

AFFORDABLE HOUSING FOR PURCHASE



Matinecock Court

137 Units at: 1-147 Matinecock Ct.

East Northport, NY 11731 Application Due: June 10th, 2025





Amenities: Retail Shops and transportation nearby. The project amenities in each unit include Energy Star appliances, microwave and dishwasher, on-site resident super, inunit laundry, property club house, and accessible parking for residents.

Income Restrictions Apply - No Application Fee - No Broker's Fee

Applicants will *not* be automatically rejected based on credit or most background check info Priority admissions: Mobility disability: 15 units; Hearing/Vision disability: 6 units; Veterans: 4 Units

 $\textbf{More Information:} \ \underline{\textbf{www.rentalapp.us}}$

Your household must meet these income restrictions:

AMI	Unit Size	# Units	Monthly Maintenance*	Household Size	Household Income**
50%	1 BR	1	\$1206	Å	\$38,000- \$54,750
				<u> </u>	\$38,000- \$66,000
					\$38,000- \$74,250
	2 BR	10	\$1449	**	\$45,700- \$66,000
				<u></u>	\$45,700- \$74,250
					\$45,700- \$82,450
				••••	\$45,700- \$89,050
60%	1 BR	8	\$1478	À	\$46,600- \$69,300
					\$46,600- \$79,200
					\$46,600- \$89,100
Ī	2 BR	76	\$1776	ii	\$56,000- \$79,200
					\$56,000- \$89,100
				•••••	\$56,000- \$98,940
					\$56,000- \$106,860
Ī	3 BR	38	\$2021	***	\$56,600- \$89,100
				••••	\$56,600- \$98,940
				••••	\$56,600- \$106,860
				*****	\$56,600- \$114,780
				*****	\$56,600- \$122,700
70%	2 BR	1	\$2103	ii	\$63,800- \$92,400
				iii.	\$63,800- \$103,950
				•••••	\$63,800- \$115,430
					\$63,800- \$124,670
80%	1BR	1	\$2024	*	\$63,900- \$92,400
				<u> </u>	\$63,900- \$105,600
					\$63,900- \$118,800
Ţ	2BR	2	\$2431	Ä	\$76,700- \$105,600
				<u>M</u>	\$76,700- \$118,800
				•••••	\$76,700- \$131,920
					\$76,700- \$142,480

^{*} Occupancy Preferences May Apply

^{*} Resident's are responsible for electricity, electric stove, electric heat, and electric hot water. Income guidelines & permitted household size are subject to change.

^{**}Minimum income listed may not apply to applicants with Section 8 or other qualifying rental subsidies. Asset limits also apply.

Application Due Date: June 10th, 2025

Must be postmarked June 10th, 2025 by this date. Sending more than one (1) application may disqualify you.

How to Apply:

Online: www.rentalapp.us

Request Application By Phone or Email: 516-437-0900 ext 26, mgmtinfo@thedfdgroup.com

By Mail or In-Person: 100 Schoolhouse Road Levittown NY 11756

Include your address & the name and address of the building where you want to apply.

Lottery Date & Location: June 24th, 2025 at 1pm at 100 Veterans Memorial Hwy, Hauppauge, NY 11788/ Recording available via

YouTube: D&F Development@dfdevelopment6768

The lottery will determine which applications will be reviewed for tenancy.



YOU HAVE RIGHTS!

• If you have experienced housing discrimination: https://dhr.ny.gov/journey-fair-housing or call **844-862-8703**

 Learn about how your credit and background check will be individually reviewed: https://on.ny.gov/3uLNLw4



ACCESSIBILITY INFORMATION

- 15 units are adapted for mobility impairment
- 6 units are adapted for hearing/vision impairment
- [All] units are adaptable to be wheelchair accessible
- Reasonable accommodation and modifications may be requested



ESPAÑOL siguiente página ■中文 下一页■ KREYÒL AYISYEN paj kap vini an ■한국어다음 페이지■ [वाংলা] - পরবর্তী পৃষ্ঠা ■ РУССКИЙ Следующая בלאַט ווייַטער - **אידיש ■ FRANÇAIS** page suivante בלאַט ווייַטער - **אידיש ■ ITALIANO** pagina successiva **■ FRANÇAIS** page suivante בלאַט ווייַטער - א**ידיש**

Español (Spanish)

Vivienda asequible disponible

Fecha limite de entrega de la solicitud: [10 DE JUNIO DE 2025]

Debe entregarse por internet o por correo postal a más tardar en esta fecha. Si envía más de 1 solicitud podría quedar descalificado.

