

# Schermerhorn House

## Application



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All information obtained is confidential and will be used for application review purposes only. Schermerhorn House maintains a firm commitment to equal opportunity for all applicants. Schermerhorn House does not discriminate based on race, sex, age, color, national origin, religion, sexual orientation, HIV status, or disability.



# Schermerhorn House

sponsored by  
**The Actors Fund and Common Ground Community**

Dear Applicant,

Thank you for your interest in Schermerhorn House!

The Actors Fund and Common Ground Community, in response to the need for housing targeted toward entertainment professionals and individuals with special needs, have joined forces to develop this unique, 217-unit residence for single adults in the heart of downtown Brooklyn. 100 of the studio apartments will be available for individuals affiliated with the performing arts & entertainment industry, and the remaining units will house formerly homeless individuals living with HIV/AIDS or mental health needs.

Each apartment is newly constructed, and has a private bath and kitchen. The building offers full amenities that includes a 24/7 security staff, coin-op laundry facility, fitness room, computer lab, and numerous indoor and outdoor spaces for relaxation, including a rooftop garden. Schermerhorn House will also have a 2,000 square foot state-of-the-art performance space and multipurpose room. Residents and community arts organizations may use this space for rehearsals, performances, films, and exhibitions, enriching the vibrant and growing Brooklyn arts culture.

In addition to these amenities, all residents will have access to on-site social services, and the opportunity to participate in a variety of regular programs. Such programs may include workshops on preventative health care and financial management / career development, support groups for chemical dependency, and art therapy classes, amongst many others. Social gatherings, holiday celebrations, and other special events will also take place throughout the year.

Before filling out the enclosed application for housing at Schermerhorn House, please note the following requirements and procedures:

## ELIGIBILITY

Eligibility is based on the Federal Low Income Housing Tax Credit guidelines.

**The rent, household size, studio size and income distribution for these apartments is as follows:**

<b>Apartments Available</b>	<b>Apartment Size</b>	<b>Household Size</b>	<b>Monthly* Rent</b>	<b>Total Annual** Income Range Minimum-Maximum</b>
<b>100</b>	<b>Studio (266 sq. ft)</b>	<b>1</b>	<b>\$635</b>	<b>\$21,770 - \$32,280</b>

\* Includes Heat & Electric

\*\* If your income is less than the minimum requirements listed above, you must have a rental subsidy (such as Section 8) to qualify. You will be required to submit proof of your rental subsidy (e.g. Rent Breakdown Letter or a copy of your voucher) at the time of interview.

- Assets must be evaluated in determining eligibility. Assets do not include personal property such as furniture, automobiles, and clothing.
- **Full-time students are not eligible for residency.**
- No pets are allowed.

If you do not meet the income requirements and do not have a rental subsidy **DO NOT FILL OUT THIS APPLICATION**. If you are receiving services from the HIV/AIDS Services (HASA) or are currently street homeless, you may contact our social service partner, CUCS at (212) 768-1570 for information on how you may be eligible. If you are in a shelter or receiving services from the Office of Mental Health, please contact the CUCS Housing Resource Center at (212) 801-3333 for information on other housing options and assistance with the housing process.

## **THE APPLICATION PROCESS**

**Please review the enclosed application checklist for mailing instructions and documentation requirements.**

If you answered “yes” to question 7 on the application that you require a special accommodation, kindly place a check mark on the outside of the envelope.

Please answer all questions and submit completed application to:

**Common Ground Community  
Central Intake Unit - Schermerhorn  
255 West 43<sup>rd</sup> Street  
New York, NY 10036**

All applications are reviewed for eligibility. Applicants will be notified of their status by mail. Applicants will be asked to participate in at least two interviews. **At the time of the interviews, the Intake Unit will review your financial, credit, housing and employment histories. Please be aware that acceptance for our housing is based on all of these criteria.** A final interview may be conducted in your current residence, if deemed necessary. **AT NO TIME IN THE APPLICATION PROCESS ARE YOU GUARANTEED AN APARTMENT UNTIL YOU HAVE SIGNED A LEASE.**

If you have any questions or experience difficulty completing the forms, please contact the Central Intake Unit at (212) 659-0873.

