

Application Deadline: April 5, 2025

Lottery Date: April 16, 2025

Lottery Time: 10:00 AM EST

Lottery Location: Hudson on Nine - 5 Farm View Drive, Bethlehem, NY 12158

Can't make it to view the lottery in person? A stream of the lottery will be uploaded to Hudson on Nine's website at [www.HudsonOnNine.com](http://www.HudsonOnNine.com)

Fecha límite de solicitud: 5 de abril de 2025

Fecha de lotería: 22 de abril de 2025

Hora de la lotería: 10:00 a.m. EST

Ubicación de la lotería: Hudson on Nine - 5 Farm View Drive, Bethlehem, NY 12158

¿No puedes asistir a ver la lotería en persona? Se cargará una transmisión de la lotería en Hudson en el sitio web de Nine en [www.HudsonOnNine.com](http://www.HudsonOnNine.com).

申请截止日期：2025年4月5日

抽奖日期：2025年4月22日

抽奖时间：美国东部时间上午 10:00

彩票地点：Hudson on Nine - 5 Farm View Drive, Bethlehem, NY 12158

无法亲自查看彩票？彩票流将上传至九号台 Hudson 网站

[www.HudsonOnNine.com](http://www.HudsonOnNine.com)

आवेदन की अंतिम तिथि: 5 aprail 2025

लॉटरी तिथि:22 aprail 2025

लॉटरी का समय: 10:00 पूर्वाह्न ईएसटी

लॉटरी स्थान: हडसन ऑन नाइन - 5 फ़ार्म व्यू ड्राइव, बेथलहम, एनवाई 12158

क्या आप व्यक्तिगत रूप से लॉटरी खेनेलिए नहीं आ सकते? लॉटरी की एक स्ट्रीम हडसन को नाइन की वेबसाइट [www.HudsonOnNine.com](http://www.HudsonOnNine.com) पर अपलोड की जाएगी।

**Hudson on Nine**  
**(Selkirk Reserve LLC)**  
**5 Farm View Drive, Bethlehem, NY 12158 - 518.560.5920**  
**MULTIFAMILY RESIDENT SELECTION POLICY**  
**08.01.2024**



The Development will comply with all state and federal fair housing and antidiscrimination laws; including, but not limited to, consideration of reasonable accommodations requested to complete the application process. Screening criteria will be applied in a manner consistent with all applicable laws, including the State and Federal Fair Housing Acts, New York Human Rights Law, the Federal Fair Credit Reporting Act, program guidelines, Department/State Agency, and the development rules. This includes nondiscrimination against any person based on Familial Status, Race, Citizenship or Immigration Status, Sex, Disability, Color, Religion, National Origin, Creed, Age, Martial Status, Military Status, Sexual Orientation, Gender Identity or Expression, Lawful Source of Income, or Status as a Victim of Domestic Violence.

### **Income**

Income will be verified on all applicants eighteen (18) years of age and older, either by third-party verification or copies of pay stubs as follows: Weekly – six (6) weeks of pay stubs are required, Bi-weekly/Semi-monthly/Monthly – four (4) pay stubs are required. For HOME funds applications, income will be verified on all applicants eighteen (18) years of age and older, either by third-party verification or copies of the most recent eight (8) weeks of consecutive pay stubs or similar. Verifications must be within 120 days of the move-in date. For apartments pre-leased further than 120 days, income may have to be re-verified prior to move-in.

### **Background/ Credit & Criminal Screening**

A consumer report including information concerning your credit, will be obtained from information provided on the application. Upon request, applicants can obtain a copy of their credit and background screening reports, along with an invoice from the company that provided the screening report by contacting the screening company at the contact information. We will not charge a background/credit check fee if we fail to provide a copy of the credit and background screening report. You may pick up a copy of your credit/background screening at the leasing office. If you would like to make alternate arrangements to obtain your credit/background screening report, please contact the leasing office.

The property's policy is that the applicant's credit score will be taken into account. The applicant will be approved if the applicant's credit score is 580 or above. Furthermore, the applicant will be approved if the applicant's credit score is 500 or above and the applicant is homeless. If the applicant's credit score is below these levels, then the property representative will proceed to Step 3 of the assessment worksheet (*FEHO Individualized Assessment Credit Worksheet, Applying New York State Credit Policy for Applicants to State-Funded Housing* located on <https://hcr.ny.gov/fair-housing> website under the FEHO – Credit Worksheet link) and also conduct the analysis based on mitigating factors. Applicants with Section 8 vouchers or other forms of rental assistance will not be denied based on credit history.

Applicants who are denied based on their credit history; If the applicant has failed Part I of the assessment, we will reach out to the applicant requesting additional information so that an individualized assessment may be conducted. We will provide the 14 business days in which to provide such additional information. We will consider the additional information offered by the applicant prior to making a determination regarding the applicant's eligibility. Please see the HCR Credit Policy at <https://hcr.ny.gov/system/files/documents/2023/05/doc-n-guide-to-applying-hcr-credit-policy-final-5.22.2023.pdf> for more information.

Any applicant will be rejected if they were convicted of producing methamphetamines in the home or a lifetime registrant on the Sex Offender Registry.

Any applicant with criminal offense(s) that involve physical danger or violence toward people, property, health, safety or the welfare of other people will not be automatically declined. Management will complete an individual assessment in accordance with the Worksheet for Assessing an Applicant's Criminal Legal System History for State-Funded Housing located on <https://hcr.ny.gov/fair-housing> website under the FEHO - Worksheet for Assessing Justice-Involved Applicants to State-Funded Housing link) and also conduct the analysis based on mitigating factors." Applicants whose criminal history is flagged, will be provided the Know Your Rights information.

Applicants may provide a copy of their own credit or background screening to avoid the background/credit check fee if the credit or background screening was performed within 30 days of the date of application. The credit and background screening report must be prepared by a consumer reporting agency at the direction of and paid for by the applicant and made available directly to us at no charge, and contain the following information:

- a consumer credit report prepared by a consumer reporting agency within the past thirty (30) days from date of application;
- the applicant's criminal history;
- an employment verification; and \*if applicable

Applicants whose criminal history is flagged; an assessment will be performed. If after the assessment is complete and the applicant is declined the applicant(s) will be notified of the denial of their application in writing (via US mail, the Applicant Portal, or by e-mail) within fourteen (14) business days of the denial (without exception). The written notification will list the specific reason(s) for the denial, If the denial is a result of information received from a third party, the letter will contain the contact information for said third party. The applicant will be provided with the Know Your Rights information a second time. The applicant will have fourteen (14) business days from the date of written notification of denial to provide mitigating factors if a history of justice involvement is discovered. The applicant may request all information used to screen the tenant within thirty (30) days of application denial and will be provided with this information within fourteen (14) days of the request.

### **Occupancy Policy**

Occupancy limits have been established as two (2) persons per bedroom person in the apartment. Maximum occupancy limits are as follows:

<u>Apartment Size</u>	<u>Minimum Occupants</u>	<u>Maximum Occupants</u>
1 Bedroom	1 Persons	2 Persons
2 Bedroom	2 Persons	4 Persons
3 Bedroom	3 Persons	6 Persons

Family – the term “Family” includes, but is not limited to the following, regardless of actual or perceived sexual orientation, gender identity, or marital status:

1. a single person, who may be an elderly person, displaced person, disabled person, near-elderly person or any other single person; or
2. a group of persons residing together, and such group includes, but is not limited to:
  - a. A family with or without children (a child who is temporarily away from the home because of placement in foster care is a member of the family);
  - b. an elderly family;
  - c. a near-elderly family;
  - d. a disabled family;
  - e. a displaced family; and
  - f. the remaining member of a tenant family.

NYSHCR reserves the right to waive these occupancy standards at its discretion.

### **Pet Policy**

No more than two (2) pets will be allowed; dogs and cats only excluding aggressive breeds as listed below in the NRP Prohibited breeds. All pets must be approved by NRP prior to move-in and current vaccination records will be required. The owner/agent will require the tenant to pay for reasonable expenses beyond normal wear and tear directly attributable to the presence of the pet on the property. Such expenses would include, but not be limited to, the cost of repairs and replacement to the unit, fumigation of the unit due, and the cost of animal care facilities. The tenant will be responsible to pay for any damages caused by the pet at a rate of actual costs of the repairs to include cost and materials.

Unauthorized pets are considered a violation of the resident’s lease agreement. Lease violations will be sent immediately to the resident upon confirmation of an unauthorized pet(s). Residents are responsible for cleaning up after their pet(s). Failure to clean up pet waste is a violation of the resident’s lease agreement and may result in a \$5.00 fine.

NRP prohibited breeds include but are not limited to: Rottweiler, Pit Bull, Doberman Pinscher, Chow-Chow, German Shepherd, Affenpinscher, American Bulldog, American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier, Akita, Austrian Short-Haired Pinscher, Carlin Pinscher, German Pinscher, Harlequin Pinscher, and Swiss Shorthaired Pinscher.

### **Assistance/Service Animal**

A person with a disability may be permitted an assistance or service animal(s) upon completion of the NRP reasonable accommodation process. Applicants/Residents must be able to obtain or provide documentation which verifies that the resident has a disability, if it is not apparent, as defined in the Fair Housing Act and/or the NYS Human Rights Law which verifies there is a disability-related need for the animal(s).

Verification documentation (if required) is *not* limited to those from medical professionals but includes and accepts documentation from reliable third-party professionals and agencies, including proof of SSI and SSD insurance benefits, a peer support group, a non-medical service agency and a social worker amongst others.