Para Obtender La Solicitud:

Para obtener la solicitud por internet: [www.rentalapp.us]

Por telefono o email: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com] Por correo postal o en persona: [100 Veterans Memorial Hwy, Hauppauge, NY 11788] Incluya su dirección y la dirección del edificio en el que quiere presentar la solicitud.

Fecha y lugar de la loteria: [24 de junio de 2025, 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY 11788]

La lotería determinará cuáles aplicaciones se analizarán para el alquiler

中文 (Simplifed Chinese) 可提供經濟適用房

申請截止日期: [2025年6月10日]

請務必在此日期前線上提交申請或透過郵寄提交申請。提交超過1份申請將使您失去 資格.

申请

欲獲得申請線上: [www.rentalapp.us]

透過電話或電子郵件: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com]

透過郵寄或當面索取: [100 Schoolhouse Road, Levittown NY 11756]

請提供您的地址和您想要申請的建築物地址

抽籤日期和地點: 2025年6月24日, 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY 11788- 將透過抽籤決定對哪些租賃申請進行審核

KREYÒL AYISYEN (Haitian Creole)

Lojman Pri Abòdab Disponib

Dat Delè Aplikasyon an: [10 jen 2025]

Dwe soumèt sou entènèt oswa nan lapòs nan dat sa a. Voye plis pase 1 aplikasyon ka

diskalifye ou.

To Get Application:

Sou entènèt: [www.rentalapp.us]

Nan Telefòn oswa Imel: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com]

Pa Lapòs oswa An-pèsòn: [100 Schoolhouse Road Levittown NY 11756]

Mete adrès ou & adrès bilding kote ou vle aplike a

Dat lotri & Andwa: 24 jen 2025, 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY

Lotri a ap detèmine ki aplikasyon yo pral revize pou lokasyon

한국어 (Korean)

임대 주택 이용 가능

신청서 제출 기한: [2025년 6월 10일]

이 날짜까지 온라인 또는 우편으로 제출해야 합니다. 1 건 이상의 신청서 제출 시 실격 처리 됩니다

신청서 접수온라인: [www.rentalapp.us]

전화 또는 이메일: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com]

우편 또는 내방: [100 Schoolhouse Road Levittown NY 11756]

신청자 주소 및 신청하려는 건물 주소를 포함시키십시오

추첨일 및 추첨 장소: [2025 년 6 월 24 일 , 100 Veterans Memorial Hwy, Hauppauge, NY 11788

추첨을 통해 입주 심사 대상이 될 신청서를 결정하게 됩니다

[বাংলা] Bengali

সাশ্রয়ী মূল্যের হাউজিং

আবেদন জমা দেওয়ার শেষ তারিখ: [**১০ জুন, ২০২৫**

এই তারিখের মধ্যে অবশ্যই অনলাইনে অথবা মেল–এর **মাধ্যমে** জমা দিতে হবে।

1 এর অধিক আবেদন জুমা করলে আপনাকে অযোগ্য হিসেবে ধরে নেওয়া হবে।

আরও তথ্য পাওয়ার জন্য

অনলাইন: [www.rentalapp.us]

ফোন অথবা ইমেলের মাধ্যমে: [516-437-0900 ext 26]

[mgmtinfo@thedfdgroup.com]

একজন ব্যক্তির অথবা মেল–এর মাধ্যমে: [100 Schoolhouse Road Levittown NY 11756]

Русский язык (Russian)

Доступное жилье в наличии Срок подачи заявления: [10 июня 2025 г.]

Заявление должна быть подана онлайн или по почте к этой дате. Отправка более 1 заявления может дисквалифицировать вас.