Good luck in your housing search!

Sincerely,

Common Ground Community  
Central Intake Unit

Please complete all sections and sign the last page. **PLEASE PRINT.**

## CONTACT INFORMATION

1. NAME \_\_\_\_\_  
                    First                                      Middle                                      Last  
1a. Other names (maiden name, stage name, etc.) \_\_\_\_\_
2. STREET ADDRESS \_\_\_\_\_ APT. NO \_\_\_\_\_
3. CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_
4. HOME/CELL PHONE (    ) \_\_\_\_\_ WORK PHONE (    ) \_\_\_\_\_
5. BIRTHDATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender \_\_\_\_\_
6. Are you a fulltime student?  YES  NO (Note: A Full-Time Student is one who attends school at least 5 months out of a year and has full-time student status for those 5 months)
7. Do you require a special accommodation in your residence?  YES  NO  
(If yes, please check which disability applies):  
Mobility impairment  Visual impairment  Hearing impairment   
Please specify the accommodation required: \_\_\_\_\_  
\_\_\_\_\_
8. (A) Are you an employee of the City of New York, the New York City Housing Development Corporation, the New York City Economic Development Corporation, the New York City Housing Authority, or the New York City Health and Hospitals Corporation?  YES  NO  
(If Yes, please identify the agency or entity at which you are employed): Agency/Entity \_\_\_\_\_
- (B) If you answered "yes" to Question 8A above, have you personally had any role or involvement in any process, decision, or approval regarding the housing development that is the subject of this application?  
 YES  NO
- NOTE:** If you answered 'Yes' to Question 8A above, you may be required to submit a statement from your employer that your application does not create a conflict of interest. If you answered 'Yes' to Question 8B above, you will be required to submit a statement from your employer that your application does not create a conflict of interest. Such statement would not be required until later in the application process, after you have been selected through the lottery, when you will also be required to provide other documents to verify your income and eligibility.
9. Do you work in the performing arts and entertainment industry?  YES  NO (If yes, please describe your employment): \_\_\_\_\_  
\_\_\_\_\_
10. Are you a former resident of 20 Henry Street in Brooklyn?  YES  NO

## HOUSING STATUS

11. Present landlord \_\_\_\_\_ Phone (    ) \_\_\_\_\_
12. Landlord's address \_\_\_\_\_
13. Is your apartment leased directly to you?  YES  NO
14. Monthly rent \$ \_\_\_\_\_ 13. Does your rent include electric?  YES  NO
15. Avg. utility bill \$ \_\_\_\_\_
16. Is your rent subsidized?  YES  NO If yes, by whom? \_\_\_\_\_

17. How long have you lived at this address? \_\_\_\_\_ Years \_\_\_\_\_ Months

18. PLEASE LIST YOUR LAST THREE RESIDENCES STARTING WITH THE MOST CURRENT:

PREVIOUS ADDRESS	RENT AMT	DATE OF RESIDENCY	WHY DID YOU MOVE?
		FROM	
		TO	
PREVIOUS ADDRESS	RENT AMT	DATE OF RESIDENCY	WHY DID YOU MOVE?
		FROM	
		TO	
PREVIOUS ADDRESS	RENT AMT	DATE OF RESIDENCY	WHY DID YOU MOVE?
		FROM	
		TO	

19. What is your current annual income? \_\_\_\_\_

20. What was your total income from last year's federal tax return? \_\_\_\_\_

**Note:** A copy of your most recent federal tax return (1040) must be enclosed with your application.

**EMPLOYMENT HISTORY**

21. List all full- and/or part-time jobs worked during the last five years, including self-employment and/or freelance income. List your current/most recent job first.

