



Ithaca Neighborhood HOUSING SERVICES

Dear Applicant,

Thank you for your interest in renting with Ithaca Neighborhood Housing Services

The first thing you need to do is complete this rental interest application. Only fully completed forms will be accepted, do not leave any blank spaces. Please indicate N/A if the question does not apply to you. Return this application with copies of **photo ID*** and **social security card** for each adult 18 years or older.

**If an applicant does not have photo identification or social security card, multiple other forms of identification are acceptable. A primary form of identification such as Sheriff's identification, USCIS White Card, work visa, Green Card, or birth certificate (translated & notarized) may be combined with secondary forms such as health insurance cards, voter identification cards, utility bills, Native American tribal documents, or credit/debit cards.*

Where do I submit my completed form?

In Person or by Mail – INHS-Pine View Circle, 115 West Clinton Street, Ithaca, NY 14850

Fax – 607-277-4536

Online Submissions - <https://ithacanhs.org/uploaddocs/>

How does the interest list work?

Your rental interest application will be processed within 7-10 business days. You will receive your acceptance or denial letter via U.S. Mail. Upon acceptance, you will be added to our interest list on a first come first served basis. As long as you meet the income eligibility requirements, your application will remain on file. You will be contacted bi-annually to ensure we still have your current contact information and that you wish to remain on our waitlist. (If your address and/or phone number changes, please contact our office immediately.)

How quickly will you be able to rent an apartment?

It depends on when a unit becomes available and if you meet the eligibility requirements for that specific unit. We will contact you when an apartment becomes available to see if you are still in need of housing.

How do I qualify for an available rental unit?

If you are interested in the available apartment you will be required to submit additional documentation, we will then conduct a credit and criminal background check and obtain landlord references. If these come back positive, we will third party verify your income and assets. Only approved applicants will be considered to move into an apartment. All denied applicants will receive written notification including the reason for denial.

For additional information about the application process and upcoming availabilities, please call our main office on Clinton Street, Monday through Friday between the hours of 9:00 AM and 5:00 PM (607) 277-4500 and press 1 for our rental department. You may also visit our website at www.ithacanhs.org, for more information.

If you require assistance with filling out the application please call to make an appointment.

