

WAITING LIST AGREEMENT

For: **FOX RIDGE TOWNHOUSES** DATE: _____ TIME: _____

Amount of Deposit: \$50.00 Receipt No: _____

Name of Applicant (Head of Household) Age Sex (optional)

Name of Co-Applicant Age Sex (optional)

Present Address: Street City State Zip Code

Other states you have lived in: _____

Check One Applicable (optional): Married____ Divorced____ Single____ Other____

Telephone Numbers: Residence_____ Work_____

Others who will occupy unit:

1. Name_____ Age____ Relationship_____ Sex____ (optional)

2. Name_____ Age____ Relationship_____ Sex____ (optional)

3. Name_____ Age____ Relationship_____ Sex____ (optional)

4. Name_____ Age____ Relationship_____ Sex____ (optional)

5. Name_____ Age____ Relationship_____ Sex____ (optional)

Unit Selection: 1 bedroom____ 2 bedroom____ 3 bedroom____

THE DEPOSITOR HEREBY ACKNOWLEDGES THAT UPON MAKING FORMAL APPLICATION FOR A COOPERATIVE MEMBERSHIP, \$50.00 OF THE DEPOSIT WILL BE A NON-REFUNDABLE PROCESSING FEE. THE BALANCE OF \$0.00 WILL APPLY TO THE COST OF MEMBERSHIP.

Applicant Signature

Cooperative Representative

Co-Applicant Signature

Fox Ridge Cooperative Townhouses does recognize preferences for the waiting list to applicants who have been displaced by government action or a presidentially declared disaster.

Check if you qualify for one of these preferences:

Displaced by government action _____ Displaced by Presidentially declared disaster _____

SUPPLEMENT TO APPLICATION FOR FEDERALLY ASSISTED HOUSING

This form is to be provided to each applicant for federally assisted housing

Instructions: Optional Contact Person or Organization: You have the right by law to include as part of your application for housing, the name, address, telephone number, and other relevant information of a family member, friend, or social, health, advocacy, or other organization. This contact information is for the purpose of identifying a person or organization that may be able to help in resolving any issues that may arise during your tenancy or to assist in providing any special care or services you may require. **You may update, remove, or change the information you provide on this form at any time.** You are not required to provide this contact information, but if you choose to do so, please include the relevant information on this form.

Applicant Name:	
Mailing Address:	
Telephone No:	Cell Phone No:
Name of Additional Contact Person or Organization:	
Address:	
Telephone No:	Cell Phone No:
E-Mail Address (if applicable):	
Relationship to Applicant:	
Reason for Contact: (Check all that apply) <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Emergency <input type="checkbox"/> Unable to contact you <input type="checkbox"/> Termination of rental assistance <input type="checkbox"/> Eviction from unit <input type="checkbox"/> Late payment of rent </div> <div style="width: 48%;"> <input type="checkbox"/> Assist with Recertification Process <input type="checkbox"/> Change in lease terms <input type="checkbox"/> Change in house rules <input type="checkbox"/> Other: _____ </div> </div>	
Commitment of Housing Authority or Owner: If you are approved for housing, this information will be kept as part of your tenant file. If issues arise during your tenancy or if you require any services or special care, we may contact the person or organization you listed to assist in resolving the issues or in providing any services or special care to you.	
Confidentiality Statement: The information provided on this form is confidential and will not be disclosed to anyone except as permitted by the applicant or applicable law.	
Legal Notification: Section 644 of the Housing and Community Development Act of 1992 (Public Law 102-550, approved October 28, 1992) requires each applicant for federally assisted housing to be offered the option of providing information regarding an additional contact person or organization. By accepting the applicant's application, the housing provider agrees to comply with the non-discrimination and equal opportunity requirements of 24 CFR section 5.105, including the prohibitions on discrimination in admission to or participation in federally assisted housing programs on the basis of race, color, religion, national origin, sex, disability, and familial status under the Fair Housing Act, and the prohibition on age discrimination under the Age Discrimination Act of 1975.	

☐ Check this box if you choose not to provide the contact information.

Signature of Applicant:	Date:
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The information collection requirements contained in this form were submitted to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520). The public reporting burden is estimated at 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Section 644 of the Housing and Community Development Act of 1992 (42 U.S.C. 13604) imposed on HUD the obligation to require housing providers participating in HUD's assisted housing programs to provide any individual or family applying for occupancy in HUD-assisted housing with the option to include in the application for occupancy the name, address, telephone number, and other relevant information of a family member, friend, or person associated with a social, health, advocacy, or similar organization. The objective of providing such information is to facilitate contact by the housing provider with the person or organization identified by the tenant to assist in providing any delivery of services or special care to the tenant and assist with resolving any tenancy issues arising during the tenancy of such tenant. This supplemental application information is to be maintained by the housing provider and maintained as confidential information. Providing the information is basic to the operations of the HUD Assisted-Housing Program and is voluntary. It supports statutory requirements and program and management controls that prevent fraud, waste and mismanagement. In accordance with the Paperwork Reduction Act, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a currently valid OMB control number.

