

City of White Plains Affordable Rental Housing Program Annual Recertification Form



CONTACT INFORMATION & RESIDENCY

Provide name, address, telephone numbers and e-mail of person principally responsible for this application:

First Name:

Middle Initial:

Last Name:

Address:

Apt. #

City:

State:

ZIP Code:

Cell Phone:

Work Phone:

Home Phone:

E-mail Address:

DEMOGRAPHIC PROFILE (optional)

Notice: Providing demographic information is optional and is not a required component of the application process. Responses to the demographic profile will not be used in any way to determine eligibility for an affordable housing rental apartment. The demographic profile is used to help the City of White Plains ensure that the Affordable Rental Housing Program is providing fair housing and equal opportunity to all.

Directions: Answer **both** Part A and Part B for the principal applicant of this application. For Part A, please provide only one response for ethnicity and for Part B, please provide response(s) for all racial categories that pertain to you:

Part A

Ethnic
Categories:

Hispanic or Latino

Not-Hispanic or
Latino

Part B

Racial
Categories:

American Indian or Alaska Native

American Indian/Alaskan Native
and Black/African American

American Indian/Alaska Native
and White

Asian

Asian and White

Black or African American

Black or African American and
White

Native Hawaiian or Other Pacific
Islander

White

Other Multi-Racial

Directions: Please check all categories that pertain to the principal applicant of this application:

Are You: Female Head of Household
 Person with Disabilities
 Homeless
 62 years or older

OCCUPANCY, EMPLOYMENT AND INCOME

1. List the name(s) for all persons who will reside in the affordable housing rental unit.
2. Provide employment information for *each* person(s) 18 years or older (if retired, please enter former employment information).
3. Provide the gross annual income for **all** person(s) 18 years or older who will reside in the apartment.
4. List annual salary/wages separately from other income such as alimony, child support, SSI, SSD, pension, investment income, dividends, etc.
5. List income information from part-time employment of children attending school full-time. It will not be calculated in the gross annual income for purposes of determining eligibility under the White Plains Affordable Rental Housing Program.

Name: _____ Relationship: _____
DOB: Employer: _____
Employer
Address: _____
City: _____ State: _____ ZIP Code: _____
Retired: Yes Salary/Wages: _____ Other Income: _____
 No

Name: _____ Relationship: _____
DOB: Employer: _____
Employer
Address: _____
City: _____ State: _____ ZIP Code: _____
Retired: Yes Salary/Wages: _____ Other Income: _____
 No

Name: _____ Relationship: _____
DOB: Employer: _____

Employer
Address:

City: State: ZIP Code:

Retired: Yes Salary/Wages: Other Income:
No

Name: Relationship:

DOB: Employer:

Employer
Address:

City: State: ZIP Code:

Retired: Yes Salary/Wages: Other Income:
No

Add a separate sheet to report additional names, annual incomes, and employment information, if needed.

ADDITIONAL QUESTIONS

How did you hear about the White Plains Affordable Rental Housing Program? Please check all that apply

City of White Plains Website

Internet Search

Friend or Family Member

Housing Counseling Agency

Apartment Management Company

Real Estate Agency

Other

Do you have any pets?

Yes

No

Do you receive a pension(s)?

Yes

No

SUPPORTING DOCUMENTATION

For *each* person 18 years and older who will reside in the apartment:

1. Federal and State Income Tax Returns
2. Copy of forms reporting unearned income (child support, alimony, SSI, SSD, investment income, dividends, etc.)
3. Copy of most recent bank statement
4. Copies of last four (4) pay check stubs

5. Copy of Pension Award statement, if applicable
6. Copy of Social Security Statement, if applicable
7. Proof of Residency: Driver's License, or Passport, or Utility Bill, etc.
8. Employment Verification Form (see attachment)

APPLICATIONS WILL NOT BE PROCESSED WITHOUT THE REQUIRED SUPPORTING DOCUMENTS.

CERTIFICATION

I/WE CERTIFY THAT THIS INFORMATION IS COMPLETE AND ACCURATE. I/WE AGREE TO PROVIDE, UPON REQUEST, DOCUMENTATION ON ALL INCOME SOURCES TO THE AFFORDABLE RENTAL HOUSING PROGRAM.

