

**Dear Future Tenant,**

Thank you for applying to live in an INHS property in Tompkins County (including Trumansburg and Ithaca). Please take a few minutes to read over the instructions regarding filling out and returning our waiting list applications. We hope that you will soon be calling our apartments your new home. Should you have any questions or concerns please give us a call at 607.277.4500 and we will be happy to assist. All interested individuals have the right to complete and submit an application.

**FILLING OUT THE APPLICATION:**

Each household must complete a Waiting List Application to be on our waitlist. Included in this cover letter is information regarding the policies of our apartment community regarding eligibility and our procedures for selecting residents. More information is contained in our office, which is available from management upon request.

When completing the Waiting List Application packet be sure to fill it out in its entirety to the best of your knowledge. Please do not leave any blank spaces if a question does not apply to you, please write "NO" or "None" in those spaces. **If you make a mistake, do not use white out, please cross it out with ONE LINE and initial next to the item, this is to show you corrected it.**

All adult household members must sign and date the Application and any other form applicable.

If you need assistance in completing the application, we are happy to help you.

We provide reasonable accommodation for persons with disabilities in completing our application documents or returning our application to us.

We support the federal protections in Violence Against Women Act (VAWA) during application and tenancy. Please let us know if you would like more information regarding VAWA.

You can deliver your completed, signed and dated application personally, via mail, email or fax to the property.

Once our office has received your application the Manager will review it and determine eligibility.

Please be advised if any incomplete information will make your application un-eligible for our waitlist and you will receive a letter explaining any items still needed to complete the application.

If your application is complete, you will be placed on our waitlist and you will receive a letter stating what day and time it was received as well as how long your anticipated wait may be.

Once you have been contacted by the manager and have accepted a unit, we will perform the background screening. At that time If you pass our screening, you will be contacted to schedule an appointment to come to the office to finalize your application within 48 hrs.

During this appointment we will start the certification process to verify all income/assets and expenses to be sure you qualify financially to reside at Ithaca City Apartments. All household members are expected to provide all required documentation.



All adult household members (anyone over 18) must come for all interviews as you will each be required to sign documents. Please bring with you, current picture ID and original social security card for everyone living in the home.

You will be asked to provide proof of income, assets and/or expenses for ALL household members.

A final decision regarding eligibility cannot be made until we have all the above information, and it has been verified. Once you have passed all the screening requirements and an apartment is available that meets your needs you will be notified to start the move in process.

#### **THE MOVE-IN:**

Once we have all the required documents and there is a unit that meets your needs, you will be provided with a move in date for your new home.

Payment of the full security deposit will be requested at this time. The security deposit must be paid in full at time of move in.

We will pro-rate your rent if your move in date is after the 1<sup>st</sup> of the month.

You will be required to sign a lease for 1 year among other documents.

On your move in day, you will accompany the manager to conduct a walk-thru of your new home and receive your keys.

If you have any questions regarding completing the application, the property or a copy of the Tenant Selection Plan please do not hesitate to call us.

**Submit completed application in person, mail, fax or online to: 115 West Clinton St, Ithaca, NY 14850. M-F 9 AM – 5 PM. Fax – 607-277-4536, Online Submissions - <https://www.ithacanhs.org/rentwithINHS>**



# Ithaca Area Properties

## Beverly J. Martin Elementary

- Cedar Creek - 310 Floral Ave.
- Breckenridge Place - 100 W. Seneca St.
- 210 Hancock - 210 Hancock St.
- Stone Quarry Apartments - 400 Spencer Rd.
- Founders Way – 320 W Buffalo St

