



Catholic Charities  
Progress of Peoples Management Corporation

Dear applicant,

Thank you for your interest in the newly constructed apartments at 2377 Pacific Street, Brooklyn, NY. Please thoroughly review the information listed below and within the attached housing application. The maximum household size for this property is two individuals.

Income limits (income limits are subject to change)

- Household of One: \$27,636 to \$37,350
- Household of Two: \$29,640 to \$42,700

Initial rents (rents are subject to change in accordance with rent stabilization regulations)

- Studio: \$621 to \$808
- One-bedroom: \$666 to \$866
- Tenants pay electric, owner pays heat and hot water

Eligibility for admission is limited to the following.

- A single person 62 years of age or older
- Households of two, in which both household members are 62
- A single person 62 years of age or older with a live-in home attendant

There are additional eligibility criteria which will be reviewed when the application is initially reviewed and/or at a housing interview.

**Additional Eligibility Requirements and information:**

Full-time students are not eligible for residency (there are exceptions under IRS code).

Pets are allowed, certain restrictions apply. The property is non-smoking.

**How to apply?**

Do not send more than one completed application. Please complete the attached housing application and mail to:

Progress of Peoples Management Corp  
191 Joralemon Street 8<sup>th</sup> Floor  
Brooklyn, NY, 11201  
Attn: Pope Francis Apartments at Loreto

Do not give brokers or application fees to anyone in connections with the obtaining, preparing or filing of this application for housing.

**When is the deadline?**

Applications are accepted on a rolling basis until the waitlist is established.

**What happens after submitting an application?**

Once processed, applications are assigned an ID number. You will be notified of this number by mail once the application has been reviewed and an eligibility determination has been made. Any blanks on the application will delay the processing of your application. When vacancies occur, Property Management will reach out to eligible candidates from the waitlist to conduct interviews. You will be asked to bring documents that verify identity of members of your household as well as your household's income, assets, and qualifying expenses. Additionally, applicants must pass a credit and criminal background check.

**\*Do you accept Section 8 and other housing subsidies?**

Yes! We welcome Section 8, CityFHEPs, and any other tenant based rental voucher.

Please note that at no time in the process are you guaranteed an apartment until you have signed a lease and received your keys. You may keep this cover sheet for future reference.

Progress of Peoples Management Corporation does not discriminate directly or indirectly on the basis of race, color, religion, sex, national origin, disability or familial status in the admission or access to, or treatment or employment in its programs or activities regardless of the presence of federal financial assistance.



**HOUSING APPLICATION**

\*\*\*\*\*

**MAIL TO:** Progress of Peoples Management Corp  
191 Joralemon Street 8<sup>th</sup> Floor  
Brooklyn, NY, 11201  
Attn: Pope Francis Apartments at Loreto

\*\*\*\*\*

MAIL ONLY ONE (1) APPLICATION PER FAMILY BY REGULAR MAIL. DO NOT SEND BY REGISTERED, CERTIFIED, EXPRESS, ETC. IT WILL NOT BE ACCEPTED. IF MORE THAN ONE APPLICATION IS RECEIVED THE LAST APPLICATION RECEIVED WILL BE THE I.D. NUMBER OF RECORD.

**THE LOTTERY HAS ENDED, APPLICATIONS FOR THE WAITLIST ARE BEING ACCEPTED ON A ROLLING BASIS UNTIL THE WAITLIST HAS BEEN ESTABLISHED.**

Each application received will be recorded. Since so many elderly need housing, this development will not be able to accommodate all who are eligible. As eligible applicants can be accommodated, they will be called in for an interview.

NO PAYMENT OR FEE SHOULD BE GIVEN TO ANYONE IN CONNECTION WITH THE PREPARATION, FILING OR PROCESSING OF THIS APPLICATION. Property is located at 2377 Pacific Street, Brooklyn, NY 11233.

\*\*\*\*\*

**THIS INFORMATION IS TO BE FILLED OUT BY THE APPLICANT**

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

Street Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone # \_\_\_\_\_ Alternate phone # \_\_\_\_\_

Mailing address (if different from address above):

Street Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Email \_\_\_\_\_ Alternate Email \_\_\_\_\_

Preferred method of contact (phone, email, mail) \_\_\_\_\_

**FUNCTIONAL STATUS**

Does any member of your household have a mobility disability and require an accessible/adaptable unit?

Yes  No

Does any member of your household have a hearing or visual disability and require an accessible/adaptable unit?

Yes  No

**RENTAL SUBSIDY**

Does any member of your household have a portable or tenant based rental subsidy? Yes  No

If yes, which type?  Section 8 (NYCHA)  Section 8 (HPD)  Section 8 (other agency)

CityFHEPS  Other (list type) \_\_\_\_\_

**STUDENT STATUS**

Is any household member currently or planning to be a full-time student in the next 12 months? Yes  No

(A full-time student is one who attends school during 5 months out of a calendar year and has full-time student status for those 5 months.)

