

Dear Prospective Applicant:

Thank you for your interest in AP Lofts. We are excited for the opportunity to lease you your next home. Attached please find a rental application for your convenience.

Please ensure all sections are completed and all forms are signed. Once you have completed the application packet, please bring government issued photo ID for all household members ages 18 and over and Social Security cards for all household members to our rental office.

We look forward to receiving your completed application. Should you have any questions, please feel free to contact me at [aplofts@landsman.com](mailto:aplofts@landsman.com) or (716) 844-6055. Thank you again for your interest.

Sincerely,

Jillian Kukulka  
Property Manager



**PLEASE PRINT AND COMPLETE ALL INFORMATION**

NAME \_\_\_\_\_ DAY PHONE \_\_\_\_\_ EVENING PHONE \_\_\_\_\_

**List ALL addresses for the past 5 years, attach additional page if necessary:**

Current Address	Previous Address	Previous Address
Landlord Name, Address & Phone	Landlord Name, Address & Phone	Landlord Name, Address & Phone
How long have you lived there?	How long did you live there?	How long did you live there?

**List ALL people who will live in the apartment:**

NAME	RELATIONSHIP	STUDENT (Y/N)	SEX (M/F/CHOOSE NOT TO RESPOND)	AGE	BIRTHDATE	SOCIAL SECURITY NUMBER**
	HEAD OF HOUSEHOLD					

\*\*If member does not have a SS #, a Federal ID Number is acceptable

**List ALL states household members have lived in:**

State	Which household member(s) lived there?

- Yes    No   Has anyone on the application been convicted of a felony? (Prior convictions will not be an automatic reason for denial, a background check and an individualized assessment will be completed.)
  - Yes    No   Is any household member subject to any state lifetime sex offender registration requirement?
  - Yes    No   Has anyone on the application ever been convicted for illegal use, possession, manufacturing or distribution of a controlled substance?
  - Yes    No   Does anyone on the application currently use, manufacture, or distribute illegal drugs?
  - Yes    No   Has anyone on the application ever been terminated/evicted from housing?
  - Yes    No   Do you qualify for a reasonable accommodation? (If yes, please request a copy of Landsman's Section 504 policy.)
  - Yes    No   Would you benefit from special design features of an accessible apartment? Please check all that apply:
    - Wheelchair Accessible    Hearing Impaired    Visually Impaired
- Additional comments: \_\_\_\_\_

Yes  No Do you meet the qualifications under the HUD definition of disabled?  
*A person with disabilities, for purposes of program eligibility, is determined pursuant to HUD Regulations to have a physical, mental or emotional impairment that:*

1. *Is expected to be of long-continued, indefinite duration*
2. *Substantially impedes his or her ability to live independently*
3. *Is of such nature that the ability to live independently could be improved by more suitable housing conditions*

Driver's License Number/Issuing State: \_\_\_\_\_

**INCOME & ASSET INFORMATION**

TYPE OF INCOME	GROSS MONTHLY AMOUNTS		TYPE OF ASSET	TOTAL VALUE	
	HEAD	ALL OTHER HOUSEHOLD MEMBERS		HEAD	ALL OTHER HOUSEHOLD MEMBERS
Wages			Savings Account		
Public Assistance			Checking Account		
Social Security			Certificates of Deposit (CDs)		
SSI/SSP/Disability			Stocks/Bonds		
Unemployment			Real Property		
Child Support/Alimony			Cash		
Pensions/Annuity			Other		
Periodic Payments from Retirement Account					
Other					

**What is your preferred move in date?** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Preferred unit size?**  1 bedroom  2 bedroom

**What is your current monthly rent amount?** \$ \_\_\_\_\_

**Do you have a Section 8 voucher or any other type of voucher?** \_\_\_\_\_

**Do you have a pet?**  Yes  No **If yes, what type of animal is it?** \_\_\_\_\_

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

**ALL adult household members must sign below**

My/Our signature(s) below serves as written permission for **AP Lofts** to obtain a Criminal Background/Sex Offender Check, Consumer Report (credit history) and other references deemed necessary. We may obtain credit information from other sources and may exchange credit information with consumer reporting agencies. The applicant(s) also affirm that all information provided in the application is true and complete. The applicant(s) also understand that a personal interview must be held, assets and income verified before approval. All information received is confidential. After the application process is approved, a security deposit must be made and a lease agreement signed by all applicants. If accepted, I/We certify this apartment will be my/our sole residence. The undersigned makes the foregoing representation knowing that if any of such proves false **AP Lofts** may cancel and annul any lease given in reliance upon such information.