Alternatively, applicants/residents can use NRP's accommodation verification form. The Animal Addendum must be completed, and vaccinations documented before the animal(s) moves in. A one-time fee is not required for assistance/service animals. Assistance/Service animals may be restricted breeds and/or other types of animals, exceed weight restrictions and/or may include more animals than the standard pet policy if approved in the NRP reasonable accommodation process.

### **VAWA**

The Violence Against Women Act ("VAWA") is an act implemented to protect survivors of domestic and dating violence, stalking, and sexual assault who reside in communities funded by certain programs that include Low-Income Housing Tax Credits.

VAWA bars eviction and termination due to a tenant's status as a survivor and requires landlords to maintain survivor-resident confidentiality. It also continues to prohibit an applicant/tenant who is a survivor of domestic violence from being denied assistance, tenancy, or occupancy rights based solely on criminal activity related to an act of domestic violence committed against them.

It allows for lease bifurcation so a resident or lawful occupant who engages in criminal acts of physical violence against affiliated individuals or others may be evicted or removed without evicting or removing or otherwise penalizing a victim who is a resident or lawful occupant. If a victim cannot establish eligibility once the abuser has been evicted or removed, NRP Management will give a reasonable amount of time to find new housing or establish eligibility under another covered housing program. VAWA survivors may request a unit transfer as stipulated by VAWA.

You can be evicted, and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, NRP cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking.

The protections described in this notice might not apply, and you could be evicted, and your assistance terminated, if NRP can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

1. Would occur within an immediate time frame, and
2. Could result in death or serious bodily harm to other tenants or those who work on the property.

If NRP can demonstrate the above, NRP should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

NRP must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA.

NRP must not allow any individual administering assistance or other services on behalf of it (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law.

NRP must not enter your information into any shared database or disclose your information to any other entity or individual. NRP, however, may disclose the information provided if:

1. You give written permission to NRP to release the information on a time limited basis.
2. NRP needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
3. A law requires NRP to release the information.

VAWA does not limit NRP's duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up.

### **Student Status**

A household may not consist entirely of full-time students unless verification is obtained that the household meets one of the exceptions listed below.

Student status is defined by the educational institution. Educational institutions include conventional colleges, vocational schools with a diploma or certificate program, technical schools, online courses that could result in a degree, high schools, middle schools, and elementary schools. A Full-time Student is looked at as attending five (5) months or more out of a calendar year, and the months do not have to be consistent.

**Exceptions to the Full-Time Student Rule:**

1. All members must be married and eligible to file a joint tax return.
2. Household consists of a single parent(s) with children and parent(s) and children are not dependents on another person's tax return, with the exception of the other parent (not residing in the unit).
3. At least one member is receiving assistance under Title IV of the Social Security Act (TANF) or AFDC.
4. At least one student is enrolled in a Job Training Partnership Act (JTPA) or other similar federally funded program.
5. If previously in foster care.

**Reasonable Accommodations**

As established in the Fair Housing Act, persons with disabilities are entitled to have equal opportunity to use and enjoy a dwelling unit, including the public and common use areas. Reasonable Modifications and Reasonable Accommodations afford a disabled individual the opportunity to use and enjoy a dwelling unit, public and/or common use area that they would not otherwise have if the current physical conditions or policies of the property were maintained.

A **Reasonable Modification** is a change in the physical arrangement of the interior of a housing unit, common spaces or parking areas of rental housing covered by the Fair Housing Act.

A **Reasonable Accommodation** refers to procedural changes such as changes in rules or policies covered under the Fair Housing Act and Section 504.

Reasonable Accommodation and Modification requests may be made to the Community Manager at the Rental Office, or in writing by requesting a **NRP Reasonable Accommodation and Modification Request Form**. Verification of disability and disability-related need will be required as permitted under the Fair Housing Act. If a Reasonable Accommodation is submitted, the unit will be held until the request determination is finalized and has been communicated in writing to the applicant. NRP's Fair Housing Coordinator will review all requests, respond within fourteen (14) days, and return a decision in the time frame required by local statute in writing to both the Community Manager and Applicant/Resident.

**Application Process**

Applications for occupancy are taken on a first-come, first-serve basis subject to set asides and preferences outlined within the Resident Selection Policy. A non-refundable background/credit check fee of \$10.50 per applicant 18 and older (equal to the actual cost of the background check) OR \$20 per household, whichever is less will be assessed. All adult applicants (eighteen (18) and over) must complete a separate application and they must be completed in full, dated, and signed by the applicant(s). The on-site staff will note the application with the date and time the completed application was received. All applicants will be asked to disclose proof of valid social security numbers, tax identification number, or other government- issued identification number, and must sign an "Authorization for Release of Information Request."

Applicants will not be penalized for failure to provide government identification if they are protected under NYS Human Rights law on citizenship/immigration status.

However, applications may be completed remotely and can be mailed, emailed, or faxed as long as all signatures are notarized, and the original signed documents are received by the time of Move-In.

A unit cannot be reserved without two (2) items:

1. Completed and signed application agreements.
2. Background/credit check fee(s) paid (if a screening report has not been provided by the applicant(s)).

If Approved, applicants are notified that based on the information provided, they may be eligible for housing subject to verification of the information provided on the application. This notification advises that the applicant has twenty-four (24) hours to decide if they would like to continue with the leasing process. If yes, the notification advises that the applicant is being placed on the Waiting List, or if no one is currently on the Waiting List, that a unit will immediately be assigned. If applicants do not respond within the required timeframe, this is considered a cancellation. If the timeframe of an applicant's screening exceeds 120 days, credit and criminal screening will be rerun for eligibility.

Approved applicants must then come in person to the leasing office to complete any and all remaining paperwork and provide any and all necessary documentation. Upon receipt of all verifications, the on-site staff will determine if the applicant remains eligible. Management, at its discretion, may choose to re-run credit and criminal screening depending on the amount of time since the preliminary determination. If eligible, the applicant is notified in writing that they have been approved for occupancy and are asked to contact management to arrange for current occupancy. Upon immediate or future (if placed on the Waiting List) unit assignment, the applicant is sent an offer letter in which allows the applicant fourteen (14) business days calendar days to respond. If no response is received within fourteen (14) business days from the date the letter was mailed, the unit will be offered to the next qualified applicant (or next qualified applicant on the Waiting List).

If declined for reasons other than credit and/or criminal screening, applicants will be notified of the denial of their application in writing (via US mail, the Applicant Portal, or by e-mail) within fourteen (14) business days of the denial (without exception). The written notification will list the specific reason(s) for the denial. If the denial is a result of information received from a third party, the letter will contain the contact information for said third party. An adverse action letter will also be provided to you as required by Federal and State law. You have the right to request a copy of your credit report from the reporting agency directly.

The applicant will have fourteen (14) business days from the date of written notification of denial to provide mitigating factors if they are rejected on the basis of credit history or if a history of justice involvement is discovered. The applicant may request all information used to screen the tenant within thirty (30) days of application denial and will be provided with this information within ten (10) days of the request.

Appeal Process for all other reasons than background screening – All denied applicants have thirty (30) days to respond in writing via USPS mail or UPS to NRP's Fair Housing Coordinator at 1228 Euclid Ave. Suite 400, Cleveland, OH 44115 to request a review of their denial. Alternatively, applicants may contact NRP's Fair Housing Coordinator via e-mail at [fairhousing@nrpgroup.com](mailto:fairhousing@nrpgroup.com) or applicants may respond in-person at the management office. The Fair Housing Coordinator will review all documentation. A written response will be sent to the applicant within five (5) business days following the review with the final decision.

If you believe your denied screening outcome may have been due to domestic violence pertaining to the Violence Against Women's Act (VAWA) and would like to request an appeal, please contact the NRP Fair Housing Coordinator at [fairhousing@nrpgroup.com](mailto:fairhousing@nrpgroup.com) within thirty (30) days from the date of denial. The Fair Housing Coordinator will review all documentation. A written response will be sent to the applicant within five (5) business days following the review with the final decision.

If your application was denied due to being deemed over income and you feel there may be an error, please reach out to our Compliance Team at [complianceappeal@nrpgroup.com](mailto:complianceappeal@nrpgroup.com) within thirty (30) days of your denial. The Compliance Department will review all documentation. A written response will be sent to the applicant within five (5) business days following the review with the final decision.

In the appeals processes described above, the appeal reviewers will not have been involved in the initial decision-making of the denial.

### **Accessible Units**

The property will consist of a total of 72 total units, eight (8) of which will be fully accessible units for those with limited mobility, and three (3) of which will be designated for those with sight and hearing impairments. When filling a vacancy in an accessible unit, preference will be given to applicants who require the use of the special design features of that unit.

### **Waitlist**

The property is required to place all eligible applicants on waitlists based on desired bedroom size selected by the applicant. Applicants must be placed on and selected from their selected bedroom size waitlist(s). The property has one waitlist per bedroom size that is established and maintained in chronological order based on the date and time of receipt of the Preliminary Application or preference ranking (see below for preferences). The application lottery will open on February 4, 2025 and end on April 5, 2025. The lottery drawing will be conducted at 5 Farm View Drive, Bethlehem, NY 12158 on April 22, 2025 at 10am. Those wishing to view the lottery drawing in person may do so at that time. For those who cannot attend, the drawing will be recorded and uploaded to the property website at [www.HudsonOnNine.com](http://www.HudsonOnNine.com). After the lottery is conducted, applicants will be offered units as they become available based on the chronological order of the waitlist. Applicants will be offered the next available unit, regardless of their stated preferences. Applicants will have the opportunity to decline the first apartment offered, that meets their stated preference, and retain their place on their selected waitlist(s). Should the applicant decline the next offer of an available unit that meets their stated preferences, they will be removed from the waitlist(s). Applicants may decline available units that do not meet their stated preferences without being removed from their selected waitlist(s). To be placed on the Waiting List all applicants over the age of 18 must complete an application and pay the background/credit check fee to determine if the credit/criminal criteria is met. Once those screening requirements are met, the applicant will be placed on the waitlist for the

bedroom size(s) of their choosing. Applicants must report changes in writing to any of the information immediately. The waitlist(s) contains the following information for each applicant:

- Applicant Name
- Address and/or Contact information
- Phone Number(s)
- Unit Type/Size Preference
- Household Composition
- Preferences based on property requirements & regulations
- Date/Time of Application
  - 30% AMGI
  - 50% AMGI
  - 60% AMGI
  - Accessible Unit Preference
  - Current Occupant Unit Transfer
    - This preference will have priority and will move to the top of the waitlist.

