

RENTAL RATES AND REQUIREMENTS

Beaver Meadow Apartments
21809 Towne Center Drive
Watertown, New York 13601
315-788-7810
www.beavermeadowapts.com

WELCOME to the Beaver Meadow Apartments! Part of our community is comprised of Market Rate Units and part is operated under the Affordable Housing Program, within Section 42 of the Internal Revenue Code. This program is designated to facilitate the housing needs of moderate and middle income individuals and families. Residence in the Affordable Apartment units at Beaver Meadow requires that applicants meet certain qualifying standards established by the government. This program is not connected with Section 8 although applicants with Section 8 vouchers or certificates may apply for residency.

Residency in the Affordable Apartments at Beaver Meadow is limited to those households having an income that is 80% or less than the median income in the Jefferson County area. In addition to standard wages, income includes monies received from many sources such as alimony, child support, pensions and social security. The units at Beaver Meadow Apartments will serve two different income groups. They are listed below. In addition, the current (2012) maximum allowable incomes (by household size) for Jefferson County area are as follows:

80% Limits

Income Cannot Exceed:

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person
\$33,450	\$38,200	\$43,000	\$47,750	\$51,600	\$55,400

Unit Size	Number of Units	Rent as of 10/2012	Unit Type	Square Footage
1 Bed/1 Bath*	12 (*currently all rented)	\$710.00	C	760 sq. ft.
2 Bed/2 Bath	18	\$845.00	B	1,110 sq. ft.
3 Bed/2 Bath	28	\$970.00	E	1,241 sq. ft.
3 Bed/2 Bath*	2 (*currently all rented)	\$970.00	H	1,327 sq. ft.
One car garages available at a cost of \$100.00 per month				

Market Rate

No Income Restrictions

Unit Size	Number of Units	Rent as of 10/2012	Unit Type	Square Footage
1 Bed/1 Bath	28	\$872.00	F	880 sq. ft.
1 Bed/1Bath*	2 (*currently unavailable)	\$760.00	C	760 sq. ft.
1 Bed/Den/1 Bath	42	\$993.00	G	993 sq. ft.
2 Bed/2 Bath	64	\$1,072.00	A	1,072 sq. ft.
2 Bed/2 Bath	38	\$1,110.00	B	1,110 sq. ft.
2 Bed/2 Bath	8	\$1,140.00	J	1,140 sq. ft.
2 Bed/2 Bath	14	\$1,193.00	D	1,193 sq. ft.
3 Bed/2 Bath	40	\$1,327.00	H	1,327 sq. ft.
One car garages available at a cost of \$100.00 per month				

- Minimum income requirements are based on the size of the household and the size of the apartment.
- Maximum occupancy limits at Beaver Meadow Apartments are set at two people per bedroom.
- For the Affordable Apartment units, all information on income provided by applicants must be verified before occupancy. This qualification and certification process must also be completed annually upon renewal. In addition to standard wages, income includes monies received from many sources such as alimony, child support, social security and pensions.
- No Pets allowed without prior pet application, deposit and approval.
- Standard security deposits have been established and are equal to one month's rent.
- **Non Refundable Application Fee for Market Rate Units in the amount of \$25.00 payable to COR Watertown Company, LLC**
- **Rent is subject to change**

Any questions please call 315-788-7810 or email beavermeadowapts@corcompanies.com

BEAVER MEADOW APARTMENTS

21809 Towne Center Drive

Watertown, NY 13601

(315)788-7810

www.beavermeadowapts.com

APPLICATION UNIT INFORMATION

Applicant: _____ Date: _____

Co-Applicant: _____

Thank you for your interest in the Beaver Meadow Apartments. Please take a moment to mark down what size unit that you are interested in and when you need to relocate so that we can best suit your needs.

DATE NEED APARTMENT BY: _____

UNIT SIZE	PLACE CHECK MARK HERE FOR UNIT SIZE DESIRED *see below	COMMENTS
1 Bed/1 Bath (ground floor only)	<input type="checkbox"/>	
1 Bed/1 Bath (upstairs only)	<input type="checkbox"/>	
1 Bed/Den/1 Bath (ground floor only)	<input type="checkbox"/>	
1 Bed/Den/1 Bath (upstairs only)	<input type="checkbox"/>	
2 Bed/2 Bath (ground floor only)	<input type="checkbox"/>	
2 Bed/2 Bath (upstairs only)	<input type="checkbox"/>	
3 Bed/2 Bath (ground floor only)	<input type="checkbox"/>	
3 Bed/2 Bath (upstairs only)	<input type="checkbox"/>	
One Car Garage	<input type="checkbox"/>	

*If you will accept more than one size or style please number by preference above.



Please Return To:

Beaver Meadow Apartments
21809 Towne Center Drive
Watertown, New York 13601
Phone: (315)788-7810

FOR OFFICE USE ONLY

Application Form #
Date: Time
Bedroom Size:

INFORMATION SOLICITED ON THIS APPLICATION IS REQUESTED BY THE APARTMENT OWNER IN ORDER TO ASSURE THE GOVERNMENT THAT FEDERAL NEW YORK AND STATE LAWS PROHIBITING DISCRIMINATION AGAINST TENANT APPLICATIONS ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, RELIGION, SEX, MARTIAL STATUS, AGE AND HANDICAP ARE COMPLIED WITH. THIS INFORMATION WILL NOT BE USED TO DISCRIMINATE AGAINST YOU.