SIGNED:

DATE:

SIGNED:

DATE:

ALL STATEMENTS ARE SUBJECT TO VERIFICATION. MISREPRESENTATIONS OR FALSE STATEMENTS MAY CONSTITUTE CAUSSE FOR DISQUALIFICATION OR EVICTION FROM THE AFFORDABLE HOUSING PROGRAM. PURSUANT TO NY PENAL LAW SECTION 210.45, IT IS A CRIME PUNISHABLE AS A CLASS "A" MISDEMEANOR TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN.

SUBMISSION

E-mail: planning@whiteplainsny.gov
Fax: (914) 422-1301

-OR-

Mail: City of White Plains
Department of Planning
70 Church Street
White Plains, NY 10601

INFORMATION

City of White Plains
Department of Planning
(914) 422-1300



PLANNING DEPARTMENT
70 Church Street, White Plains, New York 10601
(914) 422-1300 Fax: (914) 422-1301
E-Mail: Planning@whiteplainsny.gov

THOMAS M. ROACH
MAYOR

CHRISTOPHER N. GOMEZ, AICP
COMMISSIONER

LINDA K. PUOPLO
DEPUTY COMMISSIONER

Employment Verification Form

Date: _____

Employee's Name: _____

Employer name and address: _____

Employment start date: _____

Job Title: _____

Base Pay Rate: \$ _____ per hour / week / month (circle one)

Average hours worked per week at base pay rate: _____

Overtime pay rate: \$ _____

Total base pay earnings past 12 months: \$ _____

Total overtime earnings past 12 months: \$ _____

Projected pay next twelve months: \$ _____ with overtime: \$ _____

MANAGER / SUPERVISOR / HUMAN RESOURCE - SUPPLYING INFORMATION:

Name

Title

Signature

Telephone

Date



PLANNING DEPARTMENT
70 Church Street, White Plains, New York 10601
(914) 422-1300 Fax: (914) 422-1301
E-Mail: Planning@whiteplainsny.gov

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MANAGER / SUPERVISOR / HUMAN RESOURCE - SUPPLYING INFORMATION:

Name

Title

Signature

Telephone

Date

Table 1: 2019 HUD Income Eligibility

AMI: Area Median Income

Household Income	1 Person	2 People	3 People	4 People	5 People	6 People
30% AMI	\$25,300	\$28,900	\$32,500	\$36,100	\$39,000	\$41,900
50% AMI	\$42,150	\$48,150	\$54,150	\$60,150	\$65,000	\$69,800
60% AMI	\$50,550	\$57,750	\$65,000	\$72,200	\$77,950	\$83,750
80% AMI	\$67,350	\$77,000	\$86,600	\$96,250	\$103,950	\$111,650
100% AMI	\$84,200	\$96,250	\$108,300	\$120,300	\$129,900	\$139,550
		Eligible Income Range: Household income may be up to 100% AMI level, but tenant will likely be over-income at the annual recertification				

Table 2: 2019 HUD Rent Limits

	Studio	1 Bedroom	2 Bedroom	3 Bedroom
100% AMI	\$2,105	\$2,406	\$2,708	\$3,008
80% AMI	\$1,684	\$1,925	\$2,165	\$2,406
60% AMI	\$1,264	\$1,444	\$1,625	\$1,805

The above rents correspond to the household incomes listed in Table 1. The rents are set annually by the Federal government.

If utilities are not included in the rent, there is a reduction in the rent based on a utility allowance that is determined by the Federal government.

CHECKLIST

CHECKLIST - PLEASE SUBMIT ALL REQUESTED DOCUMENTS FOR ALL ADULTS WHO WILL RESIDE IN THE HOUSEHOLD

2018 Federal and State Income Tax Returns (Please do not submit the W2 form)

Copy of Form reporting unearned income (Investment Income, Dividends, Child Support payments, Alimony, SSI, SSD, etc.)

Copy of the most recent Bank Statement

Copies of the last four (4) Paycheck Stubs

Copies of Pension or Social Security Statement, if applicable

Proof of Residency: Drivers License or Cellphone/Telephone Bill or Utility Invoice

Employer Verification Form for each adult residing in the household

Enrollment verification from an accredited college or university for all full time students (a student is full time when 12 or more credits are taken in a single semester)

APPLICATIONS WILL NOT BE PROCESSED WITHOUT ALL OF THE ABOVE DOCUMENTS