, INCLUDING, WITHOUT LIMITATION, IN CONNECTION WITH ANY REQUEST FOR REASONABLE ACCOMMODATION (THE “OWNER RESPONSIBILITIES”). WITHOUT LIMITING THE FOREGOING, YOU ACKNOWLEDGE THAT LIHP HAS NO ABILITY OR RESPONSIBILITY TO ADDRESS ANY REQUEST YOU MAY HAVE FOR A REASONABLE ACCOMMODATION/MODIFICATION REGARDING A UNIT AND ANY SUCH REQUEST WILL BE MADE BY YOU DIRECTLY TO THE OWNER/MANAGER FOR PROCESSING.

ACCORDINGLY, YOU AGREE THAT LIHP, ITS AFFILIATES, EMPLOYEES, AGENTS, OFFICERS, MEMBERS, AND DIRECTORS (COLLECTIVELY, “LIHP”) ARE NOT LIABLE FOR ANY CLAIMS OR CAUSES OF ACTIONS ARISING FROM ANY OF THE OWNER/MANAGER RESPONSIBILITIES AND, FOR GOOD AND VALUABLE CONSIDERATION, YOU HEREBY RELEASE AND WAIVE ALL CLAIMS OR CAUSES OF ACTION YOU NOW HAVE OR MAY HAVE AGAINST LIHP ARISING OUT OF OR RELATED TO THE OWNER RESPONSIBILITIES.

YOU HAVE READ THIS DOCUMENT, UNDERSTAND THAT YOU MAY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. IF ANY PROVISION OF THIS DOCUMENT IS UNENFORCEABLE, IT SHALL BE MODIFIED TO THE EXTENT NECESSARY TO MAKE THE PROVISION VALID AND BINDING, AND THE REMAINDER OF THIS DOCUMENT SHALL REMAIN ENFORCEABLE TO THE FULL EXTENT ALLOWED BY LAW.

DISCLAIMER: It is understood that this is not an offer and that LIHP and/or the municipality may change the terms and conditions at any time. It is further understood that notices may be made in such manner as LIHP may determine, including solely by advertisement or email. LIHP is not responsible to any party for any damage(s) caused or which may be caused as a result of the information collected for this application. LIHP reserves the right to reject any application for any non-discriminatory reason. Decisions by LIHP are final.



MUST BE SIGNED BY APPLICANT AND HOUSEHOLD MEMBER 18 AND OVER

_____	_____	_____
Applicant's Name (Please Print)	Signature	Date
_____	_____	_____
Household Member 18 and over (Please Print)	Signature	Date
_____	_____	_____
Household Member 18 and over (Please Print)	Signature	Date
_____	_____	_____
Household Member 18 and over (Please Print)	Signature	Date



FAIR HOUSING AND NON-DISCRIMINATION

LIHP is committed to promoting fair housing, equal opportunity, and non-discrimination in compliance with all federal, state and local laws, including, but not limited to, the Fair Housing Act, as amended by the Housing for Older Americans Act, the Americans with Disabilities Act, the Civil Rights Act, and the New York State Human Rights Law. The LIHP staff is available to assist with the application, and answer questions about eligibility requirements. In furtherance of this policy, LIHP shall not discriminate on the basis of race, creed, color, national or ethnic origin, sex, sexual orientation, gender identity, familial status, source of income, religion, disability, veterans' status, age, or any other basis prohibited by law.

LIMITED ENGLISH PROFICIENCY AND ACCOMMODATIONS

Applications and Program Guidelines are available in English and Spanish and will be made available in other languages as requested. LIHP will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) and persons who need assistance or who have a limited ability to speak, read, or write English, will have meaningful access and an equal opportunity to participate in the Program. Interpreters, translators and other aids needed to comply with this policy shall be provided as reasonably necessary. If you have any questions regarding the guidelines, or need assistance including language assistance such as translation and/or oral interpretation services, please contact the LIHP at info@lihp.org.



**1 EAST MAIN STREET
AFFORDABLE HOUSING RENTAL PROGRAM-NON-AGE RESTRICTED
CHECKLIST OF REQUIRED DOCUMENTS**

(COPIES ONLY, NO ORIGINALS)