Each waitlist will be updated annually. Each applicant will receive a letter from the property, which will request updated information and ask about the applicant's continued interest in remaining on their selected waitlist(s). This letter must be returned within the specified time frame or their application will be removed from the waitlist(s). It is the responsibility of the applicant to maintain a current address with the property leasing office in order to receive this waitlist correspondence. Any correspondence returned undeliverable will result in the application being removed from the waitlist(s).

Other reasons for removal from the waitlist(s) include:

- The applicant no longer meets the eligibility requirement for the property or program.
- The applicant voluntarily asks to be removed from the waitlist.

Waitlist openings and closings will be published in local media advertisements. A waitlist that is over 1 year will be closed and reopened at such time when vacancies mandate an opening of the list, and the community begins accepting applications again.

## **Transfer**

A Unit Transfer list is maintained through the Waiting List for those residents who have been approved for transfer. Residents wishing to transfer units will have priority over the applicants on the Waiting List, following any transfer request for reasonable accommodation, VAWA, and/or income accommodation.

Residents wishing to transfer to a lower income-restricted apartment will be put on the Waiting List and receive priority over applicants on the Wait List for the next available unit of lower-income designation following any approved transfer request for reasonable accommodations.

In order to transfer, the resident must have completed a one-year lease in their current apartment prior to requesting a transfer within the community and must be in good standing. Residents receiving violation notices regarding their apartment condition and/or violation of the lease and community policies may not be eligible for transfer. Rental payments must have been made within the lease terms. Resident's current apartment must be in normal wear and tear condition to be considered for a unit transfer.

Each building is its own project (100% low-income and mixed-income projects). Developments that made the 20/50 or 40/60 election: to retain its low-income status at the time of transfer, the household must be certified and have a current annual income less than the income limit established by the minimum set aside by the Owner selected. Developments that elected the average income test under IRC §42(g): to retain its low-income status at the time of transfer, the household must be certified, and their current designation averaged together with the designations of the other households in the project must be equal to or less than the percentage represented at the time of Application. Affordable properties (including mixed-income projects): All damages beyond normal wear and tear in an affordable unit will have to be paid by the resident. Any remainder of the security deposit, after any and all damages have been paid, will be refunded to the resident at the time of move out, and a new security deposit will be required at the time of the new lease being executed

### **Transfer for a Reasonable Accommodation:**

Residents who seek a transfer as a reasonable accommodation for a disability or VAWA will be transferred without being charged a transfer fee provided that the transfer has been approved through NRP's Reasonable Accommodations process. Disability-related transfers will be considered during the first year's lease. Transfers for reasonable accommodations do not include factors of view, noise, or apartment location when these factors are not related to the disability. Those seeking a transfer for reasonable accommodation will take precedence on the Unit Transfer List over income requests. All other requests will occur in chronological order by the date the request was received. If the request is denied, the applicant will be notified in writing and will be given five (5) calendar days to appeal Management's decision, during which time the available unit will not be rented to another qualified applicant.

## **Standard/Policies**

A refundable security deposit is required as follows:

<b><u>Apartment Size</u></b>	<b><u>Security Deposit</u></b>
1 Bedroom	one (1) month's rent
2 Bedroom	one (1) month's rent
3 Bedroom	one (1) month's rent

## **Set Asides/Income Limits and Rents**

Apartment homes are available to low to moderate-income households based on the income guidelines listed below:

<b>Maximum Income Limit Based on Family Size @ 30 % of Area Median Income</b>							
<b>1 Person</b>	<b>2 Persons</b>	<b>3 Persons</b>	<b>4 Persons</b>	<b>5 Persons</b>	<b>6 Persons</b>	<b>7 Persons</b>	<b>8 Persons</b>
<b>\$24,750</b>	<b>\$28,290</b>	<b>\$31,830</b>	<b>\$35,340</b>	<b>\$38,190</b>	<b>\$41,010</b>	<b>\$43,830</b>	<b>\$46,650</b>

<b>Maximum Income Limit Based on Family Size @ 50 % of Area Median Income</b>							
<b>1 Person</b>	<b>2 Persons</b>	<b>3 Persons</b>	<b>4 Persons</b>	<b>5 Persons</b>	<b>6 Persons</b>	<b>7 Persons</b>	<b>8 Persons</b>
<b>\$41,250</b>	<b>\$47,150</b>	<b>\$53,050</b>	<b>\$58,900</b>	<b>\$63,650</b>	<b>\$68,350</b>	<b>\$73,050</b>	<b>\$77,750</b>

<b>Maximum Income Limit Based on Family Size @ 60 % of Area Median Income</b>							
<b>1 Person</b>	<b>2 Persons</b>	<b>3 Persons</b>	<b>4 Persons</b>	<b>5 Persons</b>	<b>6 Persons</b>	<b>7 Persons</b>	<b>8 Persons</b>
<b>\$49,500</b>	<b>\$56,580</b>	<b>\$63,660</b>	<b>\$70,680</b>	<b>\$76,380</b>	<b>\$82,020</b>	<b>\$87,660</b>	<b>\$93,300</b>

<b>Bedroom Size</b>	<b>Set Aside</b>	<b>Max Net Rent</b>
1 BR (ESSHI)	30%	\$579
1 BR	50%	\$1,021
1 BR	60%	\$1,242
2 BR	50%	\$1,223
2 BR	60%	\$1,488
3 BR	50%	\$1,411
3 BR	60%	\$1,718

Failure to meet the above criteria, failure to provide requested verification of any required information, and/or falsification of any information during the application process will result in denial of the application. If the applicant is not approved for any reason except criminal background, an applicant can re-apply after 120 days have passed from the date of decline.

## **Privacy Policy for Personal Information of Rental Applicants and Resident**

NRP is dedicated to protecting the privacy of your personal information, including your Social Security Number and other identifying or sensitive personal information. NRP's policy and procedures are designed to help ensure that your information is kept secure, and NRP works to follow all federal and state laws regarding the protection of your personal information. While no one can guarantee against identity theft or the misuse of personal information, protecting the information you provide it is a high priority to NRP and its staff. If you ever have concerns about this issue, please feel free to share them with NRP.

**How personal information is collected.** You will be asked to furnish some of your personal information when you apply to rent from us. This information will be on the rental application form or other document that you provide to us or to an apartment locator service, either on paper or electronically.

**How and when information is used.** We use this information only for our legitimate business purposes involved in leasing a dwelling to you. Examples of these uses include, but are not limited to, verifying statements made on your rental application (such as your rental, credit, and employment history), reviewing your lease for renewal, enforcing your lease obligations (such as



obtaining payment for money you may owe us in the future), and reconciling and confirming rental application referrals with third-party locator services or rental application collectors.

**How the information is protected, shared, and who has access.** We allow only authorized persons (including third-parties for whom we have a legitimate business purpose to share your information with) to have access to your personal information, and we keep documents and electronic records containing information in secure areas and systems (and require our third-party service providers to do so as well).

**How the information is disposed of.** After we no longer need or are required to keep your personal information, we will store or destroy it in a manner designed to prevent unauthorized persons from accessing it. Our disposal methods will include shredding, destruction or obliteration of paper documents and destruction of electronic files.

**Locator and rental application referral services.** If you found us through a locator service or a rental application referral service, please be aware that such services are provided by third parties or independent contractors and not our employees or agents—even though they may initially process rental applications and fill out lease forms. Any personal information you provide to such third-party services is subject to the privacy policies of the locator or rental application referral service, and you should require any locator or rental application referral services you use to furnish you their own privacy policies. We will also share the personal information you provide to us to such locator or rental application referral services in order to confirm and validate your use of such services.

**I have received, read, and understand the above RESIDENT SELECTION POLICY.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
NRP Representative Signature

\_\_\_\_\_  
Date



**PROVISION OF NOTICE BY HOUSING PROVIDERS OF TENANTS' RIGHTS TO REASONABLE  
MODIFICATIONS AND ACCOMMODATIONS FOR PERSONS WITH DISABILITIES.**

**466.15 Provision of notice by housing providers of tenants' rights to reasonable  
modifications and accommodations for persons with disabilities.**

**(a) Statutory Authority.**

Pursuant to N.Y. Executive Law section 295.5, it is a power and a duty of the Division to adopt, promulgate, amend and rescind suitable rules and regulations to carry out the provisions of the N.Y. Executive Law, article 15 (Human Rights Law) and pursuant to New York Executive Law section 170-d, the New York State Division of Human Rights “shall promulgate regulations requiring every housing provider ... to provide notice to all tenants and prospective tenants ... of their rights to request reasonable modifications and accommodations” as such rights are provided for in Human Rights Law sections 296.2-a(d) and section 296.18.