Is any household member currently or planning to be a part-time student in the next 12 months? Yes  No

(A part-time student is one who attends school during 5 months out of a calendar year and has full-time student status for those 5 months.)

Has any household member been a full-time student at any point during the current calendar year? Yes  No

**FAMILY COMPOSITION**

**(LIST ONLY THE FAMILY MEMBERS WHO WILL LIVE IN THIS APARTMENT)**

(1) **YOU, HEAD OF HOUSEHOLD**

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

(2) **SECOND PERSON**

**RELATIONSHIP TO HEAD OF HOUSEHOLD:** \_\_\_\_\_

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Unit size preference (select only one): First Available  Studio (1 person only)  1 Bedroom (1 -2 people)

**HOUSEHOLD INCOME**

Type of Income: Examples are wages, welfare, social security, SSI, pension, disability compensation, unemployment compensation, interest income, alimony, annuities, dividends, income from rental property. **If any household member has zero income, please state that below.**

| <u>HOUSEHOLD MEMBER</u> | <u>TYPE OF INCOME</u> | <u>AMOUNT</u>  |
|-------------------------|-----------------------|----------------|
| 1) _____                | _____                 | _____ PER YEAR |
| 1) _____                | _____                 | _____ PER YEAR |
| 2) _____                | _____                 | _____ PER YEAR |
| 2) _____                | _____                 | _____ PER YEAR |

**HOUSEHOLD ASSETS**

**Do you own a bank account? (INCLUDING DIRECT DEPOSIT CARDS)** Yes  No

**If so, please provide ALL of the following information:**

|                  |                    |              |                          |
|------------------|--------------------|--------------|--------------------------|
| Checking Acct    | Name of Bank _____ | Acct # _____ | Current Balance \$ _____ |
| Checking Acct    | Name of Bank _____ | Acct # _____ | Current Balance \$ _____ |
| Savings Acct     | Name of Bank _____ | Acct # _____ | Current Balance \$ _____ |
| Direct Deposit   | Name of Bank _____ | Acct # _____ | Current Balance \$ _____ |
| Cert. of Deposit | Name of Bank _____ | Acct # _____ | Current Balance \$ _____ |
| Stocks/Bonds     | Value \$ _____     |              |                          |
| IRA/401k/etc.    | Value \$ _____     |              |                          |

**Do you now own Real Estate?** Yes  No

If yes, what is the value, during the past two years? \$ \_\_\_\_\_

Have you sold, given or disposed of any assets in the last two years? Yes  No . If yes, please provide the following information:

| <u>Asset Disposed</u> | <u>Asset Value at time of Disposition</u> | <u>Date of Disposition</u> | <u>Amount Received</u> |
|-----------------------|---|----------------------------|------------------------|
| _____                 | _____                                     | _____                      | _____                  |
| _____                 | _____                                     | _____                      | _____                  |

Were there any penalties, broker/legal fees or settlement costs you had to pay in order to dispose of these assets?  
Yes  No  Amount \$ \_\_\_\_\_

**CERTIFICATION AND SIGNATURE**

I DECLARE THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

**WARNING:** FALSE STATEMENTS OR MISREPRESENTATION ARE A CRIMINAL OFFENSE UNDER SECTION 1001 OF TITLE 18 OF THE U.S. CODE.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**MARKETING INFORMATION**

How did you hear about the availability of these apartments? Please check and fill in all choices that apply.

- Friend  Walk in  Local Organization/neighborhood center/church
- Newspaper advertisement  \_\_\_\_\_
- Other  \_\_\_\_\_

\*\*\*\*\*  
The following information is required for statistical purposes so that HUD may determine the degree to which its programs are utilized. This information must be completed. It will not affect the processing of this application.

**ETHNICITY:**

Please check one:

- Hispanic or Latino
- Not Hispanic or Latino

**RACIAL GROUP IDENTIFICATION:**

Please check one group which identifies the head of household:

- White
- Black or African American
- American Indian or Alaskan Native
- Asian
- Native Hawaiian or Other Pacific Islander

Pope Francis Apartments at Loreto does not discriminate directly or indirectly on the basis of race, color, religion, sex, national origin, disability or familial status in the admission or access to, or treatment or employment in its programs or activities regardless of the presence of federal financial assistance. Under Section 504 of the Rehabilitation Act of 1973 the owner honors reasonable accommodation requests for modifications in policies, practices and facilities, when such modifications may be necessary to afford an individual equal opportunity to use and enjoy the benefits of this development and are not fundamental program changes.