Privacy Statement: Public Law 102-550, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions.

INSTRUCTIONS: Please answer all questions:

1. Have you or any members of your household ever been evicted from a property? ☐ Yes ☐ No
If yes, Property/Landlord Name: _____
City/State: _____
2. Are you or any members of your household currently receiving assistance from HUD?
☐ Yes ☐ No
If yes, Property/Landlord Name: _____
City/State: _____
3. Have you ever been convicted of a criminal offense? ☐ Yes ☐ No
If yes, Offense: _____
City/State: _____
4. Have you or any members of your household been evicted in the last three years from federally assisted housing for drug-related criminal activity? ☐ Yes ☐ No
If yes, Property/Landlord Name: _____
City/State: _____
5. Are you or any members of your currently using an illegal substance or drug? ☐ Yes ☐ No
6. Are you or any members of your household subject to the State Sexual Offenders Registration? ☐ Yes ☐ No
If yes, list the State where the offense occurred: _____
7. Will the unit for which you are applying be the family's only residence? ☐ Yes ☐ No
8. Do you or any members of your household need an accessible unit? ☐ Yes ☐ No
9. How did you hear about our cooperative community?

Social Security Number Exemption -

There are two exceptions to the rule - 1) Those individuals who do not contend eligible immigration status and 2) individuals age 62 and older as of January 31, 2010, whose initial determination of eligibility was begun prior to January 31, 2010. The exception status for these individuals is retained if the individual moves to a new assisted unit under any HUD assisted program or if there is a break in his or her participation in a HUD assisted program.

This project 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. As required in the HUD Occupancy Handbook 4350.3 REV-1, all individuals with disabilities have the right to request reasonable accommodations. Reasonable accommodations are changes, exceptions, or adjustments to a program, service, building, dwelling unit, or workplace that will allow a qualified person with a disability to: participate fully in a program; take advantage of a service; live in a dwelling; or perform a job. To show that a requested accommodation may be necessary, there must be an identifiable relationship, or nexus, between the requested accommodation and the individual's disability. Requests for Reasonable Accommodations should be brought to the attention of management.



INCOME LIMITS

of persons in family

	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>
ELI -	16,350	18,650	21,720	26,200	30,680	35,160
Section 8-	27,200	31,100	35,000	38,850	42,000	45,100
236 -	43,550	49,750	55,950	62,150	67,150	72,100

What is your household's total gross income \$ _____

Does your total gross income fall below the above income limits? _____yes _____no

- a. For Section 236 projects (insured and noninsured with or without Rent supplement, RAP or LMSA) and for the Section 221 (d) (3) BMIR projects (with or without Rent Supplement) the following definitions are used:
- (1) An elderly person or family is defined as a household where the head or spouse is age 62 or older.
 - (2) A disabled or handicapped person or family is defined by the Section 202 definition in effect at the time the project was endorsed. See the definitions for Section 202 projects in Figures 3-5 for projects endorsed prior to the change of definition in 1974. In 1974 the definition of handicap was amended to include other categories of disabilities. (See the definition for Section 202/8 in Figure 3-5).

236 Family & Elderly Definition

(1) An Elderly or family is defined as a household where the head or spouse is 62 or older.

Definition H - Person with a Disability (Handicapped Person).* {24 CFR 891.505 and 891.305} A person with disabilities means:

(1) Any adult having a physical, mental, or emotional impairment that is expected to be of long-continued and indefinite duration, substantially impedes his or her ability to live independently, and is of a nature that such ability could be improved by more suitable housing conditions.

(2) A person with a developmental disability, as defined in Section 102(7) of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001(8)), i.e., a person with a severe chronic disability that:

- (i) Is attributable to a mental or physical impairment or combination of mental and physical impairments;
- (ii) Is manifested before the person attains age 22;
- (iii) Is likely to continue indefinitely;
- (iv) Results in substantial functional limitation in three or more of the following areas of major life activity:
 - (A) Self-care,
 - (B) Receptive and expressive language,
 - (C) Learning,
 - (D) Mobility,
 - (E) Self-direction,
 - (F) Capacity for independent living, and
 - (G) Economic self-sufficiency; and
- (v) Reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration and are individually planned and coordinated.

(3) A person with a chronic mental illness, i.e., a person who has a severe and persistent mental or emotional impairment that seriously limits his or her ability to live independently, and whose impairment could be improved by more suitable housing conditions.

