LOTTERY APPLICATION DEADLINE IS MAY 24, 2024

***LOTTERY DATE: June 10, 2024, LOCATION: 57 RT. 6, SUITE 207 BALDWIN PLACE, NY - A LINK
TO VIEW THE LOTTERY WILL BE PROVIDED***

MAILED APPLICATIONS MUST BE POSTMARKED BY THE APPLICATION DEADLINE DATE



The Woods at Pawling 1-5 Castagna Drive Pawling, NY

Send application by mail only to:

C/O Kearney Realty & Development Group

57 Route 6, Suite 207

Baldwin Place, NY 10505

Phone: 845-306-7705

1. APPLICANT INFORMATION:

KEARNEY

G R O U P

Name:			
Address:			Apt#:
City:		State:	Zip:
Home Phone:	Cell Phone:	Work Phone:	
SSN/Taxpayer ID#:	N/Taxpayer ID#:DOB:		ncome:
Email:			
2. CO-APPLICANT INFORMA	ATION:		
Name:			
City:		State:	Zip:
Home Phone:	Cell Phone:	Cell Phone: Work Phone:	
SSN/Taxpayer ID #:	DOB:Gross Annual Incom		ncome:
Email:			
	S WHO WILL LIVE WITH YOU,		
FULL NAME	RELATIONSHIP D	.O.B. Full Time Stud	ent? Employed Y or N
a	Head of Household	/ / Y or N	I UI IN

. (<u>(</u>	Include overtime pay, cor HOUSEHOLD MEMBER	DF INCOME: ocial security, SSI, pensions, e-giving, alimony, annuities, source	s and/or self-em s wo disability compe	sployed earnings. GROS CURRENT Seekly/ biweekly/ mon seekly/ biweekly/ mon seekly/ biweekly/ mon seekly/ biweekly/ mon	S EARNINGS (Pre-TANTICIPATED othly (circle one) othly (circle one) othly (circle one) othly (circle one) othly (circle one)
. <u>(</u>	HOUSEHOLD MEMBER	EMPLOYER'S NAME/ADDRESS OF INCOME:	\$ and/or self-em	sployed earnings. GROS CURRENT \$ eekly/ biweekly/ mon \$ eekly/ biweekly/ mon \$ eekly/ biweekly/ mon	S EARNINGS (Pre-TANTICIPATED thly (circle one) thly (circle one)
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L I	nclude overtime pay, cor HOUSEHOLD MEMBER	employer's NAME/ADDRESS	es and/or self-em	iployed earnings. GROS CURRENT	S EARNINGS (Pre-1 ANTICIPATED
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l I	include overtime pay, cor	mmissions, fees, tips, bonuse	, , ,	ployed earnings.	
. <u>l</u>					
	INCOME:				
\		1onthly Rent \$			
. <u>I</u>	RENT:				
•	-	ole accommodation for anoth			
		Please note that			ne bedroom size wait
If <i>YE</i> .	<i>S</i> , EXPLAIN:				
Do yo	ou expect any change	(s) in your family size?		YES	NO
			//	Y or N	
			//	Y or N	
			//	Y or N	
				Y or N	
			//		













o you file Ind ease list tota his differs fr <u>HOUS</u> <u>Checki</u>	come Tax Returns? □ `al household income from the current year, pl	Yes □ No om the previous year: \$_	Weekly	y/ biweekly/ monthly (circle on
ease list tota his differs fr HOUS	al household income fro	om the previous year: \$_		
his differs fr HOUS				
<u>Checki</u>				
	SEHOLD ASSETS:			
	ing Accounts:			
_		Acct. No.:		Amt.:
Bank:				Amt.:
		Passbook/Statement and Cl		
Bank: _		Acct. No.:		Amt.:
				Amt.:
	cates of Deposit (CD's			
Bank: _		Acct. No.:		Amt.:
				Amt.:
				Amt.:
	ments:			
Name:		Amt.:	Ac	idress
				ue):
		rust, mutual funds, who		
	,	,		
es the applic	ant or co-applicant NOW	own real estate:	YES	NO
If "yes"	, what is the value:	_		
Has the	applicant or co-applicant	t EVER owned real estate?	YES	NO
	, when?			
,	,	Disposal of A	ecate	
		Disposal of A	33013	
lave vou disn	osed of any assets in the	last 2 years (Example: Giv	en away money to	o relatives, set up trust accounts)?
Yes □ No	0	- Table 2 yours (Example: Olv		- Tolalivoo, oot ap il aot aoooanio).
yes, describe				
ate of dispos mount Dispo		<u> </u>		
•		Labovo (ovaludina naracra	I proportu\2 =	Voc. ¬ No
o you have a	any other assets not listed	l above (excluding persona	iproperty):	Yes □ No