**(b) Effective date.**

Executive Law section 170-d was effective March 2, 2021, pursuant to the Laws of 2021, chapter 82, section 4, by reference to the Laws of 2020, chapter 311.

**(c) Definitions.**

(1) “*Housing provider*” shall mean:

- (i) “the owner, lessee, sub-lessee, assignee, or managing agent of, or other person having the right to sell, rent or lease a housing accommodation, constructed or to be constructed, or any agent or employee thereof” as set forth in New York Executive Law, article 15 (hereinafter “Human Rights Law”) section 296.5; or

- (ii) “the owner, lessee, sub-lessee, assignee, or managing agent of publicly-assisted housing accommodations or other person having the right of ownership or possession of or the right to rent or lease such accommodations” as set forth in Human Rights Law section 296.2-a.
- (2) “*Housing accommodation*” includes “any building, structure, or portion thereof which is used or occupied or is intended, arranged or designed to be used or occupied, as the home, residence or sleeping place of one or more human beings” as set forth in Human Rights Law section 292.10.
- (3) “*Publicly-assisted housing accommodations*” shall include:
  - (i) “public housing” as set forth in Human Rights Law section 292.10(a);
  - (ii) “housing operated by housing companies under the supervision of the commissioner of housing” as set forth in Human Rights Law section 292.10(b); or
  - (iii) other publicly-assisted housing as described in Human Rights Law section 292.10(c), (d) and (e).
- (4) “*Property Manager*” as referenced in the sample notice is an individual housing provider, or such person as the housing provider designates for the purpose of receiving requests for reasonable accommodation.
- (5) “*Reasonable modifications or accommodations*” shall refer to those actions required by Human Rights Law section 296.2-a(d) and Human Rights Law section 296.18, which makes it an unlawful discriminatory practice for a housing provider or publicly-assisted housing provider:

(i) To refuse to permit, at the expense of the person with a disability, reasonable modifications of existing premises occupied or to be occupied by the said person, if the modifications may be necessary to afford the said person full enjoyment of the premises, in conformity with the provisions of the New York state uniform fire prevention and building code, except that, in the case of a rental, the landlord may, where it is reasonable to do so, condition permission for a modification on the renter's agreeing to restore the interior of the premises to the condition that existed before the modification, reasonable wear and tear excepted.

(ii) To refuse to make reasonable accommodations in rules, policies, practices, or services, when such accommodations may be necessary to afford a person with a disability equal opportunity to use and enjoy a dwelling, including the use of an animal as a reasonable accommodation to alleviate symptoms or effects of a disability, and including reasonable modification to common use portions of the dwelling, or

(iii) In connection with the design and construction of covered multi-family dwellings for first occupancy after March thirteenth, nineteen hundred ninety-one, a failure to design and construct dwellings in accordance with the accessibility requirements of the New York state uniform fire prevention and building code, to provide that:

(a) The public use and common use portions of the dwellings are readily accessible to and usable by disabled persons with disabilities;

(b) All the doors are designed in accordance with the New York state uniform fire prevention and building code to allow passage into and within all premises and are sufficiently wide to allow passage by persons in wheelchairs; and

(c) All premises within covered multi-family dwelling units contain an accessible route into and through the dwelling; light switches, electrical outlets, thermostats, and other environmental controls are in accessible locations; there are reinforcements in the bathroom walls to allow later installation of grab bars; and there are usable kitchens and

bathrooms such that an individual in a wheelchair can maneuver about the space, in conformity with the New York state uniform fire prevention and building code.

(6) “*First substantive contact*” is a term used by real estate brokers, licensed real estate salespersons, and licensed associate brokers in New York State. For purposes of this regulation, the term shall have the same meaning as applied under N.Y. Real Prop. Law § 443 and 19 N.Y.C.R. R. § 175.28.

**(d) Actions required by Executive Law section 170-d.**

(1) Housing providers that are the owner, lessee, sub-lessee, assignee, or managing agent of a housing accommodation or publicly-assisted housing accommodation, must provide notice, as provided for in this regulation, to all new and current tenants in the following manner:

- (i) Within 30 days of the effective date of their tenancy;
- (ii) for current tenants, within thirty days after the effective date of Executive Law section 170-d.
- (iii) In writing, and in 12-point font or larger, or other easily legible font.

Include telephone number(s) and e-mail of the property manager or other person responsible for accepting reasonable accommodation requests.

(iv) By email, text, electronic messaging system, facsimile, or hardcopy. An electronic communication containing a link to the notice required pursuant to this regulation shall be permissible, provided the communication also contains text to inform the prospective tenant that the link contains information regarding tenants' rights to reasonable accommodations for persons with disabilities. The notice must be available for printing and downloading.

(v) Where such communication is in paper form, the notice must be included within such communication, or by providing the notice in an accompanying document.

(vi) May be accomplished by including the notice in or with other written communications, such as a lease or other written materials routinely provided to tenants.

(vii) Oral disclosure does not satisfy the requirements imposed by this section.

(viii) “Posting” of the notice pursuant to paragraph (d)(3) of this subdivision, either on paper, on

a bulletin board, or on an electronic bulletin board or notice area, does not satisfy the requirements imposed by this section.

(2) A real estate broker shall be responsible to ensure that each individual licensed pursuant to Article 12-A of the New York Real Property Law and associated with such broker provides notice with regard to available housing accommodations, as provided for in this regulation, to all prospective tenants in the following manner:

(i) Upon first substantive contact.

(ii) In writing, and in 12-point font or larger, or other easily legible font.

(iii) By email, text, electronic messaging system, facsimile, or hardcopy. An electronic communication containing a link to the notice required pursuant to this regulation shall be permissible, provided the communication also contains text to inform the prospective tenant that the link contains information regarding tenants' rights to reasonable accommodations for persons with disabilities. The notice must be available for printing and downloading.

(iv) Where such communication is in paper form, the notice must be included within such communication, or by providing the notice in an accompanying document.

(v) Oral disclosure does not satisfy the requirements imposed by this section.

(vi) "Posting" of the notice pursuant to paragraph (d)(3) of this subdivision, either on paper, on a bulletin board, or on an electronic bulletin board or notice area, does not satisfy the requirements imposed by this section.

(3) In addition to the delivery of notice in paragraphs (d)(1) and (d)(2) of this subdivision, all housing providers shall post the notice in the following manner:

(i) As required by 9 NYCRR 466.3 ; and

(ii) all websites created and maintained by housing providers shall prominently and conspicuously display on the homepage of such website a link to the Division's notice as required this regulation which shall be made available by the Division.

(4) The notice is to advise individuals of their right to request reasonable modifications and accommodations for disability pursuant to Human Rights Law section 296.2-a(d) (publicly-assisted housing) or Human Rights Law section 296.18 (private housing).

**(e) Content of the required notice.**

The following shall be deemed sufficient notice when provided to the individual to be notified.

**NOTICE DISCLOSING TENANTS' RIGHTS TO  
REASONABLE ACCOMMODATIONS FOR PERSONS WITH DISABILITIES**

**Reasonable Accommodations**

The New York State Human Rights Law requires housing providers to make reasonable accommodations or modifications to a building or living space to meet the needs of people with disabilities. For example, if you have a physical, mental, or medical impairment, you can ask your housing provider to make the common areas of your building accessible, or to change certain policies to meet your needs.

To request a reasonable accommodation, you should contact your property manager by calling 518-560-5920, or by e-mailing HudsonOnNine@nrpgroup.com\*. You will need to inform your housing provider that you have a disability or health problem that interferes with your use of housing, and that your request for accommodation may be necessary to provide you equal access and opportunity to use and enjoy your housing or the amenities and services normally offered by your housing provider. A housing provider may request medical information, when necessary to support that there is a covered disability and that the need for the accommodation is disability related.

If you believe that you have been denied a reasonable accommodation for your disability, or that you were denied housing or retaliated against because you requested a reasonable accommodation, you can file a complaint with the New York State Division of Human Rights as described at the end of this notice.

Specifically, if you have a physical, mental, or medical impairment, you can request:†

Permission to change the interior of your housing unit to make it accessible (however, you are required to pay for these modifications, and in the case of a rental your housing provider may require that you restore the unit to its original condition when you move out); Changes to your housing provider's rules, policies, practices, or

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\* The Notice must include contact information when being provided under 466.15(d)(1), above. However, when being provided under (d)(2) and when this information is not known, the sentence may read "To request a reasonable accommodation, you should contact your property manager."

† This Notice provides information about your rights under the New York State Human Rights Law, which applies to persons residing anywhere in New York State. Local laws may provide protections in addition to those described in this Notice, but local laws cannot decrease your protections.



services; Changes to common areas of the building so you have an equal opportunity to use the building. The New York State Human Rights Law requires housing providers to pay for reasonable modifications to common use areas.

Examples of reasonable modifications and accommodations that may be requested under the New York State Human Rights Law include:

If you have a mobility impairment, your housing provider may be required to provide you with a ramp or other reasonable means to permit you to enter and exit the building.

If your healthcare provider provides documentation that having an animal will assist with your disability, you should be permitted to have the animal in your home despite a “no pet” rule.

If you need grab bars in your bathroom, you can request permission to install them at your own expense. If your housing was built for first occupancy after March 13, 1991 and the walls need to be reinforced for grab bars, your housing provider must pay for that to be done.

If you have an impairment that requires a parking space close to your unit, you can request your housing provider to provide you with that parking space, or place you at the top of a waiting list if no adjacent spot is available.

If you have a visual impairment and require printed notices in an alternative format such as large print font, or need notices to be made available to you electronically, you can request that accommodation from your landlord.

