**[ALTERNATIVE 1 OF INCOME ELIGIBILITY TABLE – DELETE VERSION THAT YOU ARE NOT USING. Fill in according to the NYS HCR Regulatory Agreement with regard to AMIs, rent ranges, household size, etc.]**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Gwosè Apatman** | **XX%APATMAN KATEGORI REVNI MEDYAN (AMI)** | **# Apatman** | **Lwaye Chak Mwa\*** | **Kantite Moun Ki Nan Kay la** | **Revni Moun Ki Nan Kay la\*\*** | **XX%APATMAN KATEGORI REVNI MEDYAN (AMI)** | **# Apatman** | **Lwaye Chak Mwa\*** | **Kantite Moun Ki Nan Kay la** | **Revni Moun Ki Nan Kay la\*\*** | **XX%APATMAN KATEGORI REVNI MEDYAN (AMI)** | **# Apatman** | **Lwaye Chak Mwa\*** | **Kantite Moun Ki Nan Kay la** | **Revni Moun Ki Nan Kay la\*\*** |
| **Yon Pyès** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |
| **1 CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |
| **2 CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |
|  |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |
| **3 Chanm** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |  |  |  | $XXX.XXX - $XXX,XXX |
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\*Nan lwaye a gen [Insert types of utilities included]. Enstriksyon sou revni & kantite moun ki nan kay la ka chanje.

\*\*Minimòm revni ki mansyone yo pa aplikab pou moun ki fè demann ki gen Seksyon 8 oswa lòt lwaye kalifye ki sou sibvansyon.

**[ALTERNATIVE 2 OF INCOME ELIGIBILITY TABLE – DELETE VERSION THAT YOU ARE NOT USING. Fill in according to the NYS HCR Regulatory Agreement with regard to AMIs, rent ranges, household size, etc.]**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Kategori Revni Medyan (AMI)** | **Gwosè Apatman** | **# Apatman** | **Lwaye Chak Mwa\*** | **Kantite Moun Ki Nan Kay la** | **Revni Moun Ki nan Kay la\*\*** |
| **XX%** | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
| **XX%** | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
| **XX%** | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
| **XX%** | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |
|  | **X CHANM** | XX | $X,XXX |  | $XXX.XXX - $XXX,XXX |

\*Nan lwaye a gen [Insert types of utilities included]. Enstriksyon sou revni & kantite moun ki nan kay la ka chanje.

\*\*Minimòm revni ki mansyone yo pa aplikab pou moun ki fè demann ki gen Seksyon 8 oswa lòt lwaye kalifye ki sou sibvansyon.

|  |
| --- |
| **Delè Pou Fè Demann: DATE XX, XXXX** |
| Dwe fè l sou entènèt oswa, si se pa lapòs, pakè lapòs la nan dat sa a. Voye plis pase 1 demann ka fè w vin pa kalifye ankò. |
| **Fason pou fè yon demann:** |
| **Sou entènèt:** [URL here] **Mande yon Fòmilè Nan Telefòn oswa pa Imel:** [telephone number] [email address] **Pa Lapòs oswa An pèsòn:** [Managing Agent Name] [Address Line 1] [Address Line 2]  Mete adrès ou & non ak adrès batiman kote ou vle al fè demann nan. |
| **Dat & Kote Tiraj la ap fèt: [DATE XX, XXX] [TIME] [LOCATION or livestream URL**] |
| Tiraj la ap montre ki demann yo pral analize pou lokasyon. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **KONN DWA W!** |  |  | **ENFÒMASYON KONSÈNAN AKSÈ** |
| * **Si w te sibi diskriminasyon pou kesyon lojman:** <https://dhr.ny.gov/journey-fair-housing>   oswa rele **844-862-8703**   * Jwenn enfòmasyon sou fason yo pral analize kredi w ak pase w: <https://on.ny.gov/3uLNLw4> | |  | * X apatman yo adapte pou andikap nan domèn deplasman * X apatman yo adapte pou andikap nan domèn deplasman * [CHOOSE ONE & DELETE ENGLISH: All units (Tout apatman yo) OR All ground floor apatman yo (Tout apatman ki nan premye etaj yo)] fèt yon fason pou chèz woulant ka pase * Yo ka mande lojman rezonab ak chanjman * [OTHER] | |

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