Где получить бланк заявления Онлайн: [www.rentalapp.us]

По телефону или электронной почте: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com]

По почте или лично: [100 Schoolhouse Road Levittown NY 11756]

Включите ваш адрес и адрес здания, на которое вы хотите подать заявку.

Дата и место проведения лотереи: [24 июня 2025 г.

আপনি যেখানে আবেদন করতে চান সেখানকার ঠিকানা এবং আপনার , 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY 11788] বিল্ডিংয়ের Лотерея определит, какие заявки будут рассмотрены на предмет аренды. ঠিকানা অন্তর্ভক্ত করুন। লটারির তারিখ এবং অবস্থান: ় ২৪ জন, ২০২৫, 1pm, 100 Veterans Memorial Hwv. Hauppauge, NY 11788 লটারির মাধ্যমে নির্ধারণ করা হবে যে কোন অ্যাপ্লিকেশনগুলো ভাডাটের জন্য পর্যালোচনা করা হবে। POLSKI (Polish) (URDU) زبان اردو DOSTĘPNE MIESZKANIA W PRZYSTĘPNEJ CENIE درخواست کی آخری تاریخ: 2025 جون 10 Termin składania wniosków: [10 czerwca 2025 r.] آن لائن جمع کرانا ضروری بے یا، اگر میل کیا جائے تو اس تاریخ تک پوسٹ مارک کیا جائے۔ 1 سے زیادہ درخواست Wniosek należy złożyć online. W przypadku wysyłki pocztą, z datą stempla pocztowego بھیجنا آپ کو نااہل قرار دے سکتا ہے۔ do tego dnia. Wysłanie więcej niż 1 wniosku może spowodować dyskwalifikację. درخواست حاصل کرنے کے لیے: Wniosek otrzymasz: ِ [www.rentalapp.us] Online: [www.rentalapp.us] Przez telefon lub e-mail: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com] فون یا ای میل سے: [516-437-0900]ext 26] [mgmtinfo@thedfdgroup.com] Droga pocztową lub osobiście: [100 Schoolhouse Road Levittown NY 11756] ڈاک سے یا خود آفس جاکر: [100 Schoolhouse Road Levittown NY 11756] اپنا پته اور عمارت کا پته شامل کریں جہاں آپ درخواست دینا چاہتے ہیں Podaj swój adres oraz adres budynku, którego dotyczy wniosek Data i miejsce loterii: [24 czerwca 2025 r., 1pm, 100 Veterans Memorial Hwy, لاثرى كى تاريخ اور مقا 2025, 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY جون 24 Hauppauge, NY 11788] لاٹری اس بات کا تعین کرتی ہے که کرایه داری کے لیے کن درخواستوں کا جائزہ لیا جائےگا۔ Loteria określa, które wnioski zostaną rozpatrzone pod kątem najmu. אידיש (Hebrew) (Arabic) العَرَبي يتوفر السكن ميسور التكلفة צוגענגליכע האוזינג איז אוועילעבל אפליקאציע דיו דאטום: [2025 جون 10 التاريخ المُحدّد لطلب التقديم: 2025 يونيــو 10 يجب أن يتم تقديمه عبر الإنترنت، وفي حالة إرساله بالبريد العادي، يتم ختم البريد بحلول هذا التاريخ. قد يؤدي إرسالك מוז ווערן אריינגעגעבן אנליין, אדער אויב עס ווערט געשיקט דורך די פאסט, געפאסטמארק'ד ביז דעם . דאטום. אייך דיסקוואליפיצירן אפליקאציע אפליקאני מער שיקט אייך אייב דאטום. דאטום מער פון א لأكثر من طلب تقديم واحد إلى إلغاء أهليتك. للحصول على طلب التقديم: צו באקומען די אפליקאציע: عبر الإنترنت: [www.rentalapp.us] [www.rentalapp.us] אַנלײַן: عبر الهاتف أو البريد الإلكتروني: [516-437-9900 ext 26][mgmtinfo@thedfdgroup.com] [mgmtinfo@thedfdgroup.com][516-437-0900 ext 26] דורך די טעלעפאן אדער אימעיל: عبر البريد العادي أو بشكلِ شخصيّ: 100 Schoolhouse Road Levittown NY 11756 , 100 Schoolhouse Road Levittown NY 11756[] <u>- דורך די פאסט אדער פערזענליך</u> عليك تضمين عنوانك وعنوان المبنى الذي تريد التقديم للسكن فيه רעכנט אריין אייער אדרעס און די אדרעס פון די געביידע ווא איר ווילט זיך איינגעבן , 1pm, 100 Veterans Memorial Hwy, Hauppauge, تاريخ انعقاد القرعة ومكاتها: 24 ביוני 2025, 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY דאטום און לאקאציע تُحدِّد القرعة طلبات التقديم التي ستتم مراجعتها من أجل الإيجار. די לאטערי באשטימט וועלכע אפליקאציעס וועלן ווערן איבערגעקוקט פאר טענענסי. ITALIANO (Italian) Français (French) **ALLOGGIO CONVENIENTE DISPONIBILE** LOGEMENT ABORDABLE DISPONIBLE Date limite de dépôt des demandes: [10 juin 2025] Data di scadenza della domanda: [10 giugno 2025] Deve essere inviato online o, se spedito, con timbro postale entro tale data. L'invio di À soumettre en ligne ou, si envoyée par courrier, doit porter un cachet de la poste ne più di 1 domanda potrebbe portarti alla squalifica. dépassant pas la date limite. Vous pourriez être disqualifié si vous envoyez plus d'une Per ottenere l'applicazione: demande. Online: [www.rentalapp.us] Pour postuler: Per telefono o e-mail: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com] En ligne: [www.rentalapp.us] Per posta o di persona: [100 Schoolhouse Road Levittown NY 11756] Par téléphone ou e-mail: [516-437-0900 ext 26] [mgmtinfo@thedfdgroup.com] Includi il tuo indirizzo e l'indirizzo dell'edificio per cui desideri candidarti Par courrier ou en personne: [100 Schoolhouse Road Levittown NY 11756] Data e luogo della lotteria: [24 giugno 2025 1pm, 100 Veterans Memorial Hwy, Indiquez votre adresse et celle de l'immeuble pour lequel vous déposez une demande Hauppauge, NY 11788] Date et lieu de la loterie [24 juin 2025, 1pm, 100 Veterans Memorial Hwy, Hauppauge, NY La lotteria determina quali domande verranno esaminate per l'affitto. 117881 C'est la loterie qui détermine les demandes qui seront étudiées en vue de la location.