Please respond to all questions on this form as appropriate. If application is for more than one person be sure to answer all questions for any household member that is applicable.

A. Head of Household Name:
Address:
City: State: Zip Code:
Telephone Number: Telephone Messages:
Best Time To Contact You:
Drivers License # and Issuing State

B. NAME OF ALL PERSONS WHO WILL BE LIVING IN THE APARTMENT:
Table with columns: Name, Age, DOB, Social Security #

C. Are you or any household member employed? If so, complete the following:
Employer's Name:
Address:
City/State/Zip:
Phone Number:
Employer's Name:
Address:
City/State/Zip:
Phone Number:

D. Present Income:
Gross Employment income per month
Supplemental Security income per month
Pension income per month
Social Security payment per month
Public Assistance income per month
Unemployment Assistance
Child Support
Other (Explain source)

E. Current Bank Account Balance:
Checking account Savings account
Money Market account Other accounts

F. Assets:
Full value of stocks \$ Full value of bonds \$
Full value of CD's \$ Market value of Real Estate \$
Full value of other \$

G. Present Living Accommodations (please check as appropriate):
Own House or Mobile Home Rental Housing
Public Housing Boarding House
Living with Relatives Hotel/Motel
Living with Friends Other
How long have you lived at your residence?
If you rent, what is your monthly rent, including utilities?

H. **Name, Address & Phone Number of Your Present Landlord:**

Name, Address & Phone Number of your Previous Landlords in past 5 years:

- 1. _____
- 2. _____
- 3. _____

I. **Are you presently receiving any form of rent subsidy/certificate?** _____
Name of subsidy source _____

J. **Have You Ever Been Evicted? Yes _____ No _____ When? _____**
If so, please explain: _____

K. **Will your family require an apartment that needs to be equipped to meet any special needs (i.e. such as wheelchair?) Yes _____ No _____**

Please list any other accommodations required by your family: _____

L. **Please list 3 personal references (who are not relatives):**

Name	Address/City/State/Zip	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

M. **Have you or any adult members of your household been convicted of a criminal Offense? No _____ Yes _____ Offense _____**

N. **Are you a full time student? No _____ Yes _____ School Name: _____**

Please review your application carefully. **If any questions are not answered the application may be deemed to be incomplete and returned to you.**

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING

Any willful misrepresentation or concealment of any material fact which would affect eligibility for admission will be considered grounds for termination of lease and eviction. I, therefore, declare the information provided to be true to the best of my knowledge.

I understand that I/We will be asked to provide "Release of Information" forms to confirm income, references, criminal background, predator status, and credit history if this application is to be processed for consideration of occupancy.

Co-applicant #1 _____
Date

Co-applicant #2 _____
Date

.....
Race/Ethnicity Information:

The information regarding race, ethnicity and sex designation is requested for statistical purposes only. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way.

Race of Head of Household (please check all that apply):

- ____ American Indian/or Alaska Native ____ Asian ____ Black or African American
- ____ Native Hawaiian or Pacific Islander ____ White ____ Other: _____

Ethnicity of Head of Household (please check one): ____ Hispanic or Latino ____ Not Hispanic or Latino

Gender (please check one): ____ male ____ female

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788-7810 (fax)788-7811

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize and direct any Federal, State, or local agency, organization, business or individual to release to Beaver Meadow Apartments., any information or documentation needed to complete and verify my application for housing and/or to meet annual certification requirements for continuing occupancy.

I give my consent for the releases also for the minor children in my care who live with me. I understand and agree this authorization or the information obtained with its use may be given to and used by Beaver Meadow Apartments in administering and enforcing rules and policies, and compliance requirements.

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: Childcare * Credit History * Criminal Activity * Household Composition * Employment, Income, Pensions and Assets * Federal, State, Tribal or Local Benefits * Proof of Identity * Social Security Numbers * Rental History

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for housing, or for meeting my annual certification requirements.

INDIVIDUALS OR ORGANIZATIONS THAT MAY RELEASE INFORMATION:

- Banks and other Financial Institutions
- Credit Bureaus
- Landlords
- US Social Security Administration
- Social/Economic Welfare Agencies, including Section 8
- Providers of alimony, child support, disability assistance, pensions, annuities and utility companies
- Courts and law enforcement agencies
- Employers, past and present
- Schools and Colleges
- US Dept. of Veteran Affairs

I agree that a copy of this authorization may be used for the purposes stated above. The original of this authorization is on file with Beaver Meadow Apartments 21809 Towne Center Drive, Watertown, NY 13601. I understand that I have a right to correct any information that I can prove is incorrect. I understand that if I do not sign this authorization, my application for housing may be denied. If currently a resident and I fail to cooperate in the annual certification process, my lease is terminated.

This release is valid for thirteen (13) months following the date of signature.

Applicant/Tenant Signature

Date

Print Name

On Behalf of Minor Children or Other