If yes, pl	ease list:		
	Student Status		
	LI of the persons in the household be or have been full time students during five calendar mor obe in the next calendar year at an education institution with regular faculty and students? □		s yea □ No
IF YES, A	NSWER THE FOLLOWING QUESTIONS:		
Are any	full-time students(s) married and filing a joint tax return?	□ Yes	□ No
Are any Partners	student(s) enrolled in a job training program receiving assistance under the Job Training	Yes	No
	full-time student(s) a TANF or a title IV recipient?		
Are any	full-time student(s) a single parent living with his/her minor child who is not a dependent on	Yes	No
	s tax return? tudent previously a foster child?	Yes	No
vvas a s	tudent previously a loster child:	Yes	No
	Website/ Internet On-line Version?		site
	Church/ Synagogue (Identify):		
	Community Organization (Identify):		
	Housing Action Council		
	Other (Identify):		
	OCUMENTATION – This information for household members 18+ will be e of interview.	<u>require</u>	ed a
2	2022 & 2023 W2's and Federal Tax Returns with all Schedules		
6	Weeks of the Most Recent Pay Stubs & documentation on any other source of income, e.g., so pension, disability, annuity payments	ocial secu	rity,
6	Months of all Bank, Credit Union, and Investment Statements (all pages)		
М			
	ost Recent Retirement Fund Account Statements (e.g. 403b, 401k)		

DOCUMENTATION OF INCOME AND ASSETS WILL BE REQUESTED AFTER THE LOTTERY FOR QUALIFICATION PURPOSES

11.	STATISTICAL INFORMATION					
a.	Urban Development (HUD) may determine the de	e following information is required for statistical purposes so that the Department of H pan Development (HUD) may determine the degree to which its programs are utilized l different racial & ethnic backgrounds. This information is optional.				
	RACIAL GROUP IDENTIFICATION: Used for statistic group for the head of household only). White		•			
	Black or African American	American Indian or Alaska Native & White Asian & White				
	Asian	Black or African American & White				
	American Indian or Alaska Native					
	Native Hawaiian or Other Pacific Islander					
	Native Hawalian Of Other Facilic Islander		Prefer Not to Answer			
b.	ETHNICITY : (check only one from this group)	Hispanic	_ Non-Hispanic	Prefer Not to Answer		
12.	ACCESSIBLITY/ADAPTABILITY:					
A.	Would any household member benefit from s	special features of a	n accessible ap	artment?		
	Check all that apply:Wheelchair accessible?	Hearing Impaired	d?Visually I	mpaired?		
В.	Are any members of this household physicall or have traumatic brain injury?	y disabled	Yes	No		
C.	Do any members of this household have a ps	ychiatric disability?	Yes 🗌 l	No		

CONSUMER CREDIT INFORMATION













credit bureau or other investigative agencies employed by such, to investigate references, or statements or other data obtained from me or from any person pertaining to my employment history, credit, prior tenancies, character, general reputation, personal characteristics and mode of living, to obtain a consumer report and such other credit information which may result thereby, and to disclose and furnish such information to the organizations listed above, to the owner, and to agencies that made or will make funding available in connection with this property listed above in support of this application. I have been advised that I have the right, under 606B of the Fair Credit Reporting Act, to make a written request, within a reasonable time, for a complete and accurate disclosure of the nature and scope of any investigation. **Applicant Signature** Date **Co-Applicant Signature** Date I (WE) DECLARE THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. WARNING: WILLFUL FALSE STATEMENTS OR MISREPRESENTATIONS ARE A CRIMINAL OFFENSE. Applicant Signature Date **Co-Applicant Signature** Date Please do not write below this line. For Management purposes only Date application received _____ Time application received _____ Artist Certification verified _____ Need for accessible Unit verified AMI % _____ Income Limit Household Income Rent

I/ We hereby authorize Housing Action Council and Kearney Realty & Development to use any consumer reporting agency,