### **Required Accessibility Standards**

All buildings constructed for use after March 13, 1991, are required to meet the following standards:

Public and common areas must be readily accessible to and usable by persons with disabilities;

All doors must be sufficiently wide to allow passage by persons in wheelchairs; and

All multi-family buildings must contain accessible passageways, fixtures, outlets, thermostats, bathrooms, and kitchens.

If you believe that your building does not meet the required accessibility standards, you can file a complaint

with the New York State Division of Human Rights.

### **How to File a Complaint**

A complaint must be filed with the Division within one year of the alleged discriminatory act or in court within three years of the alleged discriminatory act. You can find more information on your rights, and on the procedures for filing a complaint, by going to [www.dhr.ny.gov](http://www.dhr.ny.gov), or by calling 1-888-392-3644. You can obtain a complaint form on the website, or one can be e-mailed or mailed to you. You can also call or e-mail a Division regional office. The regional offices are listed on the website.



# Homes and Community Renewal

## Notice of Occupancy Rights under the Violence Against Women Act<sup>1</sup>

### To all Tenants and Applicants

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.<sup>2</sup> This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA.

### Protections for Applicants

If you otherwise qualify for the rental housing or program, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

### Protections for Tenants

You may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

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<sup>1</sup> Despite the name of this law, VAWA protection is available regardless of sex, gender identity, or sexual orientation.

<sup>2</sup> Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

Also, if you or an affiliated individual of yours is or has been the victim of domestic violence, dating violence, sexual assault, or stalking by a member of your household or any guest, you may not be denied rental assistance or occupancy rights solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, or stalking.

Affiliated individual means your spouse, parent, brother, sister, or child, or a person to whom you stand in the place of a parent or guardian (for example, the affiliated individual is in your care, custody, or control); or any individual, tenant, or lawful occupant living in your household.

### **Removing the Abuser or Perpetrator from the Household**

Selkirk Reserve LLC may divide (bifurcate) your lease in order to evict the individual or terminate the assistance of the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, or stalking.

If SELKIRK RESERVE LLC chooses to remove the abuser or perpetrator, SELKIRK RESERVE LLC may not take away the rights of eligible tenants to the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, SELKIRK RESERVE LLC must allow the tenant who is or has been a victim and other household members to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing.

In removing the abuser or perpetrator from the household, SELKIRK RESERVE LLC must follow Federal, State, and local eviction procedures. In order to divide a lease, SELKIRK RESERVE LLC may, but is not required to, ask you for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, or stalking.

## **Moving to Another Unit**

Upon your request, SELKIRK RESERVE LLC may permit you to move to another unit, subject to the availability of other units, and still keep your assistance. In order to approve a request, SELKIRK RESERVE LLC may ask you to provide documentation that you are requesting to move because of an incidence of domestic violence, dating violence, sexual assault, or stalking. If the request is a request for emergency transfer, the housing provider may ask you to submit a written request or fill out a form where you certify that you meet the criteria for an emergency transfer under VAWA. The criteria are:

**(1) You are a victim of domestic violence, dating violence, sexual assault, or stalking.** If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation, as described in the documentation section below.

**(2) You expressly request the emergency transfer.** Your housing provider may choose to require that you submit a form or may accept another written or oral request.

**(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit.** This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

**OR**

**You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer.** If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from

further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you expressly request the transfer.

SELKIRK RESERVE LLC will keep confidential requests for emergency transfers by victims of domestic violence, dating violence, sexual assault, or stalking, and the location of any move by such victims and their families.

SELKIRK RESERVE LLC's emergency transfer plan provides further information on emergency transfers, and SELKIRK RESERVE LLC must make a copy of its emergency transfer plan available to you if you ask to see it.

### **Documenting You Are or Have Been a Victim of Domestic Violence, Dating Violence, Sexual Assault or Stalking**

SELKIRK RESERVE LLC can, but is not required to, ask you to provide documentation to "certify" that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Such request from SELKIRK RESERVE LLC must be in writing, and SELKIRK RESERVE LLC must give you at least 14 business days (Saturdays, Sundays, and Federal holidays do not count) from the day you receive the request to provide the documentation.

SELKIRK RESERVE LLC may, but does not have to, extend the deadline for the submission of documentation upon your request.

You can provide one of the following to SELKIRK RESERVE LLC as documentation. It is your choice which of the following to submit if SELKIRK RESERVE LLC asks you to provide documentation that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

- A complete HUD-approved certification form given to you by SELKIRK RESERVE LLC with this notice, that documents an incident of domestic violence, dating violence, sexual assault, or stalking. The form will ask for your name, the date, time, and location of the incident of domestic violence, dating violence, sexual assault, or stalking, and a description of the incident. The certification form provides for including the name of the abuser or perpetrator if the name of the abuser or perpetrator is known and is safe to provide.
- A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident of domestic violence, dating violence, sexual assault, or stalking. Examples of such records include police reports, protective orders, and restraining orders, among others.
- A statement, which you must sign, along with the signature of an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, “professional”) from whom you sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, and with the professional selected by you attesting under penalty of perjury that he or she believes that the incident or incidents of domestic violence, dating violence, sexual assault, or stalking are grounds for protection.
- Any other statement or evidence that SELKIRK RESERVE LLC has agreed to accept.

If you fail or refuse to provide one of these documents within the 14 business days, SELKIRK RESERVE LLC does not have to provide you with the protections contained in this notice.

If SELKIRK RESERVE LLC receives conflicting evidence that an incident of domestic violence, dating violence, sexual assault, or stalking has been committed (such as certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning household members as the abuser or perpetrator), SELKIRK

RESERVE LLC has the right to request that you provide third-party documentation within thirty 30 calendar days in order to resolve the conflict. If you fail or refuse to provide third-party documentation where there is conflicting evidence, SELKIRK RESERVE LLC does not have to provide you with the protections contained in this notice.

### **Confidentiality**

SELKIRK RESERVE LLC must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA.

SELKIRK RESERVE LLC must not allow any individual administering assistance or other services on behalf of SELKIRK RESERVE LLC (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law.

SELKIRK RESERVE LLC must not enter your information into any shared database or disclose your information to any other entity or individual. SELKIRK RESERVE LLC, however, may disclose the information provided if:

- You give written permission to SELKIRK RESERVE LLC to release the information on a time limited basis.
- SELKIRK RESERVE LLC needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
- A law requires SELKIRK RESERVE LLC or your landlord to release the information.

VAWA does not limit SELKIRK RESERVE LLC's duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up.



## **Reasons a Tenant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated**

You can be evicted and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, SELKIRK RESERVE LLC cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking.

The protections described in this notice might not apply, and you could be evicted and your assistance terminated, if SELKIRK RESERVE LLC can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

- 1) Would occur within an immediate time frame, and
- 2) Could result in death or serious bodily harm to other tenants or those who work on the property.

If SELKIRK RESERVE LLC can demonstrate the above, SELKIRK RESERVE LLC should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

### **Other Laws**

VAWA does not replace any Federal, State, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking. You may be entitled to additional housing protections for victims of domestic violence, dating violence, sexual assault, or stalking under other Federal laws, as well as under State and local laws.

## **For Additional Information**

If you feel that they have been incorrectly denied your rights under VAWA, you should contact NYS Homes and Community Renewal (HCR) at [FEHO@hcr.ny.gov](mailto:FEHO@hcr.ny.gov).

For questions regarding VAWA, please contact the management company, known as NRP Management LLC Fair Housing Coordinator at 1228 Euclid Avenue Suite 400, Cleveland, OH 44115.

For help regarding an abusive relationship, you may call the National Domestic Violence Hotline at 1-800-799-7233 or, for persons with hearing impairments, 1-800-787-3224 (TTY).

For tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

HCR has also created the HCR VAWA Local Services Provider List of local organizations, including housing and legal service providers, that support individuals who are or have been victims of domestic violence, available at

<https://hcr.ny.gov/system/files/documents/2018/11/hcrvawaresourcelist.pdf>

You may view a copy of HUD's final VAWA rule at

<https://www.federalregister.gov/documents/2016/12/06/2016-29213/violence-against-women-reauthorization-act-of-2013-implementation-in-hud-housing-programs-correction>

Additionally, SELKIRK RESERVE LLC must make a copy of HUD's VAWA regulations available to you if you ask to see them.

**Attachment:** Certification form HUD-5382

**CERTIFICATION OF  
DOMESTIC VIOLENCE,  
DATING VIOLENCE,  
SEXUAL ASSAULT, OR STALKING,  
AND ALTERNATE DOCUMENTATION**

**U.S. Department of Housing  
and Urban Development**

OMB Approval No. 2577-0286  
Exp. 06/30/2017

**Purpose of Form:** The Violence Against Women Act (“VAWA”) protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

**Use of This Optional Form:** If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

- (1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, “professional”) from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or “stalking” in HUD’s regulations at 24 CFR 5.2003.
- (2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or
- (3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

**Submission of Documentation:** The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

**Confidentiality:** All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE,  
DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

1. Date the written request is received by victim: \_\_\_\_\_

2. Name of victim: \_\_\_\_\_

3. Your name (if different from victim's): \_\_\_\_\_

4. Name(s) of other family member(s) listed on the lease: \_\_\_\_\_

\_\_\_\_\_

5. Residence of victim: \_\_\_\_\_

6. Name of the accused perpetrator (if known and can be safely disclosed): \_\_\_\_\_

\_\_\_\_\_

7. Relationship of the accused perpetrator to the victim: \_\_\_\_\_

8. Date(s) and times(s) of incident(s) (if known): \_\_\_\_\_

\_\_\_\_\_

10. Location of incident(s): \_\_\_\_\_

In your own words, briefly describe the incident(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature \_\_\_\_\_ Signed on (Date) \_\_\_\_\_

**Public Reporting Burden:** The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.

**SÓLO PARA USO DE OFICINA****Nombre de la propiedad:** Hudson on Nine (Selkirk Reserve LLC)**Número de unidad:****Fecha de entrada en vigor:****A CUMPLIMENTAR POR EL SOLICITANTE****Nombre del cabeza de familia:****Número de identificación expedido por el Estado (cabeza de familia):** Estado:**Teléfono de casa:****Teléfono móvil:****Correo electrónico:****Número preferido de dormitorios:****Si su preferencia principal no está disponible, ¿qué otro tamaño de dormitorio se adaptaría a su hogar?**

Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.