(4) Persons infected with the human acquired immunodeficiency virus (HIV) who are disabled as a result of infection with the HIV are eligible for occupancy in the Section 202 projects designed for the physically disabled, developmentally disabled, or chronically mentally ill depending upon the nature of the person's disability. (24 CFR 891.505)

Note: A person whose sole impairment is alcoholism or drug addiction (i.e., who does not have a developmental disability, chronic mental illness, or physical disability that is the disabling condition required for eligibility in a particular project) will not be considered to be disabled for the purposes of the Section 202 program.

(5) A person infected with the human acquired immunodeficiency virus (HIV) and a person who suffers with alcoholism or drug addiction, provided they meet the definition of "person with disabilities" in Section 811 (42 U.S.C.) 8013(k)(2). A person whose sole impairment is a diagnosis of HIV positive or alcoholism or drug addiction (i.e., does not meet the qualifying criteria in Section 811 will not be eligible for occupancy in a Section 811 project. (24 CFR 891.305)

WHAT IS A COOPERATIVE?

The most common form of cooperative housing in this area of the country is a grouping of townhouses ranging in various sizes. There is usually a mix of one, two, or three bedroom units for you to consider, depending upon your family size and composition.

These townhouses are owned by the Cooperative corporation. Each family who resides in one of the townhouses owns a share (membership) in the Cooperative. Therefore, each member family is an owner of a portion of the whole development. There are no other persons who have an ownership interest in the development besides the people who live there.

The cooperative is run on a non-profit basis.

A FAMILY'S SINGLE FAMILY HOME...

The living space in our one bedroom apartment is all on one floor; our two & three bedroom townhouses have bedrooms upstairs with living room, dining room and kitchen on the main floor and full basements. Each of the two & three bedroom townhouses have a front and rear entrance. Cooperative housing is an alternate form of home ownership. People who live in cooperatives do not rent an apartment, they make an investment in a home.

A FAMILY'S CONDOMINIUM...

There are many common denominators between a cooperative and a condominium-for example, the maintenance and upkeep. One of the major advantages of a cooperative is that you are not personally indebted for the mortgage on your dwelling unit. If you prefer to use your money to live rather than spending it on mortgage payments that are higher than you prefer and that YOU personally are responsible for, then cooperative housing is a viable alternative for you.

A FAMILY'S RENTAL UNIT...

Why make rental payments (with a built-in profit margin) to a landlord? In a housing cooperative you 'rent' from yourself. You elect a Board of Directors to govern, to set rules, and to establish an annual budget. In a housing cooperative, interior decoration of your dwelling unit is left to your discretion and taste. The Cooperative has established very liberal policies regarding decorations and improvements. Have you ever tried to decorate a rental apartment - paneling, wallpaper, carpeting? Not only may you decorate, but the substantial improvements you make may be sold to a new member when you move out and sell your membership.

WHAT IS THIS ABOUT A MEMBERSHIP?

Each resident/family owns a share, a membership, in the Cooperative corporation. When one of our members decide to move, they put their membership up for sale. A member may secure his or her own purchaser through advertising or other means, or may request the assistance of the Cooperative office to find a purchaser.

WHEN I PURCHASE A MEMBERSHIP, WILL I OWN MY UNIT?

No, not in the same sense that you would own a house. You purchase a share or membership in the Cooperative. It is not a payment on a particular dwelling. It is a share in the homes of all the members, and in jointly owned community facilities-play areas, parking areas, community house, etc. For this payment, you receive a Membership Certificate and you sign an Occupancy Agreement which establishes your right to occupy a specific dwelling unit and spells out the rules you and your neighbors must observe to live together in harmony.

JUST WHAT ARE THE LEGAL REGULATIONS?

The Cooperative is a non-profit corporation. Your membership entitles you to an equal share in the Cooperative, to private use of your dwelling unit, and to vote in the operation of the corporation. The legal documents involved are available, and copies will be given to you when you apply. They include: Articles of Incorporation, By-Laws, Rules and Regulations, and various Board adopted regulations. The complete financial records and minutes of Board meetings are available.

WHAT CAN I EXPECT IN MAINTENANCE SERVICE?

Routine maintenance is provided by the corporation for all things that are 'standard equipment' in the dwelling units, including the range, refrigerator, water heater, furnace, and all plumbing and electrical systems. The Cooperative does expect that each member family will take normal care in the upkeep of the dwelling and equipment. All repairs that are not due to normal wear are charged back to the member. This assures each member that they will not personally have to share in the expenses for those other members who may or may not take good care of their dwelling. Each member pays for his or her own neglect or lack of care. The cooperative conducts annual inspections of all dwelling units to assure that they remain safe and sound. Emergency maintenance service is provided 24 hours a day.

EXCITING FEATURES INSIDE AND OUT –

Clubhouse available for members and their guests by scheduled appointments
Two & three bedrooms have full basements with washer & dryer hook up
Kitchen is furnished with an electric range, sink with disposal, and refrigerator
Plenty of closet space
Ample parking just a few steps from your front door
Maintenance, lawn care and snow removal provided
Water, trash, sewer and basic cable TV provided