

**PALACE VIEW HOUSING LIMITED PARTNERSHIP**  
**132 MAIN STREET~ DANBURY, CT 06810**  
**TELEPHONE 203-778-5502~ FAX 203-778-5510**

Dear Prospective Resident:

Thank you for your interest in Palace View Senior Housing located at 132 Main Street, Danbury, Connecticut. The following information is needed in order to process your application properly and in a timely manner.

1. **The application must be filled out completely. Any area left blank will delay the processing of your application. Applications will be considered in accordance with current income guidelines and a complete credit and criminal check.**
2. **The following must be submitted for each person listed on the application:**
  - Copy of Social Security Card
  - Copy of Government Photo ID (ex. driver's license, passport, etc.)
  - Copy of Social Security Benefit Letter

Typical Rental Rates:

- 1 Bedroom, 1 Bathroom –Typical rent - \$950.00 (No additional subsidies are offered)
  - Utilities (Gas, Electric, Telephone, Cable) are not included
- Security Deposit 1 month's rent

*\*Rental rates are subject to change as of **January 1, 2024***

The following procedures for applicant selection are based on Federal Fair Housing Practices.

1. The **GROSS** annual income of the applicant(s) must meet the US Department of Housing Urban Development criteria for the appropriate household size:

INCOME LIMITS	1 PERSON	2 PERSON
25%	24,025	27,450
40%	38,440	43,920
60%	57,660	65,880

2. The apartment at Palace View Senior Housing must be the applicant(s) only place of residence.

**When you have completed the application, please call the office for an appointment to bring it in.** Applications will be considered in order of receipt. Currently we have a waiting list, though we welcome you to submit your application to the above address.

Thank you for your interest in Palace View Senior Housing.

Yours truly,

Palace View Housing Limited Partnership  
NP Rental & Management, LLC

# **APPLICATION FOR HOUSING**

Low-Income Housing Tax Credit Property

**Please Print Clearly**

This is an application for housing at:	<b>Project:</b> Palace View Senior Housing
	<b>Address:</b> 132 Main Street
	Danbury, CT 06810
Please complete this application and return to:	<b>Name:</b> Palace View Senior Housing
	<b>Address:</b> 132 Main Street
	Danbury, CT 06810

Applications are placed in order of date and time received. An applicant may be interviewed only after the receipt of this tenant application.

## **A. GENERAL INFORMATION**

Applicant Name(s): \_\_\_\_\_

Address: \_\_\_\_\_  
Street Apt.# City State ZIP

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

No. of BR's in current unit: \_\_\_\_\_ Do you ☐ RENT or ☐ OWN (check one)

Amount of current monthly rental or mortgage payment: \$ \_\_\_\_\_

If owned, do you receive monthly rental income from property? ☐ Yes ☐ No (check one)

Check utilities paid by you: ☐ Heat ☐ Electricity ☐ Gas ☐ Other (specify)

Approximate monthly cost of utilities paid by you (excluding phone and cable TV): \$ \_\_\_\_\_

Bedroom size requested: ☐ Studio ☐ One BR ☐ Two BR ☐ Three BR ☐ Handicap BR

### C. INCOME

List ALL sources of income as requested below. If a section doesn't apply, cross out or write NA.

Household Member Name	Source of Income	Gross Monthly Amount
	Social Security	\$
	Social Security	\$
	Social Security	\$
		\$
	SSI Benefits	\$
	SSI Benefits	\$
	SSI Benefits	\$
	Pension (list source)	\$
	Pension (list source)	\$
	Veteran's Benefits (list claim #)	\$
	Veteran's Benefits (list claim #)	\$
	Unemployment Compensation	\$
	Unemployment Compensation	\$
	Public Assistance (Title IV/TANF etc.)	\$
	Contributions to the Household (monetary or not)	\$
	Full-Time Student Income (18 & Over Only)	\$
	Financial Aid (excluding loans)	\$
	Annuities (list sources)	\$
		\$
	Long Term Medical Care Insurance Payments in excess of \$180/day	\$
	Scheduled Payments from Investments	\$

**D. ASSETS**

If your assets are too numerous to list here, please request an additional form.