MATINECOCK COURT

Required Documentation

Photo Copies:

* For all persons requesting to live in the apartment

- Birth Certificates
- Photo Identification
- Social Security Cards. Applicants may provide ITIN as an alternative to Social Security Number. Social Security Number in writing is acceptable if card is not available.
- Marriage Certificate (if married)
- Legal copy of divorce or separation agreement
- Current Tax Return
- Name and address of Current Landlord
- Copy of current lease or current mortgage information and deed to home
- If any member is a student, please provide current enrollment information (copy of tuition payment receipt or course schedule)

Verification of all Income:

- Employment Verification/ Four (4) Consecutive Most Recent Pay Stubs
- Banking Verification (attached)/ Most Recent Bank Statement
- Current copy of Social Security/ SSI Benefit Award Letter
- Current copy of Pension / Annuity Benefit Award Letter
- Workmen's Compensation Documents
- Alimony papers
- Child Support Order
- Etc.

The above listed documents are required by the Federal Government for approval in Section 42 LIHTC housing.

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements of misrepresentations of any material facts involving the use or obtaining federal funds.

MAIL COMPLETED APPLICATION TO: 100 SCHOOLHOUSE ROAD, LEVITTOWN, NY 11756









Please Print Clearly

	Project: MATINECOCK COURT
This is an application for housing at:	Address: 1-147 Matinecock Court
	East Northport, NY 11731
	Name: MATINECOCK COURT
Please complete this application and return to:	Address: 100 Schoolhouse Road
	Levittown, NY 11756

After the initial lottery, applications are placed in order of date and time received. An applicant may be interviewed only after the receipt of this tenant application.

