RENTAL APPLICATION

BROOKSIDE PLACE APARTMENTS 20 Mary Street Palatine Bridge, N.Y. 13428

MANAGED BY:

Sermar Management, LLC 349 W. Commercial St. #3100 E. Rochester, NY 14445

585-248-5490



APPLICANT: * MAXIM * HEAD O			nold must b	e age 55 or	older at the time of occupancy)
FULL NAME:					
First	M/I	Last		SS#	Birthdate
CO-APPLICANT:					
FULL NAME					
First	M/I Last	_	SS#		Birthdate
STUDENT STATUS		<u> </u>			
Will you be a full time student?		() Yes	() No	
RENT OWN					
Current Address		N	Monthly Re	nt \$	How long?
Street Name	e Apt. #				
		I	andlord's N	lame:	
City State	e Zip Cod	e (required)			
Landlord Phone	Home Phone	Reason f	or moving		
Previous Address		Moi	nthly Rent\$		How long?
Street Name (if less than 2 yrs)	Apt. #				
City State	Zip Code	Lace (required)	andlord's N	ame:	
Landlord Ph	one H	Iome Phone	Reas	on for movi	 ng

NAME:	ADDRESS			PHONE #	
NAME:	ADDRESS		PHONE#		
NAME:	ADDRESS				
BANK NAME:	SAVINGS#				
DRIVERS LICENSE:	STA	EXPIRES			
VEHICLE MODEL:	YEAR		COLOR		
VEHICLE MODEL:	YI	YEAR		COLOR	
OTHER INFORMATION Have you ever	Filed for Bankruptcy Been evicted from Tenancy Been convicted of a felony		() no () no () no	Do you have a pet' Yes() No () Type of pet	
Are you wheelchair bound? (IN CASE OF EMERGENCY,	, , , ,			RELATIONSHIP	
Two apartments are handicap a Are you wheelchair bound? (IN CASE OF EMERGENCY, NAME ADDRESS) Yes () No NOTIFY:	PHONE_	1	RELATIONSHIP	
Two apartments are handicap a Are you wheelchair bound? (IN CASE OF EMERGENCY, NAME) Yes () No NOTIFY:	PHONE_		RELATIONSHIP	
Two apartments are handicap a Are you wheelchair bound? (IN CASE OF EMERGENCY, NAME ADDRESS EMPLOYMENT:	Yes () No NOTIFY: Employed full time Non-employed/Retired	PHONE_	time Se	RELATIONSHIP	
Two apartments are handicap a Are you wheelchair bound? (IN CASE OF EMERGENCY, NAME ADDRESS EMPLOYMENT: Circle all applicable Current Employer:) Yes () No NOTIFY: Employed full time Non-employed/Retired Position:	PHONE_	time Se	RELATIONSHIP	
Two apartments are handicap a Are you wheelchair bound? (IN CASE OF EMERGENCY, NAME) Yes () No NOTIFY: Employed full time Non-employed/Retired Position:	PHONE_ Employed part Unemployed	time Se	RELATIONSHIP If-employed ow Long? one#	
Two apartments are handicap a Are you wheelchair bound? (IN CASE OF EMERGENCY, NAME) Yes () No NOTIFY: Employed full time Non-employed/Retired Position: Supervisor:	PHONE_ Employed part Unemployed FAX#_	time Se	RELATIONSHIP If-employed ow Long? one#	

Note:

Applicants must complete this section in order to determine qualification for residency within the Federal Low Income Housing Tax Credit Program. Although this information is voluntary under the Federal Fair Housing Act, failure to provide such income may result in non-qualification for residency for any rental unit in Affordable Housing Program.

Other Income Includes: Alimony, child support, welfare, unemployment, aid to dependent children, social security, annuities, insurance policies, retirement benefits, pensions, disability, gifts from family, and other regular periodic payments. Please consult the leasing personnel for complete list of other income.