	APPLICANT	18 AND OVER	18 AND OVER
Completed, signed and Dated application	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>
Four (4) most recent, consecutive paystubs that indicate year-to-date gross income. If year-to-date is not included on paystub, a letter from employer on company stationery is required. The employer letter must state the title/position, start date, rate of pay, hours worked per pay period, frequency of pay and year to date gross income. If you are currently unemployed, provide a notarized letter stating status of employment and provide documents of source of income if any.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Self-employed applicants must provide a letter from a CPA or attorney indicating the amount you expect to receive for the next 12 months or must provide a notarized YTD profit and loss statement	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Documentation evidencing income from Social Security (2023 award letter), Pension, Unemployment & Alimony/Maintenance	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
2022 w2 Statement(s) and 1099 statement(s)	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Signed 2022 Federal Tax returns w/required schedules. Sign second page of your federal tax return where it says "sign here". If you cannot locate your federal tax returns, you may go to the IRS website and printout the tax return transcript and wage and income transcript. 2021 Federal tax return along with 2020 and 2019 will be accepted until April 15, 2023 in lieu of 2022, 2021 and 2020 federal tax return if you have not filed 2022 federal tax return yet.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Signed 2021 Federal Tax returns w/required schedules	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Signed 2020 Federal Tax returns w/required schedules	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Two (2) months most recent consecutive bank statements with all pages for all accounts or 60 days printout of transactions for all accounts. Statement/printout must show the name of the bank, account holder's name, running balance and the last four digits of the account number. If you do not own any bank account, provide a notarized letter.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Most recent retirement and/or investment account with all pages. The statement/printout must show the name of the institution, account holder's name and the last four digits of the account number.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Documents showing balance and/or value of all stocks, bonds, treasury bills, certificate of deposits, etc.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
School transcripts for full time students over 18 years.	N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Legal separation agreement/stipulation of settlement or divorce decree.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Proof of rental assistance subsidy	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>



Market Analysis for all properties owned	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Documentation on balances for mortgages/lien on all properties owned	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Employment Verification Form (enclosed) Must be completed by each employer or provide a letter from your employer on company stationery stating the title/position, start date, rate of pay, hours worked per pay period, frequency of pay and year to date gross income.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Request for Alimony and Child Support Form if there is no other proof of child support (enclosed).	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

Comments:

You may be required to supply/submit additional documentation to complete and substantiate your eligibility.

PLEASE SUBMIT DOCUMENTS IN THE ORDER LISTED ABOVE.

**1 EAST MAIN STREET AFFORDABLE RENTAL HOUSING PROGRAM
EMPLOYMENT VERIFICATION REQUEST FORM**

Name of Employer: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____

(Name of applicant) _____ has applied for residency at 1 East Main Street Affordable Rental Housing Program. As a part of application process, it is necessary that the property management obtain verification of the applicant's employment and income prior to occupancy.

Permission by (Signature of Applicant): _____ Date: _____

Employer, please complete the section below and return it to the applicant listed above or upload to _____

Sincerely,
1 East Main Street

THIS SECTION TO BE COMPLETED BY THE EMPLOYER

Date of Employment: From ___/___/___ To ___/___/___

Title/Position: _____

Current Rate of Pay: \$_____ Per Week Biweekly Bimonthly Month

If hourly, how many hours per week does the employee work? _____

Does the employee earn:

Tips Yes No

Overtime Yes No

Commission Yes No If yes, how often _____ and amount anticipated for the next 12 months \$_____

Bonuses Yes No If yes, how often _____ and amount anticipated for the next 12 months \$_____

Other Compensation not included above: _____

Verified by: Print Name of Company Official

Title of Official

Signature of Official

Date



**1 EAST MAIN STREET AFFORDABLE RENTAL HOUSING PROGRAM
REQUEST FOR CHILD SUPPORT / ALIMONY
VERIFICATION**

(Name of Applicant) _____ has applied for residency at 1 East Main Street Rental Housing Program. As a part of the application process, it is necessary that we obtain verification of his/her receipt of any child support and/or alimony payments prior to occupancy.

Permission by (signature of applicant): _____ Social Security: _____

Please complete the section below and return it to us by fax or mail at your earliest convenience.

Sincerely,

1 East Main Representative

This form does not apply because I/We do not receive any child support or alimony.

Applicant/Resident: _____ Date: _____

Witness: _____ Date: _____

CHILD SUPPORT OR ALIMONY VERIFICATION

Declaration of payment made:

I, _____, who reside at _____ do certify that I pay the sum of \$ _____ per _____ for the obligation of child support _____ alimony _____ (please check one). If child support, please list names of children cared for.

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

How long must payments be made? _____

Signature: _____ Date: _____

Witness : _____ Date: _____



Declaration of payment received: the applicant or resident entitled to the child support or alimony should fill out this section if the maker of the payment is not able to be reached or will not complete the form. If the applicant is not receiving child support, or if the applicant is receiving a different amount than on a divorce or settlement agreement, this form must be notarized.

I, _____, who reside at _____ do certify that I received the sum of \$ _____ per _____ for the obligation of child support ___ alimony ___ (please check one) If child support, list names of children cared for:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

If child support or alimony is \$0, answer the following:

- ___ I am not entitled to receive child support
- ___ I am entitled to receive child support but do not currently receive it.
- ___ I am not entitled to receive alimony
- ___ I am entitled to receive alimony but do not currently receive it.

Please explain the likelihood of receiving either child support or alimony in the future and attach a copy of your divorce decree/separation agreement. If there is no agreement, please state so. If the amount being received is different than the amount specified in the divorce decree or settlement, please explain the difference and what attempts have been made to collect the amount specified.

Signature: _____ Date: _____

Notary: _____ Date: _____

Date Sent: _____

Date Received: _____