A. GENERAL INFORMATION

Applicant	Name(s):						
Address:	Street		Apt. #	City	State		ZIP
				Email	l:		
No. of BR'	s in curren	t unit:	Do you	□ RENT o	or \square OWN (c	heck one	e)
Amount of	current mo	onthly rental or n	nortgage pay	ment: \$	· · · · · · · · · · · · · · · · · · ·		
If owned, c	lo you rece	ive monthly rent	al income fr	om property?	□ YES	□ NO	(check one)
☐ Handica (Applicants	p BR s can go or	ed (Check all that more than one b nother bedroom s	edroom size				☐ Three BR reasonable
		□ Veteran □	ŕ	Impaired [l Hearing Impa	nired [] Visually
Does any n	nember of	the household ho	ld a housing	g voucher?	\Box YES	□NO	(check one)
		ed as a basis for eligiburce of income like				ohibits the	discrimination in
					1		









NEW YORK STATE OF PROPORTUNITY. OPPORTUNITY. OPPORTUNITY. OPPORTUNITY. OPPORTUNITY.

	В.	HOUSE	HOLD COM	IPOSITION		
	Name	Relationship to head	Birth Date	Age (optional)	SS# or ITIN# (last 4 digits)	Student (Y/N)
Head						
Co-						
T						
3.						
4.						
5.						
6.						
7.						
		C. Op	tional Infor	mation Race		
	Ethnicity (Hispanic, Non Hispanic, Decline)		e, Native Hawaii	merican, Asian, Aı	nerican Indian or c Islander, Other or	Disabled (Y/N)
Head	,					
Co- T						
3.						
4.						
5.						
6.						
7.						
Have th	ere been any changes in ho	usehold comp	osition in the	last twelve me	onths?	es □ No
If yes, e.	•	1				
Do you	anticipate any changes in l	nousehold com	position in th	ne next twelve	months?	es □ No
If yes, e.	xplain:					
Is there	someone not listed above	who would nor	mally be livi	ng with the ho	usehold?	es □ No
If yes, e.	xplain:					
XX7°11 11	C(1 : (1 1	1 111 1	1 0.11.4	1 . 1	1 1	41 C
	of the persons in the house r or plan to be in the next c					
	with regular faculty and st		t an caacation	iai mstitation		es □ No
<u>IF YES</u>	S, ANSWER THE FOLLO	WING QUEST	TIONS:			
	full time student(s) marrie				□ Yes	s No
	student(s) enrolled in a jo	b-training prog	gram receivin	g assistance u		
	ining Partnership Act? / full-time student(s) a TAN	JF of a Title N	V recipient?			
	full-time student(s) a sing			child(ren) wh		5 <u>110</u>
	ndant on another's tax retur					
	other than a parent?				☐ Yes	s □ No
	tudent a person who was p					
care pro	ogram (under Part B or E or	_	e Social Sect	· ·	☐ Yes	s □ No







D. INCOME

List ALL source of income as requested below. If a section doesn't apply, cross out or write N/A.

Household Member Name	Source of Income	Gross Monthly Amount
	Social Security	\$
	Social Security	\$
	Social Security	\$
		\$
	SSI Benefits	\$
	SSI Benefits	\$
	SSI Benefits	\$
	Pension (list source)	\$
	Pension (list source)	\$
	Veteran's Benefits (list claim #)	\$
	Veteran's Benefits (list claim #)	\$
	Unemployment Compensation	\$
	Unemployment Compensation	\$
	Public Assistance (Title IV/TANF etc.)	\$
	Contributions to the Household (monetary or not)	\$
	Full-Time Student Income (18 & Over Only)	\$
	Financial Aid (excluding loans)	\$
	Annuities (list sources)	\$
	Long Term Medical Care Insurance Payments in excess of \$180/day	\$
	Scheduled Payments from Investments	\$