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**PARA USO EXCLUSIVO DE LOS SOLICITANTES**

Responda a todas las preguntas pertinentes. Cada miembro de la unidad familiar mayor de 18 años y menor de 18 si es cabeza de familia, cónyuge o co-cabeza de familia debe firmar y fechar la solicitud.

NOTA: Cualquier solicitante que a propósito falsifique, tergiverse u oculte cualquier información relacionada con la elegibilidad para el programa, o presente información inexacta y/o incompleta en esta solicitud o durante la entrevista, puede ser rechazado para la vivienda.

**COMPOSICIÓN FAMILIAR**

1. **Enumere a la cabeza de familia y a todas las demás personas que vivirán en la unidad. Indique el parentesco de cada miembro del hogar con la cabeza de familia.**

Miembro #	Nombre del miembro	Parentesco	Fecha de nacimiento	Estado de estudiante este y/o el próximo año natural	¿Discapacidad o? (opcional)	Núm. de Seguro Social/Núm. de Identificación Fiscal Individual
1		CABEZA				
2						
3						
4						
5						
6						
7						
8						
9						

Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.



**PREGUNTAS SOBRE EL HOGAR**

Las siguientes preguntas le conciernen a usted y a todos los que vayan a ocupar la unidad. Marque **Sí** o **No** en respuesta a cada pregunta. Si la respuesta es **afirmativa**, deberá facilitarse una explicación a continuación. Si es necesario, utilice hojas adicionales.

<p>2. <b>¿Necesitará algún miembro de la familia un ayudante interno?</b></p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>afirmativo</b>, indique los nombres a continuación:</p>
<p>3. <b>¿Hay algún miembro de este hogar temporalmente ausente, pero que en condiciones normales viviría en la unidad?</b></p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>afirmativo</b>, indique los nombres a continuación:</p>
<p>4. <b>¿Ha utilizado usted o algún miembro de su familia nombres distintos de los que figuran en esta solicitud?</b></p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>afirmativo</b>, explíquelo:</p>
<p>5. <b>¿Usted o algún miembro de su familia ha utilizado alguna vez números de seguro social distintos de los que figuran en esta solicitud?</b></p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>afirmativo</b>, explíquelo:</p>
<p>6. <b>¿Prevé algún cambio en su hogar (entrada o salida de alguien) durante los próximos 12 meses?</b></p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>afirmativo</b>, indique los nombres a continuación:</p>
<p>7. <b>¿Vivirán todos los miembros menores de edad del hogar en esta unidad con un padre o tutor que tenga al menos el 50% de la custodia?</b></p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>negativo</b>, indique los nombres a continuación: N/A</p>
<p>8. <b>¿Recibe/recibirá este hogar una ayuda de renta?</b> Esta información no se utiliza como base para la elegibilidad. La Ley de Derechos Humanos del Estado de Nueva York prohíbe la discriminación en la vivienda basada en la fuente legal de ingresos como si usted tiene un fondo de la Sección 8.</p>	<p><input type="checkbox"/> Sí <input type="checkbox"/> No</p>	<p>En caso <b>afirmativo</b>, indique la fuente (Vale de Elección de Vivienda, RA de Desarrollo Rural, etc.)</p>
<p>9. <b>Enumere todos los estados en los que han vivido los miembros de esta solicitud:</b></p>		



Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.

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## INFORMACIÓN SOBRE INGRESOS

Enumere las fuentes de ingresos actuales y previstas de cada miembro de la unidad familiar (incluidos los miembros temporalmente ausentes y/o en acogida) para el período de doce meses que comienza en la fecha prevista para la mudanza. Toda la información debe ser verificada. Incluya todos los ingresos a tiempo completo, parcial o de temporada, incluso si rellena esta solicitud fuera de temporada.

Incluya los ingresos de todos los miembros de la unidad familiar

10. <b>Sueldos/salarios</b> (incluye propinas, primas, comisiones y empleo estacional)	<input type="checkbox"/> Sí <input type="checkbox"/> No
11. <b>Remuneración ordinaria de un militar</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
12. <b>Trabajo autónomo</b> (Incluye fuentes de ingresos digitales como servicios de conducción basados en aplicaciones, ventas de comercio electrónico y plataformas basadas en vídeo)	<input type="checkbox"/> Sí <input type="checkbox"/> No
13. <b>Prestaciones por desempleo o indemnización por despido</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
14. <b>Indemnización por accidente laboral u otras indemnizaciones de seguros</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
15. <b>Ingresos de Seguro Social</b> (incluida el Seguro Social, el Seguro de Invalidez del Seguro Social (SSDI) y el Seguro de Jubilación, Supervivencia e Invalidez (RSDI))	<input type="checkbox"/> Sí <input type="checkbox"/> No
16. <b>Seguridad de Ingreso Suplementario (SSI)</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
17. <b>Prestaciones de invalidez</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
18. <b>Asistencia pública</b> (TANF, GA, AFDC, asistencia en metálico, etc. - excluidos los cupones para alimentos y la asistencia médica)	<input type="checkbox"/> Sí <input type="checkbox"/> No
19. <b>Manutención de los hijos</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
20. <b>Pensión alimenticia</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
21. <b>Contribuciones periódicas en efectivo y de otro tipo</b> (incluida la ayuda para pagar el alquiler, las facturas o los regalos de personas que no viven en la unidad, excluidos los comestibles)	<input type="checkbox"/> Sí <input type="checkbox"/> No
22. <b>Ayuda financiera para estudiantes</b> (públicas o privadas - excluidos los préstamos estudiantiles)	<input type="checkbox"/> Sí <input type="checkbox"/> No
23. <b>Prestaciones para veteranos</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
24. <b>Pagos regulares de pensiones</b> (incluyendo PERA, ferrocarril, etc.)	<input type="checkbox"/> Sí <input type="checkbox"/> No
25. <b>Pagos regulares de las prestaciones de jubilación</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
26. <b>Pagos periódicos de los fideicomisos indios</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
27. <b>Prestaciones por defunción</b> (percepción de ingresos como beneficiario de rentas vitalicias, pensiones, seguros de vida, etc.)	<input type="checkbox"/> Sí <input type="checkbox"/> No
28. <b>Pagos regulares de anualidades o dividendos de seguros de vida</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No
29. <b>Otros (enumérelos):</b>	<input type="checkbox"/> Sí <input type="checkbox"/> No

30. **¿Algún miembro adulto del hogar no tiene ingresos?**  Sí  No En caso afirmativo, indique el nombre: \_\_\_\_\_



Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.

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**INFORMACIÓN SOBRE ACTIVOS**

Enumere todos los bienes de cada miembro de la unidad familiar (incluidos los niños). Toda la información debe ser verificada.

*Incluir los bienes de todos los miembros del hogar*

31. Cuentas corrientes	<input type="checkbox"/> Sí	<input type="checkbox"/> No
32. Cuentas de ahorro	<input type="checkbox"/> Sí	<input type="checkbox"/> No
33. Tarjeta de efectivo (incluidas las tarjetas de prestaciones públicas)	<input type="checkbox"/> Sí	<input type="checkbox"/> No
34. Acciones	<input type="checkbox"/> Sí	<input type="checkbox"/> No
35. Bonos	<input type="checkbox"/> Sí	<input type="checkbox"/> No
36. Mercado monetario/Fondos de inversión	<input type="checkbox"/> Sí	<input type="checkbox"/> No
37. Certificado de depósito	<input type="checkbox"/> Sí	<input type="checkbox"/> No
38. Fideicomiso	<input type="checkbox"/> Sí	<input type="checkbox"/> No
39. Ingresos a tanto alzado (por ejemplo, herencias, indemnizaciones de seguros, premios de lotería o plusvalías)	<input type="checkbox"/> Sí	<input type="checkbox"/> No
40. cuenta 401(k) o 403(b)	<input type="checkbox"/> Sí	<input type="checkbox"/> No
41. Cuenta IRA	<input type="checkbox"/> Sí	<input type="checkbox"/> No
42. Cuenta Keogh	<input type="checkbox"/> Sí	<input type="checkbox"/> No
43. Inversiones de capital	<input type="checkbox"/> Sí	<input type="checkbox"/> No
44. Inmobiliario	<input type="checkbox"/> Sí	<input type="checkbox"/> No
45. Contratos inmobiliarios	<input type="checkbox"/> Sí	<input type="checkbox"/> No
46. GoFundMe/Fondos de crowdfunding	<input type="checkbox"/> Sí	<input type="checkbox"/> No
47. Bitcoin/Moneda criptográfica	<input type="checkbox"/> Sí	<input type="checkbox"/> No
48. Pólizas de seguro de vida (excluidos los seguros de vida temporales)	<input type="checkbox"/> Sí	<input type="checkbox"/> No
49. Pensiones/A anualidades/Otras cuentas de jubilación	<input type="checkbox"/> Sí	<input type="checkbox"/> No
50. Efectivo en caja	<input type="checkbox"/> Sí	<input type="checkbox"/> No
51. Artículos personales mantenidos como inversión	<input type="checkbox"/> Sí	<input type="checkbox"/> No
52. Otros (enumérelos):	<input type="checkbox"/> Sí	<input type="checkbox"/> No

**ACTIVOS ENAJENADOS POR UN VALOR INFERIOR AL VALOR JUSTO DE MERCADO**

53. Certifico/certificamos que  **HAGO**  **NO HEMOS** vendido ni regalado bienes por un valor inferior a su valor justo de mercado en los dos últimos años.