We look forward to receiving your application for consideration

Best regards,

Rental Staff

Ithaca Neighborhood Housing Services



Pine View Circle

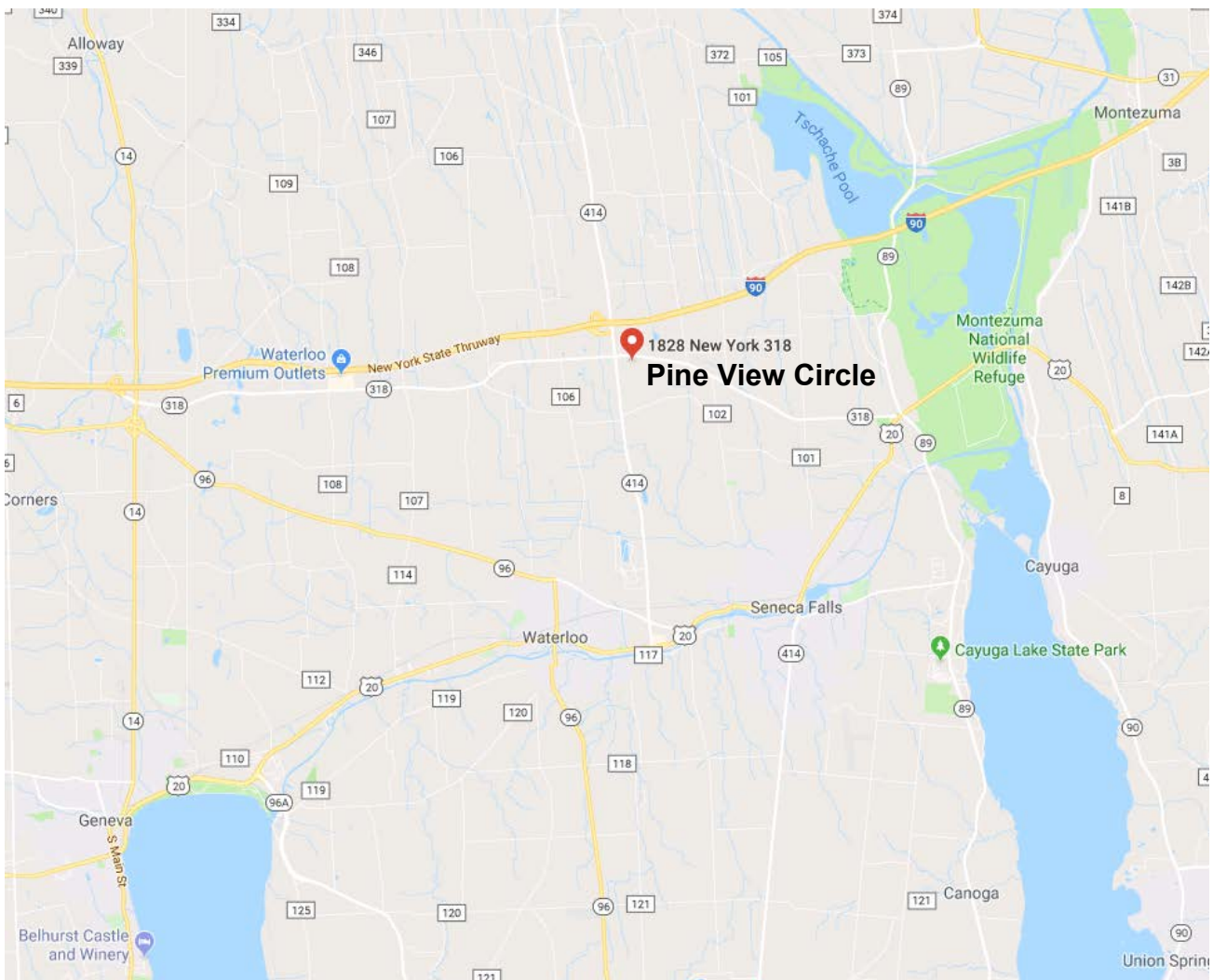
1828 NY-318, Tyre, NY 13148

Amenities

- Waterloo School District
- 1-3 bedroom units available
- LEED Certified
- Section 8 and other housing subsidies welcome
- 24 hour emergency maintenance services - Units available for vision and hearing impaired
- Handicapped accessible
- Central heat and air conditioning
- Energy Star® Appliances
- Laundry facility on site
- Off-street parking

Driving Commute

- 10 minutes to Waterloo
- 10 minutes to Seneca Falls -
- 20 minutes to Geneva
- 20 minutes to Auburn
- 20 minutes to Lyons



Google Maps - March 2018

Ithaca Neighborhood Housing Services Pine View Circle Tenant Application

- 1 Bedroom
- 2 Bedroom
- 3 Bedroom

I am applying for Pine View Circle property: _____

Head of Household

Name _____	Social Security # _____
Address _____	Email _____
City, Zip Code _____	Phone (Primary) _____
Date of Birth _____ (MM/DD/YYYY)	Phone (Secondary) _____

Additional Household Members - All adults must sign this application and provide identification

Please list all persons that will reside in the apartment with you

Name	Relationship	Social Security #	DOB

Do you receive Rental Subsidy or Section 8? Yes No If yes, with whom? _____

Geneva Housing Authority Community Unified Pro-Action Lakeview STEHP DSS

Current income per month (Please report all income)

	Name	Amount		Name	Amount
Gross Employment	_____	\$ _____		_____	\$ _____
Public Assistance(DSS)	_____	\$ _____		_____	\$ _____
SSI/Social Security	_____	\$ _____		_____	\$ _____
IRA/Pension/Annuity	_____	\$ _____		_____	\$ _____
Veterans Benefits	_____	\$ _____		_____	\$ _____
Unemployment	_____	\$ _____		_____	\$ _____
Alimony/Child Support	_____	\$ _____		_____	\$ _____
Self-Employment	_____	\$ _____		_____	\$ _____
Other/Specify	_____	\$ _____		_____	\$ _____

Are you or any household member currently involved in any community organizations or activities? If so, please list:

We have units that are modified to accommodate persons with hearing/visual impairments and mobility impairments, Does anyone in your household require this?

Yes No If yes, Who? _____

Hearing/Visual

Mobility

Do members of your household require other special accommodations? Yes No

If yes, please explain: _____

Office Use Only
Received By:

Please indicate if you receive support from any of these service providers:

Geneva Housing Authority Catholic Charities Community Action Lakeview VA Other _____

We are required to seek references from landlords of units you have rented in the past 5 years*. Please provide contact information for your current and previous landlords.

Landlord References

*If you are a first time renter please check here

Current

Name _____
Address _____
Phone _____
Email _____
Dates From _____ To _____

Previous

Name _____
Address _____
Phone _____
Email _____
Dates From _____ To _____

Previous

Name _____
Address _____
Phone _____
Email _____
Dates From _____ To _____

Previous

Name _____
Address _____
Phone _____
Email _____
Dates From _____ To _____

How did you hear about us? Craigslist Section 8 DSS INHS Website Print Ad Friend Other

Race White Black/African American Native American/Alaskan Native Hawaiian/Pacific Islander Asian Other

Ethnicity Hispanic or Latino (Please check all that apply)

Information solicited on this application is requested by the apartment owner in order to insure compliance with Federal laws prohibiting discrimination against tenant applicants because of race, color, national origin, religion, sex, marital status, age, and disability. This information will not be use to discriminate against you. We are an Equal Housing Opportunity Organization.

Authorization to Release Information

As managing agents for this affordable housing project, we must verify the program eligibility of all members of families applying for admission and verify this information periodically for residents. This information will be held in strict confidence for use in determining eligibility status and income for this family.

Release by Applicant

By execution of this release, I hereby authorize Ithaca Neighborhood Housing Services, Better Housing for Tompkins County, affiliated properties, their affiliates and agents to make such investigation into my credit, income, assets, employment, schooling, rental, utility, criminal history, and any other information necessary to determine my eligibility per the tenant selection criteria, and release all parties from all liability for any damage that may result from their furnishing information.

I/We hereby certify that the information furnished on this application is true and complete, to the best of my/our knowledge and belief. Inquiries may be made to verify the statements herein. All information is regarded as confidential in nature, and a consumer credit report and a criminal conviction report may also be requested. I/We certify that I/We understand that false statements or information are punishable applicable under State or Federal Law and will lead to cancellation of this application form or termination of tenancy after occupancy. All adult applicants, 18 years and older, must sign this application.

Head of Household Signature Date

Adult #2 Signature Date

Adult #3 Signature Date

Adult #4 Signature Date