Household Member Name	Source of Income Monthly Amount		
	Employment amount	\$	
	Employer:	Ι Ψ	
	Position Held		
	How long employed:		
	Trow rong employed.		
	Employment amount	\$	
	Employer:		
	Position Held		
	How long employed:		
	E1	6	
	Employment amount	\$	
	Employer: Position Held		
	How long employed:		
	Employment amount	\$	
	Employer:		
	Position Held		
	How long employed:		
	Alimony		
	Are you <i>legally entitled</i> to receive alimony?	☐ Yes ☐ No	
	If yes, list the amount you are entitled to receive.	\$	
	Do you receive alimony?	☐ Yes ☐ No	
	If yes list amount you receive.	\$	
	Child Support		
	Are you <i>legally entitled</i> to receive child support?	☐ Yes ☐ No	
	If yes, list the amount you are <i>entitled</i> to receive.	\$	
	Do you receive child support?	☐ Yes ☐ No	
	If yes, list the amount you receive.	\$	
	Other Income	\$	
	Other Income Other Income	\$	
	Other Income	\$	
	Other Income	ψ	
TOTAL GROSS ANNUAL INCO.	ME (Based on the monthly amounts above x 12)	\$	
TOTAL GROSS ANNUAL INCO	·	\$	
Do you anticipate any changes in the	☐ Yes ☐ No		
	gally entitled to receive income assistance?	☐ Yes ☐ No	
	sely to receive income or assistance (monetary or not)		
	er of the household as listed on Page 2 etc.)?	☐ Yes ☐ No	
If yes to any of the above, explain	Q ,		
y			
Is the income received?		☐ Yes ☐ No	









	If yo	our asset		ous to lis	SSETS t here, please request and ad	lditional f	orm.
			If a section d	oesn't app	ply, cross out or write N/A.		
		#		Bank		Bal	ance \$
Claratina A		#		Bank		Bal	ance \$
Checking Ac	counts	#		Bank		Bal	ance \$
		#		Bank		Bal	ance \$
~		#		Bank			ance \$
Savings Acc	counts	#		Bank			ance \$
Trust Acco	ount	#		Bank		Ral	ance \$
114311166	ount	11		Dank		Dan	инее ф
		#		Bank			ance \$
Certificate	og of	#		Bank		Bal	ance \$
Deposi		#		Bank		Bal	ance \$
Deposi	.t	#		Bank	Bank		ance \$
		#		Bank	Bank		ance \$
Money Market	Accounts	#		Bank	Bank		ance \$
		#		Motu	rity Date	Vol	ue \$
		#			rity Date		ue \$
Savings Bo	onds	#			Maturity Date		ue \$
				•			
Whole Life Insura		#			Cash Value \$		
Whole Life Insura	nce Policy	#			Cash	Value \$	
	Name:		#Shares:		Interest or Dividend \$		Value \$
Mutual Funds	Name:		#Shares:		Interest or Dividend \$		Value \$
	Name:		#Shares:		Interest or Dividend \$		Value \$
	Name:		#Shares:		Dividend Paid \$		Value \$
Stocks	Name:		#Shares:		Dividend Paid \$ Dividend Paid \$		Value \$
	Name:		#Shares:		Dividend Paid \$ Dividend Paid \$		Value \$
- ·							
Bonds	Name:		#Shares:		Interest or Dividend \$		Value \$
Investment	Name:		#Shares:		Interest or Dividend \$	Apr	Value \$ praised
Property Value \$							