Head of Household Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

"Title 18 Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief as may be appropriate against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the \*\*Social Security Act at 208 (a) (6) (7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6) (7) and (8).\*\*

**PLEASE RETURN THIS FORM TO:**  
**AP LOFTS (TEMPORARY MANAGEMENT OFFICE)**  
 1207 Delaware Ave., Suite 219, Buffalo, NY 14209  
**Phone: (716) 844-6055**  
**TTY/TDD #: 711**

Office Use Only:	
Date Received	_____
Time Received	_____
Received By:	_____

AP Lofts *does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.*

***The person named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988).***

Name of Section 504 Coordinator:	Teri Bracht-Williams
Address:	3 Townline Circle, Rochester, NY 14623
Phone Number:	(585) 427-7570
TDD/TTY Number:	711
Email	tbracht-williams@landsman.com

### **Protections Provided Through the Violence Against Women Act Reauthorization of 2013**

HUD provides protections for victims of acts of domestic violence, dating violence, stalking and sexual assault. This is true for women and men. While victims are still required to fulfill lease requirements, you will not be subjected to rejection solely because you are a victim of an act covered under VAWA. If you would like a copy of the VAWA policy or to exercise your VAWA protections, please contact the management office.

**Note:** We conduct criminal background checks. If you have a criminal record, you have rights and protections. You have the right to review any conviction record the property is using to make a decision. There are only two reasons for *automatic* denial based on your criminal convictions: conviction for methamphetamine production in the home or being required to register for life on a state or federal sex offender database. In all other instances, you have the right to provide additional information about the circumstances of the conviction and the right to present evidence of your rehabilitation. For more information about your rights as an individual with a criminal conviction, please visit:  
<http://www.nyshcr.org/AboutUs/Offices/FairHousing/GPCC.htm>.

**If you have difficulty understanding English, please request our assistance and we will ensure that you are provided with meaningful access based on your individual needs.**

Si tiene dificultad para entender el inglés, solicite nuestra asistencia y nos aseguraremos de que se le proporcione un acceso significativo basado en sus necesidades individuales.

**AP Lofts is a non-smoking apartment community.**

# Authorization for Release of Information

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Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

\_\_\_\_\_

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## CONSENT:

I authorize and direct any Federal, State, or local agency, organization, business, or individual to release to AP Lofts any information or materials needed to complete and verify my application for participation, and/or to maintain my continued assistance under one of the following programs:

\*Section 221 BMIR  
\*Rent Supplement  
\*Section 236  
\*DHCR

\*Rent Assistance Payments (RAP)  
\*Section 8 Housing Assistance Payments Programs  
\*LIHTC Program  
\*HFA

I give my consent for the release also for the minor children in my care who live with me. I understand and agree that this authorization or the information obtained with its use may be given to and used by the Department of Housing and Urban Development (HUD) and Rural Development (RD) in administering and enforcing program rules and policies.

## INFORMATION COVERED:

I understand that, depending on program policies and requirements, previous or current information regarding me or my household may be needed. Verifications and inquiries that may be requested, include but are not limited to:

Identity and Marital Status	Employment, Income, and Assets
Residences and Rental Activity	Medical or Child Care Expenses
Credit and Criminal Activity	Social Security Numbers

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for and continued participation in a housing assistance program.

## GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information (depending on program requirements) include but are not limited to:

Previous Landlords	Past and Present Employers
Public Housing Agencies	Veterans Administration
Welfare Agencies	Retirement Systems
Post Offices	State Unemployment Agencies
Banks and Financial Institutions	Schools and Colleges
Social Security Administration	Credit Providers and Credit Bureaus
Support and Alimony Providers	Medical and Child Care Providers
Utility Companies	Realtors and Insurance Agencies





## Instructions for the Race and Ethnic Data Reporting (Form HUD-27061-H)

### A. General Instructions:

This form is to be completed by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing and Urban Development.

Owner and agents are required to offer the applicant/tenant the option to complete the form. The form is to be completed at initial application or at lease signing. In-place tenants must also be offered the opportunity to complete the form as part of the next interim or annual recertification. Once the form is completed it need not be completed again unless the head of household or household composition changes. There is no penalty for persons who do not complete the form. However, the owner or agent may place a note in the tenant file stating the applicant/tenant refused to complete the form. **Parents or guardians are to complete the form for children under the age of 18.**

The Office of Housing has been given permission to use this form for gathering race and ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together and placed in the household's file.

1. The two ethnic categories you should choose from are defined below. You should check one of the two categories.

1. **Hispanic or Latino.** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic" or "Latino."
2. **Not Hispanic or Latino.** A person not of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. The five racial categories to choose from are defined below: You may mark one or more.

1. **American Indian or Alaska Native.** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
2. **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
3. **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American."
4. **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. **White.** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.