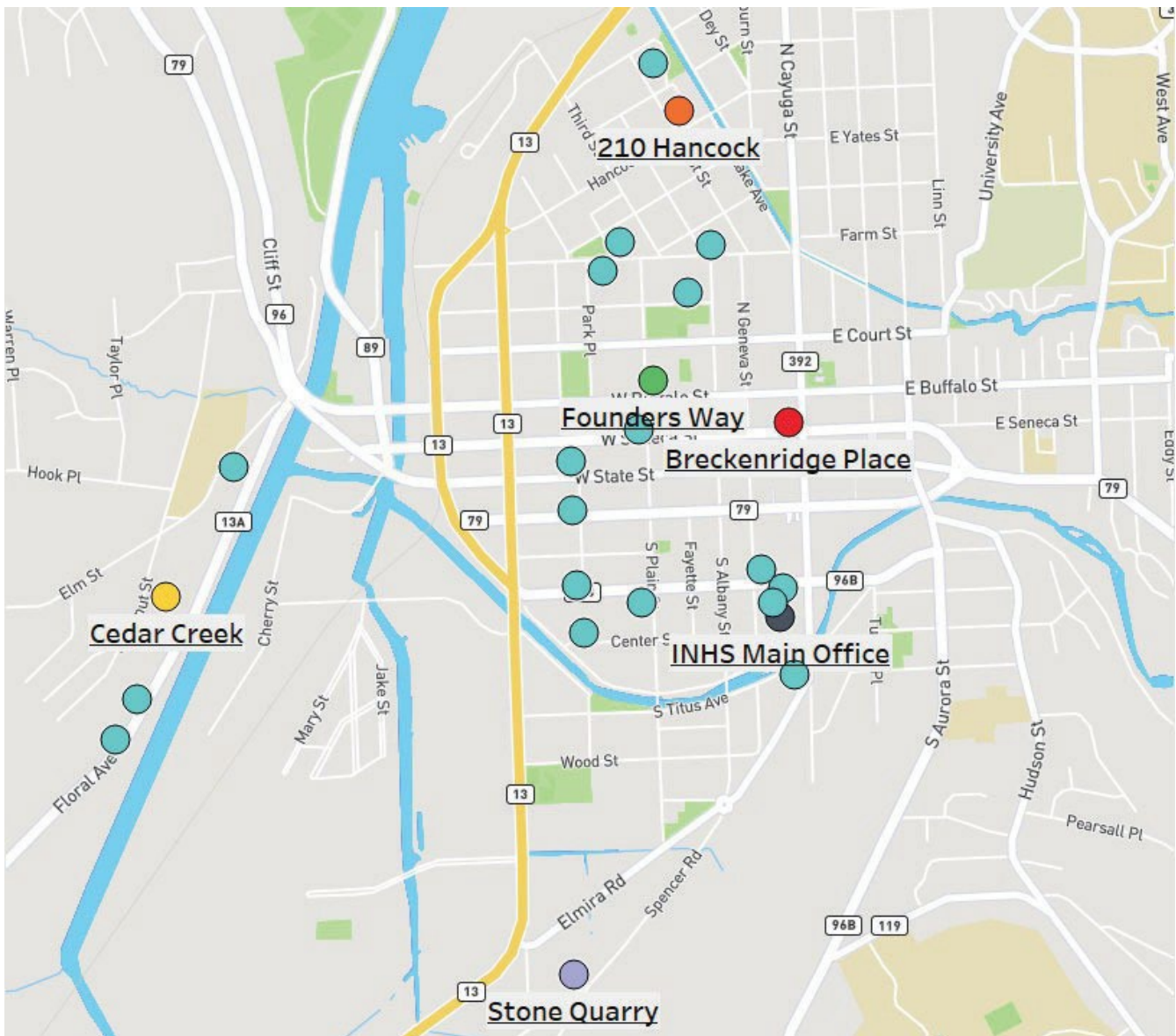
## Fall Creek Elementary

- Stone Quarry Apartments - 400 Spencer Rd.

## Cayuga Heights Elementary – various downtown properties

## Belle Sherman Elementary – various downtown properties

## South Hill Elementary – Stone Quarry Apartments - 400 Spencer Rd.



Office Use Only  
Initial, Date and Time of  
Received

# Tenant Application

City of Ithaca Properties

- 0 Studio
- 1 Bedroom
- 2 Bedroom
- 3 Bedroom
- 4 Bedroom

I am applying for **ALL\*** INHS properties:  Yes  No

\*If there are properties you are **not** interested in based on location (see map), list them below:

## Household Information

Head of Household Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_ Phone (primary) \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Phone (secondary) \_\_\_\_\_

**Additional Household Members** - All adults must sign this application and provide identification. List everyone that will reside in the apartment with you.

Name	Relationship to You	Social Security #	Date of Birth

Will all current household members be residing with you?  Yes  No

Marital Status? \_\_\_\_\_

Do you receive Rental Subsidy or Section 8?  Yes  No

If yes, with which agency: \_\_\_\_\_

Are you or another member of your household legally required to be a lifetime registrant on the state sex offender registry?

Yes  No

Have you or another member of your household ever been convicted of producing methamphetamine in your home?

Yes  No

Do you receive services from any service providers such as Unity House, Catholic Charities, Advocacy Center, Lakeview, Learning Web, VA, ARC/MOZIAC, or OPWDD agency?

Yes  No If yes, what agency: \_\_\_\_\_

Will ALL of the people in your household be or have been full-time students during five (5) calendar months of this calendar year or plan to be during the next 12 months?

Yes  No

If you answered YES to the question above, is anyone in your household:

- Yes  No A full time student married and filing a joint tax return?
- Yes  No A full time student enrolled in a job-training program?
- Yes  No A full time student and Title IV/TANF recipient?

- Yes    No   A full time student formerly in foster care?  
 Yes    No   A full time student living with his/her minor child who is not a Dependent on another individual's tax return (other than a parent of the child)?

**Income**

Income Source	Applicant #1 Amount	Applicant #2 Amount
Gross Employment		
Public Assistance (DSS)		
Social Security / SSI / SSP		
IRA / Pension / Annuity Payments		
Veterans Benefits		
Unemployment		
Alimony / Child Support		
Self-Employment		
Cash or Gift Contributions		
Other Income		
<b>TOTAL MONTHLY INCOME:</b>		

**Assets**

Asset	Applicant #1 Amount	Applicant #2 Amount
Checking Account		
Savings Account		
Certificates of Deposit		
Stocks, Bonds, or Mutual Funds		
Trust Account		
Real Estate		
Life Insurance		
Direct Express/Debit Card/Payment Apps		
Any Other Assets (please list)		

**Other Information**

**Will you or anyone in your household benefit from a unit that is modified to accommodate persons with hearing/visual impairments or mobility impairments?**    Yes    No

If Yes, what type of impairment       Hearing/Visual     Mobility

If someone would benefit, which household member? \_\_\_\_\_

**Do members of your household require reasonable accommodation including a service or companion animal?**    Yes    No      If yes, explain: \_\_\_\_\_

**Race** (Check all that apply)

- White       Black/African American       American Indian/Alaskan Native  
 Native Hawaiian/Pacific Islander    Asian       Other     Prefer Not to Answer

**Ethnicity:**    Hispanic or Latino     Not Hispanic or Latino     Prefer Not to Answer

**Our buildings are non-smoking buildings. If you are accepted for residency, do you agree to adhere to our nonsmoking policy?**    Yes     No

**How did you hear about us?** \_\_\_\_\_