If a section doesn't apply, cross out or write NA.

Checking Accounts	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
Savings Accounts	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
Trust Account	#	Bank	Balance \$	
Direct Deposit Cards For SS, SSI, SSP, TANF, Child Support, Work	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
Certificates of Deposit	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
	#	Bank	Balance \$	
Money Market Accounts	#	Bank	Balance \$	
	#	Bank	Balance \$	
Savings Bonds	#	Maturity Date	Value \$	
	#	Maturity Date	Value \$	
	#	Maturity Date	Value \$	
Life Insurance Policy	#		Cash Value \$	
Life Insurance Policy	#		Cash Value \$	
Mutual Funds	Name:	#Shares:	Interest or Dividend \$	Value \$
	Name:	#Shares:	Interest or Dividend \$	Value \$
	Name:	#Shares:	Interest or Dividend \$	Value \$
Stocks	Name:	#Shares:	Dividend Paid \$	Value \$
	Name:	#Shares:	Dividend Paid \$	Value \$
	Name:	#Shares:	Dividend Paid \$	Value \$
Bonds	Name:	#Shares:	Interest or Dividend \$	Value \$
	Name:	#Shares:	Interest or Dividend \$	Value \$

Application

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Have you or any member of your family ever been evicted from any housing?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, describe</i>				
Have you ever filed for bankruptcy?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, describe</i>				
Will you take an apartment when one is available?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Briefly describe your reasons for applying:</i>				

#### F. REFERENCE INFORMATION

Current Landlord	Name:	
	Address:	
	Home Phone:	
	Bus. Phone:	
	How Long?	
Prior Landlord	Name:	
	Address:	
	Home Phone:	
	Bus. Phone:	
	How Long?	
Credit Reference #1:		
Address:		
Account #:		Phone #:
Credit Reference #2:		
Address:		
Account #:		Phone #:
Credit Reference #3:		
Address:		
Account #:		Phone #:
Personal Reference #1:		
Address:		
Relationship:		Phone #:

Certifications/Authorizations

I/We certify that the apartment to be rented will be my/our permanent residence, and I/we do not/will not maintain a separate subsidized rental unit in a different location.

I/We understand that this is a preliminary application and in no way ensures occupancy.

I/We certify that all information given in this application is true and I/we understand that false statements or information are punishable by Law and will lead to cancellation of this application or termination of tenancy after occupancy.

I/We understand that my/our eligibility for housing is based on the Income and Occupancy regulations of the Low Income Housing Tax Credit Program (LIHTC), and the tenant selection criteria of PALACE VIEW SENIOR HOUSING.

I/we understand that a Security Deposit is required for the apartment prior to occupancy.

As witnessed by my/our signature(s) below, PALACE VIEW SENIOR HOUSING and/or its employees and/or agents are authorized to verify all income and expenses from any and all sources for the purpose of determining eligibility for occupancy, or re-certification of eligibility on an annual basis should I/we be accepted for occupancy. PALACE VIEW SENIOR HOUSING is also authorized to contact credit reporting agencies and search other public records to assist in the determination of creditworthiness, repayment ability and other tenant selection criteria.

PALACE VIEW SENIOR HOUSING may photocopy this release/authorization and attach it to verification/credit report requests.

I/we hereby authorize PALACE VIEW SENIOR HOUSING, its subsidiaries, affiliates, employees and agents, to make inquiry and request information from any individuals, credit bureaus, criminal investigation bureaus, and any other entities that may possess information concerning me, regarding my character, general reputation, personal characteristics, and mode of living. I also authorize the above described sources to release all information requested, and hereby release those sources from any liability for doing so.

X \_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Co-Applicant's Signature

Date: X \_\_\_\_\_

Date: \_\_\_\_\_