*Si procede: Identificar los activos vendidos o enajenados por su valor justo de mercado*

Miembro del hogar	Tipo de activo	Valor de mercado	Fecha de venta	Importe percibido
		\$		\$
		\$		\$
		\$		\$
		\$		\$



Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.

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# Solicitud Rental

		\$	<input type="checkbox"/> Es propiedad <input type="checkbox"/> conjunta* Obtiene ingresos	%	\$
--	--	----	--	---	----

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## CUESTIONARIO DE REQUISITOS ESPECIALES DE LA UNIDAD

54. Nombre del solicitante

55. Firma del solicitante

Fecha

Todas las unidades que, de conformidad con las condiciones de la financiación de la HCR del proyecto, son totalmente accesibles, adaptadas y listas para la mudanza para los solicitantes con problemas de movilidad o auditivos/visuales. Este término también se refiere a las unidades que deben construirse de conformidad con los requisitos de diseño de accesibilidad del 5% y el 2% en virtud de la Sección 504 de la Ley de Rehabilitación.

La siguiente sección es opcional y se utiliza para ayudar a determinar la elegibilidad para características especiales de vivienda accesible. Todas las respuestas serán verificadas.

56. ¿Desea facilitar información que ayude a determinar si cumple los requisitos para acceder a una vivienda accesible? Sí

 No (En caso negativo, pase a la página siguiente)

Para poder optar a una unidad accesible, un miembro de la unidad familiar debe tener una discapacidad física que:

- se prevea una duración prolongada e indefinida
- impide sustancialmente la capacidad de la persona para vivir de forma independiente
- es tal que la capacidad de la persona para vivir de forma independiente podría mejorar con unas condiciones de alojamiento más adecuadas

57. ¿Tiene usted o algún miembro de su hogar alguna discapacidad que se ajuste a las definiciones anteriores?  Sí  No

58. En caso afirmativo, indique el nombre de los miembros de la familia:

59. Usted o algún miembro de su hogar padece alguna enfermedad que requiera (marque las que procedan):

- un dormitorio independiente
- una unidad para una persona con
- discapacidad visual una unidad para una persona con discapacidad
- auditiva un apartamento sin barreras
- una unidad de un solo nivel
- un cuarto de baño en la primera planta
- otras modificaciones físicas, explíquelas:

60. Por favor, explique exactamente lo que necesita para adaptarse a su situación:

61. ¿Con quién debemos ponernos en contacto para verificar su necesidad de las características de vivienda mencionadas?

Nombre

Dirección

Ciudad

Estado

Código postal

Teléfono

Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.

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**FIRMAS**

Yo/nosotros entiendo/entendemos que la información en esta solicitud será utilizada para determinar la elegibilidad para los programas de asistencia de vivienda y que esta información será verificada. Entiendo/entendemos que cualquier información falsa puede hacer que no sea elegible para una unidad. Por la presente afirmo/afirmamos que la información precedente es verdadera y completa a mi/nuestro leal saber y entender, y autorizo/autorizamos al propietario a realizar averiguaciones para verificar lo aquí declarado. Entiendo/entendemos que si alguna de esta información es falsa, engañosa o incompleta, la dirección puede rechazar nuestra solicitud o, si se ha producido el traslado, rescindir mi/nuestro contrato de arrendamiento. Yo/nosotros entiendo/entendemos que cualquier acción(es) por mí/nosotros mismos o por los miembros de mi/nuestra casa, ya sea verbal o no verbal, que acose, intimide, amenace o sea percibida por la administración como acoso, intimidación o amenaza a la salud o seguridad del personal de administración o interfiera con la administración de la propiedad es motivo para que la administración rechace mi/nuestra solicitud de vivienda. Yo/nosotros entiendo/entendemos que si yo/nosotros o cualquier miembro de mi/nuestro hogar sugiere u ofrece sobornos de dinero, bienes materiales, etc., al personal de administración responsable de determinar mi/nuestra colocación en la lista de espera o el procesamiento de mi/nuestra solicitud de vivienda es motivo para que la administración rechace mi/nuestra solicitud de vivienda. Yo/nosotros autorizo/autorizamos a la dirección a hacer todas las averiguaciones necesarias para verificar esta información, directamente o a través de la información intercambiada ahora o más tarde con servicios de alquiler y verificación de crédito, y a ponerse en contacto con los propietarios actuales y anteriores u otras fuentes para obtener información de crédito y verificación que puede ser divulgada a las autoridades federales, estatales y locales pertinentes. Si mi/nuestra solicitud es aprobada, y se produce la mudanza, yo/nosotros certifico/certificamos que sólo los ocupantes que figuran en esta solicitud ocuparán la unidad, y que ésta será mi/nuestra única residencia. Acepto/aceptamos notificar por escrito a la dirección cualquier cambio de domicilio, número de teléfono, ingresos y composición de la unidad familiar. Con mi(s) firma(s), según se indica a continuación, reconozco/reconocemos que he/hemos leído y completado cada sección de esta solicitud de alquiler, según corresponda.

Bajo pena de perjurio, yo/nosotros certifico/certificamos que la información presentada en esta solicitud es verdadera y exacta a mi/nuestro leal saber y entender. El abajo firmante entiende además que proporcionar declaraciones falsas en este documento constituye un acto de fraude.

La información falsa, engañosa o incompleta puede dar lugar a la rescisión del contrato de alquiler.

1.	<b>Firma del solicitante</b>	<b>Fecha</b>
2.	<b>Firma del solicitante</b>	<b>Fecha</b>
3.	<b>Firma del solicitante</b>	<b>Fecha</b>
4.	<b>Firma del solicitante</b>	<b>Fecha</b>
5.	<b>Firma del solicitante</b>	<b>Fecha</b>
6.	<b>Firma del solicitante</b>	<b>Fecha</b>
7.	<b>Firma del solicitante</b>	<b>Fecha</b>
8.	<b>Firma del solicitante</b>	<b>Fecha</b>
9.	<b>Firma del solicitante</b>	<b>Fecha</b>

Alentamos y apoyamos el programa de vivienda afirmativa de la nación en el que no existen barreras para obtener vivienda por motivos de raza, color, religión, origen nacional, sexo, discapacidad o estado familiar (incluidas familias con niños menores, mujeres embarazadas y adultos en proceso de obtener la custodia de un menor de edad). Además, la Ley de Derechos Humanos del Estado de Nueva York brinda protección adicional basada en: edad, estado civil, estado militar, orientación sexual, identidad de género, condición de víctima de violencia doméstica, credo, ciudadanía o estado migratorio y fuente legal de ingresos.



# Historial de Vivienda

Nombre de la Propiedad: Hudson on Nine (Selkirk Reserve LLC)

Nombre de Miembro: \_\_\_\_\_

Número de Unidad: \_\_\_\_\_

NOTA: La falta de historial de alquiler no es motivo de denegación.

Proporcione el historial de vivienda de los últimos 24 meses. Todos los miembros adultos del hogar deben completar este formulario al momento de mudarse.

Marque esta casilla si no tuvo una vivienda establecida durante el período solicitado y proporcione una breve explicación a continuación.

Explicación: \_\_\_\_\_

## Dirección Actual

Dirección:		# de Apto.:
Ciudad:	Estado:	Código Postal:
Fecha de Mudanza (Mes/Año):	Razón por salir:	
(Marque uno) <input type="checkbox"/> Alquiler <input type="checkbox"/> Poseer <input type="checkbox"/> Otro _____	Renta mensual (si aplica):	
Nombre de Casero:	Teléfono de Casero:	

## Direcciones Anteriores

1.	Dirección:	# de Apto.:
Ciudad:	Estado:	Código Postal:
Razón por salir:		
Fecha de Mudanza (Mes/Año):	Fecha de Salida (Mes/Año):	
(Marque uno) <input type="checkbox"/> Alquiler <input type="checkbox"/> Poseer <input type="checkbox"/> Otro _____	Renta mensual (si aplica):	
Nombre de Casero:	Teléfono de Casero:	

2.	Dirección:	# de Apto.:
Ciudad:	Estado:	Código Postal:
Razón por salir:		
Fecha de Mudanza (Mes/Año):	Fecha de Salida (Mes/Año):	
(Marque uno) <input type="checkbox"/> Alquiler <input type="checkbox"/> Poseer <input type="checkbox"/> Otro _____	Renta mensual (si aplica):	
Nombre de Casero:	Teléfono de Casero:	

3.	Dirección:	# de Apto.:
Ciudad:	Estado:	Código Postal:
Razón por salir:		
Fecha de Mudanza (Mes/Año):	Fecha de Salida (Mes/Año):	
(Marque uno) <input type="checkbox"/> Alquiler <input type="checkbox"/> Poseer <input type="checkbox"/> Otro _____	Renta mensual (si aplica):	
Nombre de Casero:	Teléfono de Casero:	

Bajo pena de perjurio, certifico/amos que la información presentada en esta certificación es verdadera y precisa según nuestro leal saber y entender. Además, comprendo/emos que proporcionar representaciones falsas en este documento constituye un acto de fraude. Información falsa, engañosa o incompleta puede resultar en la terminación del contrato de arrendamiento.