Real Estate Property: Do you own any property?	☐ Yes ☐ No
If yes, Type of property	
Location of property	
Appraised Market Value	\$
Mortgage or outstanding loans balance due	\$
Amount of annual insurance premium	\$
Amount of most recent tax bill	\$
Does any member of the household have an asset(s) owned jointly with a person who is	
NOT a member of the household as listed on Page 2?	☐ Yes ☐ No
If yes, describe:	
Do they have access to the asset(s)?	☐ Yes ☐ No
Have you sold/ disposed of any property in the last 2 years?	☐ Yes ☐ No
If yes, Type of property:	
Market value when sold/ disposed	\$
Amount sold/ disposed for	\$
Date of transaction:	
	-
Have you disposed of any other assets in the last 2 years (Example: Given away money	
to relatives, set up Irrevocable Trust Accounts)?	
,	☐ Yes ☐ No
If yes, describe the asset:	
Date of disposition:	
Amount disposed	\$
1	·
Do you have any other assets not listed above (excluding personal property)?	\$
If yes, please list:	,
- y y	
Have you ever filed for bankruptcy in the previous 12 months?	☐ Yes ☐ No
If yes, describe:	
please refer to the HCR website https://hcr.ny.gov/marketing-plans-policies#credit-and-justice-involve	ment-assessment-
policies for the right to an individualized assessment.	
Will you take an apartment when one is available?	☐ Yes ☐ No
with you take an aparament when one is available.	103 110
Briefly describe your reasons for applying:	
F. ADDITIONAL INFORMATION	
Has anybody over the age of 18 been convicted of a felony within the last 5 years?	☐ Yes ☐ No
If yes, please refer to the HCR website https://hcr.ny.gov/marketing-plans-policies for th	e right to an
individualized assessment.	









G. REFERENCE INFORMATION

	Name:		_			
	Address:					
Current Landlord	Home Phone:					
	Bus. Phone:					
	How Long?					
	Name:					
	Address:					
Prior Landlord	Home Phone:					
	Bus. Phone:					
	How Long?					
Personal Reference #1:						
Address:						
Relationship:		Phone #:				
Personal Reference #2:						
Address:						
Relationship:		Phone #:				
Personal Reference #3:			_			
Address:		_	_			
Relationship:		Phone #:				
			-			
In case of emergency notify:						
Address:						
Relationship:		Phone #:				
H. VEHICLE	AND PET INF	ORMATION (if applicable)				
List any cars, trucks, or other vehicles or			Arrangements			
with Management will be necessary for	more than one ve	hicle.	C			
Type of Vehicle:		License Plate #:				
Year/ Make:		Color:				
Type of Vehicle:		License Plate #:				
Year/ Make:		Color:				
Do you own any pets?	<u>. </u>		□Yes □No			
If yes, describe:	If yes, describe:					









PET POLICY

Pursuant to your lease agreement, pets are prohibited on the property with the exception of the following:

Assistance Animals as a Reasonable Accommodation

Definition: Assistance animals are not pets. They are animals that work, provide assistance, or perform tasks for the benefit of a person with a disability, or animals that work, provide assistance, or perform tasks for the benefit of a person with a disability, or animals that's provides emotional support that alleviates one or more identified symptoms or effects of a person's disability. Assistance Animals-often referred to as "service animals," "assistance animals," "support animals," or "therapy animals"-perform many disability- relation functions, including but not limited to guiding individuals who are blind or have low vision, alerting individuals who are deaf or hard of hearing to sounds, providing minimal protection or rescue assistance, pulling a wheelchair, fetching items, alerting persons to impending seizures, or providing emotional support to persons with disabilities who have a disability- related need for such support.

The fact that a person has a disability does not automatically entitle him or her to an assistance animal. There must be a relationship between the person's disability and their need for the animal. A housing provider may refuse to modify or provide an exception to a "no pets" rule or policy as a reasonable accommodation in accordance with Section 504 of the Rehabilitation Act of 1973, the Fair Housing Act and/ or the New York State Human Rights Law if:

- 1. The animal poses a direct threat to the health and safety of others that cannot be reduced or eliminated by a reasonable accommodation,
- 2. The animal would cause substantial physical damage to the property and others,
- 3. The presence of the assistance animal would pose a undue financial and administrative burden to the provider, or
- 4. The presence of the assistance animal would fundamentally alter the nature of the provider's services.

A housing provider may not require an applicant or tenant to pay a fee or a security deposit as a condition of allowing the applicant or tenant to keep the assistance animal. However, if the individual's assistance animal causes damage to the applicant's unit or the common areas of the dwelling beyond normal wear and tear, the housing provider may charge the individual for the cost of repairing the damage. All requests for an assistance animal as a reasonable accommodation must be in writing along with documentation from any qualified third party or medical professional. We will let you know if we need more information or verification from you.