DATE	EMPLOYER	POSITION	SALARY	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

**OTHER CURRENT SOURCES OF INCOME**

22. List other income that you currently receive, such as public assistance, Social Security, Supplemental Security Income, pension, disability, unemployment compensation, alimony, child support, Armed Forces Reserves, and/or grants.

TYPE OF INCOME	AMOUNT
1)	\$ _____ per _____
2)	\$ _____ per _____
3)	\$ _____ per _____

**ASSETS**

23. Complete each category as applicable, and attach statements for each account listed.

TYPE	BANK NAME	AMOUNT
CHECKING		
SAVINGS/PASSBOOK		
MONEY MARKET/TRUSTS		
CREDIT UNION SHARES		
CDs		
IRAs/ RETIREMENT ACCTs		
STOCKS/BONDS		

24. Do you own any real estate?  YES  NO If yes: What is the current market value? \_\_\_\_\_  
 What is the value less any mortgage or lien? \_\_\_\_\_  
 Do you receive any rent from tenant(s) living at this property?  YES  NO  
 If yes, how much? \_\_\_\_\_

**GENERAL QUESTIONNAIRE**

25. Have you ever been evicted?  YES  NO If yes, when? \_\_\_\_\_  
 Briefly explain circumstances: \_\_\_\_\_

26. Have you ever filed for personal bankruptcy?  YES  NO If yes, when? \_\_\_\_\_  
 Briefly explain circumstances: \_\_\_\_\_

27. Have you ever been convicted of a felony?  YES  NO If yes, when? \_\_\_\_\_  
 Briefly explain circumstances: \_\_\_\_\_

28. How did you hear about Schermerhorn House? \_\_\_\_\_  
 \_\_\_\_\_

29. Please list the names and phone numbers of two individuals, other than family members, whom we may call for personal reference:

\_\_\_\_\_  
 Name Phone Number

\_\_\_\_\_  
 Name Phone Number

I hereby affirm that, to the best of my knowledge, the foregoing information is true, accurate and complete. I understand that misleading or false statements, misrepresentations, or incomplete information in this application will be grounds for rejection. I authorize The Schermerhorn Property Management to contact my agencies, offices, other groups or organizations to obtain any information or materials deemed necessary to process my application, including verifying my credit worthiness.

\_\_\_\_\_  
 APPLICANT'S SIGNATURE DATE

# SCHERMERHORN HOUSE

## APPLICATION CHECKLIST

This is a checklist that you can use to ensure that you are submitting a complete application. ***Incomplete applications will not be processed.*** All applicable forms and/or documents must be submitted.

### 1. THE APPLICATION

Please fill out completely, sign, date.

Return to: **Common Ground Community  
Central Intake Unit - Schermerhorn  
255 West 43<sup>rd</sup> Street  
New York, NY 10036**

### 2. RECENT PAY STUBS

If you are working, please include copies of your last six pay stubs with year-to- date totals.

### 3. VERIFICATION OF SOCIAL SECURITY BENEFITS

If you receive SSA, SSI, or SSD, please provide a current award letter (you can request one from your local social security office). **The letter must be dated within the last 90 days.**

### 4. VERIFICATION OF PENSION AND ANNUITIES

If you receive a pension or annuities, please provide documentation of the monthly or yearly amount in a letter **dated within the last 90 days.**

### 5. COPY OF YOUR most recent FEDERAL TAX RETURNS

Please enclose a copy of your most recent Federal tax return (Form 1040). If you are a performer or freelance artist, you must also include the two prior year's returns. If you did not file Federal tax returns and are not exempt from doing so, please contact the nearest IRS office for assistance. Your state tax returns are not needed.

### 6. STATEMENT(S) OF ASSETS

Please provide copies of documentation of the accounts you listed in the application. **All statements must be dated within the last 90 days.**

**PLEASE RETURN ALL INFORMATION AND FORMS WITH YOUR  
COMPLETED APPLICATION.**