If none, check l	nere	() No other sources of income			
Type of income 2		Annua	d Amount	Contact address	or phone
				Contact address or priorie	
Type of income			l Amount	Contact address or phone	
3					
			l Amount	Contact address or phone	
RENTAL ASSI	STAN	CE:			
() No Ren	tal Ass	istance () Rental Assistance	From:	_	
() Vouche	er () Certificate	Tenant Portion \$		
ASSETS:					
Have you dispose	equip s define	ssary personal property such as clothing, furnity ment for use by the handicapped and assets of ed above) of the whole household more than \$5 my assets at less than fair market value within 2	a business.	s, etc Also exclude) No) No	d is any special
ASSETS YES N	10	DO VOLUMANT			
11111		DO YOU HAVE:	BANK		
		*Chagling Aggregatic)?		BALANCE	RATE
		*Checking Account(s)?		\$	RATE
		**Savings Account(s)?		\$	RATE
				\$ \$	RATE
		**Savings Account(s)? Certificate(s) of Deposit?		\$ \$ \$	RATE
		**Savings Account(s)? Certificate(s) of Deposit? Cash held at home, etc?		\$ \$ \$ \$	RATE
		**Savings Account(s)? Certificate(s) of Deposit? Cash held at home, etc? Money in Trust?		\$ \$ \$ \$ \$ \$ \$ \$	RATE
		**Savings Account(s)? Certificate(s) of Deposit? Cash held at home, etc? Money in Trust? Stocks or Bonds?		\$ \$ \$ \$	RATE

\$

\$

<u>\$</u>

When

A Retirement Fund?

A Whole Life Insurance Policy?

Amount \$

Personal Property held as Investment? (Jewelry, coin collection, antiques)? Cash Value: \$_

Equity in Real Estate or Capital Investments? Market Value less unpaid balance and selling costs = Cash Value \$

Have you sold/given away any assets within the last 2 years? If yes, complete the "disposal of assets" form.

Have you received any Lump Sum Receipts? (Inheritances, capital gains, lottery winnings, insurance settlements or other claims)

Mutual Funds?

^{*} The 6-month average balance must be used for the checking account,

^{**}The current balance must be used for the savings account.

TOTAL NET FAMILY ASSETS \$			
Total Cash Value of ALL Assets: Total ACTUAL Asset Income:	_		
3. IMPUTED Asset Income Calculation:		X 2% =	Imputed Asset Income
2000 11.4	A.	Total Income:	\$
	В.	Total Asset Income:	\$Greater of Line #2 or #3
The undersigned makes the foregoing representation lease given in reliance upon such information. The deemed appropriate pertaining to my personal and fi	under	signed hereby grant Landlo	ven false, owner at his option may cancel and annul any ord permission to obtain any additional information
Signature		Date	
Signature		Date	

We Do Business In Accordance With the Federal Fair Housing Law (The Fair Housing Amendments Act of 1988)

EQUAL HOUSING OPPORTUNITY

AFFORDABLE HOUSING PROGRAM INFORMATION SHEET

PALATINE VILLAGE APARTMENTS 20 MARY STREET PALATINE BRIDGE, N.Y. 13428

Managed by: Sermar Management

349 W. Commercial St. #3100

E. Rochester, NY 14445

585-248-5490



Welcome to Palatine Village Apartments. Our community is operated under the Affordable Housing Program, within Section 42 of the Internal Revenue Code. This program is designed to facilitate the housing needs of moderate and middle income families. Residence at Palatine Village Apartments requires that applicants meet certain qualifying standards established by the government and the Managing Agent. This program is not connected with Section 8, although applicants with Section 8 vouchers or certificates may apply for residency.

Residency at Palatine Village Apartments is limited to those households having moderate incomes. In addition to standard wages, income includes monies received from many sources such as alimony, child support, pensions, and social security. In Palatine Bridge, NY the maximum allowable incomes (by household size) are as follows:

Household Size	Maximum Allowable Income	Minimum Income Guidelines
1	\$25,200	\$9,000
2	\$28,800	\$9,000

Minimum income requirements are based upon the size of the household and the size of the apartment. Minimum income requirements may be waived under certain circumstances such as the ability to provide a higher security deposit or to obtain a cosigner for the lease. Maximum occupancy limits at Palatine Village Apartments are set at two people per bedroom. The Head of Household must be age 55 or older.