Firma del solicitante

Nombre escrito

Fecha



La Sección 1001 del Título 18 del Código de los Estados Unidos establece que como delito criminal hacer declaraciones falsas o tergiversaciones intencionales a cualquier Departamento o Agencia de los Estados Unidos sobre cualquier asunto dentro de su jurisdicción.

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# Formulario de Contacto de Emergencia

**Nombre de Propiedad** Hudson on Nine (Selkirk Reserve LLC)

**Cabeza del Hogar**

**Número de Unidad**

**Instrucciones:** Como parte de su solicitud de vivienda, tiene la opción de proporcionar el nombre, dirección, número de teléfono y otra información relevante de un familiar, amigo o una organización social, de salud, de defensa u otra organización. Esta información de contacto tiene el propósito de identificar a una persona u organización que pueda ayudar a resolver cualquier problema que pueda surgir durante su arrendamiento o para ayudar en la prestación de cualquier atención especial o servicios que pueda necesitar. **Puede actualizar, eliminar o cambiar la información que proporcione en este formulario en cualquier momento.** No está obligado a proporcionar esta información de contacto, pero si decide hacerlo, incluya la información relevante en este formulario.

**Declino proporcionar información de contacto de emergencia.**

**Nombre de la persona u organización de contacto de emergencia:** \_\_\_\_\_

**Dirección:** \_\_\_\_\_

**Núm. De Teléfono:** \_\_\_\_\_ **Núm de Teléfono Celular:** \_\_\_\_\_

**Correo electrónico (si aplica):** \_\_\_\_\_

**Parentesco al Solicitante:** \_\_\_\_\_

**Razón del contacto (Marque todas las que correspondan):**

**Emergencia**

**Imposible contactarlo a usted**

**Terminación de la asistencia de alquiler (si aplica)**

**Desalojo de la unidad**

**Pago tardío de alquiler**

**Ayuda con el proceso de recertificación**

**Cambio en los términos del arrendamiento**

**Cambio en las reglas de la casa**

**Otros:** \_\_\_\_\_

*Si se aprueba su solicitud de vivienda, esta información se mantendrá como parte de su expediente de inquilino. Si surgen problemas durante su arrendamiento o si necesita algún servicio o atención especial, es posible que nos pongamos en contacto con la persona u organización que haya enumerado para ayudar a resolver los problemas o para proporcionarle cualquier servicio o atención especial que necesite.*

**Declaración de Confidencialidad:** La información proporcionada en este formulario es confidencial y no será divulgada a nadie excepto según lo permitido por el solicitante o la ley aplicable.

**Firma del solicitante**

**Fecha**





# Certificación de Estudiante - Crédito Fiscal

**Nombre de Propiedad** Hudson on Nine (Selkirk Reserve LLC) **Nombre de Familia**

**Número de Unidad**

**Fecha de Vigencia**

Cada hogar debe completar una certificación para confirmar el estado de estudiante de todos los miembros del hogar. La determinación del estado de estudiante es necesaria para determinar la elegibilidad para la vivienda. Tenga en cuenta que los estudiantes incluyen a aquellos que asisten a escuelas primarias, secundarias, de bachillerato, universidades, técnicas, comerciales y mecánicas, pero no incluye a aquellos que asisten a cursos de capacitación laboral.

**Parte A** (Marque solo una declaración)

- El hogar contiene al menos un ocupante que no es estudiante y no ha sido/será estudiante durante cinco meses o más del año calendario actual y/o próximo (los meses no necesitan ser consecutivos). (Si esta casilla está marcada, por favor, haga que todos los adultos firmen y fechen el formulario).
- El hogar contiene únicamente estudiantes, pero califica porque el siguiente ocupante es un estudiante de TIEMPO PARCIAL que no es/será estudiante de tiempo completo durante cinco meses o más del año calendario actual y/o próximo. (Si esta casilla está marcada, por favor, escriba los nombres de todos los miembros que son estudiantes de medio tiempo en el espacio a continuación y haga que todos los miembros adultos firmen y fechen el formulario).

**Nombre(s) del(os) estudiante(s) de medio tiempo:**

- El hogar consiste en todos los miembros que han sido/serán estudiantes de tiempo completo durante cinco meses o más del año calendario actual y/o próximo (los meses no necesitan ser consecutivos). (Si esta casilla está marcada, continúe con la Parte B)

**Parte B**

- a. ¿El hogar incluye a estudiantes que están casados y tienen derecho a presentar una declaración conjunta de impuestos?  Sí  No
- b. ¿El hogar incluye al menos a un padre soltero y su(s) hijo(s)? En caso afirmativo,  Sí  No
- i. ¿Este padre es dependiente de otra persona?  Sí  No
- ii. ¿Estos hijos son dependientes de una persona que no sea un padre?  Sí  No
- c. ¿El hogar incluye al menos a un estudiante que recibe asistencia bajo el Título IV de la Ley de Seguridad Social? Esto incluye la Asistencia Temporal para Familias Necesitadas (TANF), también conocida como Ayuda a Familias con Hijos Dependientes (AFDC).  Sí  No
- d. ¿El hogar incluye al menos a un estudiante que participa en un programa que recibe asistencia bajo la Ley de Asociación para la Capacitación Laboral, la Ley de Inversión en la Fuerza Laboral, u otras leyes federales, estatales o locales similares (por ejemplo, ¿Cuerpo de Trabajo, AmeriCorps, etc.)?  Sí  No
- e. ¿El hogar incluye al menos a un estudiante que estuvo bajo el cuidado y responsabilidad de colocación de una agencia estatal que administra cuidado de crianza bajo la Parte B o Parte E del Título IV de la Ley de Seguridad Social (es decir, adultos que estuvieron en el sistema de crianza durante la infancia)?  Sí  No

Los hogares de estudiantes a tiempo completo que son elegibles según los ingresos y cumplen una de las condiciones anteriores se consideran elegibles. Si todas las preguntas de la **a a la e** están marcadas como **NO**, o la verificación no respalda la excepción indicada, se considera que el hogar no es elegible.

Bajo pena de perjurio, certifico/amos que la información presentada en esta certificación es verdadera y precisa según mi/nuestro leal saber y entender. Además, comprendo/entendemos que proporcionar representaciones falsas aquí constituye un acto de fraude. Información falsa, engañosa o incompleta puede resultar en la terminación de un acuerdo de arrendamiento.

<b>Firma</b>	<b>Fecha</b>	<b>Firma</b>	<b>Fecha</b>
<b>Firma</b>	<b>Fecha</b>	<b>Firma</b>	<b>Fecha</b>
<b>Firma</b>	<b>Fecha</b>	<b>Firma</b>	<b>Fecha</b>
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<b>Firma</b>	<b>Fecha</b>	<b>Firma</b>	<b>Fecha</b>

NOTA: La Sección 1001 del Título 18 del Código de los Estados Unidos establece como delito criminal hacer declaraciones falsas o tergiversaciones intencionales a cualquier Departamento o Agencia de los Estados Unidos sobre cualquier asunto dentro de su jurisdicción.



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# Reconocimiento de Recibo de VAWA

**Nombre de Propiedad  
Número de Unidad**

Hudson on Nine (Selkirk Reserve LLC) **Nombre de Familia**

He recibido/ hemos recibido una copia de los siguientes documentos:

1. HUD-5380: Aviso de Derechos de Ocupación bajo la Ley de Violencia contra las Mujeres
2. HUD-5382: Certificación de Violencia Doméstica, Violencia en Citas, Agresión Sexual o Acecho, y Documentación Alternativa

Por la presente declaro que todo lo contenido en esta declaración es verdadero según mi leal saber y entender.

1. Firma del Solicitante/Residente	Nombre Escrito	Fecha
2. Firma del Solicitante/Residente	Nombre Escrito	Fecha
3. Firma del Solicitante/Residente	Nombre Escrito	Fecha
4. Firma del Solicitante/Residente	Nombre Escrito	Fecha
5. Firma del Solicitante/Residente	Nombre Escrito	Fecha
6. Firma del Solicitante/Residente	Nombre Escrito	Fecha
7. Firma del Solicitante/Residente	Nombre Escrito	Fecha
8. Firma del Solicitante/Residente	Nombre Escrito	Fecha
9. Firma del Solicitante/Residente	Nombre Escrito	Fecha

El Título 18, Sección 1001 del Código de los Estados Unidos establece que una persona es culpable de un delito grave por hacer declaraciones falsas o fraudulentas con conocimiento y voluntad a cualquier departamento del Gobierno de los Estados Unidos. HUD y cualquier propietario (o cualquier empleado de HUD o el propietario) pueden estar sujetos a sanciones por divulgaciones no autorizadas o uso indebido de la información recopilada en base al formulario de consentimiento. El uso de la información recopilada en base a este formulario de verificación está restringido a los propósitos mencionados anteriormente. Cualquier persona que solicite, obtenga o divulgue de manera consciente y voluntaria información bajo falsos pretextos sobre un solicitante o participante puede estar sujeta a un delito menor y ser multada con no más de \$5,000. Cualquier solicitante o participante afectado por la divulgación negligente de información puede entablar una acción civil por daños y buscar otros remedios, según corresponda, contra el funcionario o empleado de HUD o el propietario responsable de la divulgación no autorizada o el uso indebido. Las disposiciones de penalización por el mal uso del número de seguro social están contenidas en la \*\*Ley de Seguridad Social en la sección 208 (a) (6), (7) y (8). La violación de estas disposiciones se cita como violaciones de 42 U.S.C. 408 (a) (6), (7) y (8).



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