Acknowledgment Tenant Initial:	I	Date:
\mathcal{E}		









CERTIFICATION

I/We hereby certify that I/We Do/Will Not maintain a separate subsidized rental unit in another location. I/We further certify that this will be by/our permanent residence. I/We understand I/We must pay a security deposit, not to exceed one month's maintenance, for this apartment prior to occupancy. I/We understand that my eligibility for housing will be based on applicable income limits and by management's criteria. I/We certify that all information in this application is true to the best of my/our knowledge 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. All adult applicants, 18 or older, must sign application.

(I/WE) hereby acknowledge that (I/WE) have received the Vawa.
SIGNATURE (S):	
(Signature of Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date
(Signature of Co-Tenant)	Date









TENANT DATA VERIFICATION

AUTHORIZATION TO OBTAIN A CREDIT REPORT/CRIMINAL

APARTMENT #
BUILDING ADDRESS:
I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR INSTITUTION TO
RELEASE TO MATINECOCK COURT LLC. AND OR ITS REPRESENTATIVE
ANY AND ALL INFORMATION THAT THEY HAVE CONCERNING CREDIT
REPORT AND ANY CRIMINAL ACTIVITY. I HEREBY RELEASE THE
INDIVIDUAL, COMPANY, OR INSTITUTION AND ALL INDIVIDUALS,
CONNECTED THEREWITH FROM ALL LIABILITY FOR ANY DAMAGE
WHATSOEVER INCURRED IN FURNISHING SUCH INFORMATION
Print Name:
Signature:
Social Security #:
Date of Birth:
Address:







Tenant Screening Report Disclosure Statement

By signing below, I confirm that I have been made aware of, and understand all of the following information related to my application, and the consumer reports, tenant screening reports, investigative reports, criminal background search, OFAC watch list search, sex offender registry searches, employment, banking and tenancy verifications and any other searches that may be conducted in connection with my application.

- 1. The information provided by me on my application will be used to obtain a tenant screening report, also known as a consumer report, and other such searches as listed above.
- 2. The tenant screening report will be obtained from one or more of the following sources:
 - a. Experian, P.O. Box 954, Allen, Texas 75013 www.experian.com 888-397-3742.
 - b. Equifax P.O. Box 740256, Atlanta, Georgia 30374 www.equifax.com 877-576-5734
 - c. Trans Union P.O. Box 6790, Fullerton CA 92834 www.transunion.com 800-680-7289
 - d. First Advantage Saferent/Core Logic Safe Rent 7300 Westmore Road Suite 3 Rockville, MD 20850-5223. 888-333-2413
 - e. Fidelity Information Corporation, P.O. Box 49938, Los Angeles, CA 90049-0978 800-50-8085.

I also understand that I have the right to inspect and receive one free copy of the report by contacting the Consumer Reporting Agency that was used to furnish the report. I further understand that I may obtain a free report from each of the 3 nation consumer reporting agencies (Experian, Equifax, and Trans Union) once annually either directly from them, or through www.annualcreditreprot.com_and that I have the right to dispute any inaccurate information with them.

Signature	Date
Print Name	









TENANT DATA VERIFICATION AUTHORIZATION TO OBTAIN A CREDIT REPORT/CRIMINAL

APARTMENT #
BUILDING ADDRESS:
I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR INSTITUTION TO RELEASE TO MATINECOCK COURT LLC. AND OR ITS REPRESENTATIVE ANY AND ALL INFORMATION THAT THEY HAVE CONCERNING CREDIT REPORT AND ANY CRIMINAL ACTIVITY. I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR INSTITUTION AND ALL INDIVIDUALS, CONNECTED THEREWITH FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER INCURRED IN FURNISHING SUCH INFORMATION.
Print Name:
Signature:
Social Security #:
Date of Birth:
Address:







Tenant Screening Report Disclosure Statement

By signing below, I confirm that I have been made aware of, and understand all of the following information related to my application, and the consumer reports, tenant screening reports, investigative reports, criminal background search, OFAC watch list search, sex offender registry searches, employment, banking and tenancy verifications and any other searches that may be conducted in connection with my application.

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Signature	Date
Print Name	