All information on income provided by applicants must be verified before occupancy. This qualification and certification process must also be completed annually upon renewal. In addition to standard wages, income includes monies received from many sources such as alimony, child support, social security, pensions, and AFDC. A complete definition of income is available for inspection upon request.

The rents at Palatine Village Apartments are controlled by regulation. Currently, the maximum allowable rents by bedroom are:

Monthly Housing Cost	Monthly Rent
1 Bedroom	\$386

Rent includes heat and hot water.

The allowable rent is subject to change annually and is based upon median incomes as determined by the Department of Housing and Urban Development and estimated utility expenses which you will be required to pay directly to the utility company. The estimated additional utility costs are \$40/month for electricity.

There are 24 one-bedroom apartments, 2 of which are handicapped adapted. The security deposit for an apartment is \$386.00 (or one month's rent) and payable when application is approved. One dog or cat under 20 lbs is permitted with the payment of an additional \$100.00 security deposit.

BROOKSIDE PLACE APARTMENTS

A SENIOR LIVING COMMUNITY LOCATED AT 20 Mary Street, Palatine Bridge

24 One bedroom apartments (643 sq. ft.)

Maximum and minimum income limits apply

2 handicap accessible apartments, 6 with shower stalls

Elevator

Community room with kitchen and library

Walking distance to Pharmacy, Banks, Library, Restaurants and Grocery

Store

Rent \$386/month

Rent includes heat, hot water and refuse

Electricity estimated to be \$40/month

One dog or cat under 20 lbs. allowed (additional fees)

Private storage locker

Primary resident must be age 55 or older

Central coin laundry facilities

Security system, emergency call switches

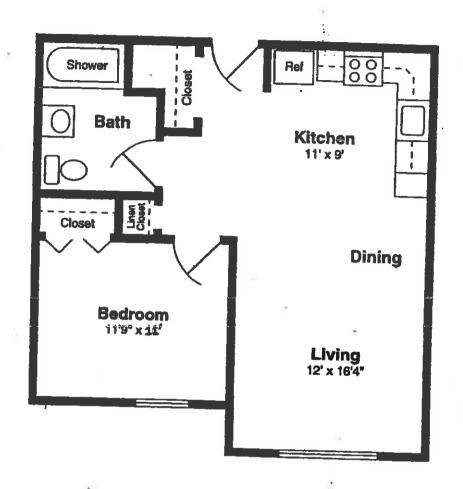
NO SMOKING

Applications will be accepted by US Mail only. .

CALL NOW FOR AN APPLICATION (585) 248-5490

Sermar Management, LLC 349 W. Commercial Street, Suite 3100 East Rochester, New York 14445





ONE BEDROOM APARTMENTS – 641 sq. Feet 33 sq. FEET OF PRIVATE STORAGE

For additional information, please contact:

Cory Sertl SERMAR MANGEMENT CORPORATION 349 W. COMMERCIAL STREET, SUITE 3100 EAST ROCHESTER, NEW YORK 14445 585-248-5490

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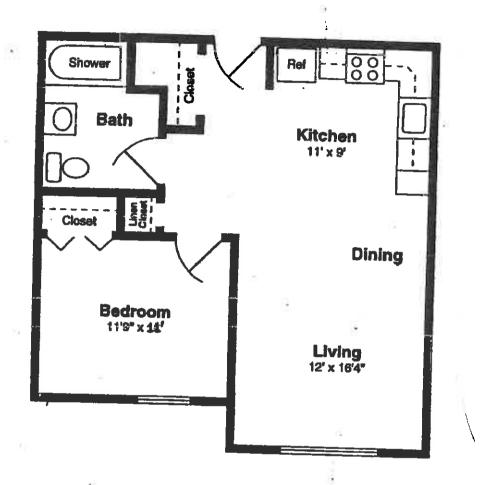
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