City of Beacon Workforce Housing Program (Below Market Rate Units)*

249 Main Street Condominiums 249 Main Street Beacon NY 12508



1 Bedroom / 1 Bath \$228,000

- Easy access to The Beacon Train Station & all major Highways
- Pet friendly
- Private off-street parking

*Below Market Rate Units are being offered based on the City of Beacon's Affordable Workforce Housing Ordinance. Program eligibility applies.

For More Information contact:

Lashonda Denson Hudson River Housing, Inc. NeighborWorks[®] HomeOwnership Center of Dutchess County 313 Mill Street Poughkeepsie, NY 12601 (845) 454-5176 Idenson@hudsonriverhousing.org The Condos/Townhouses referred to in this document is being offered through the Affordable Housing Ordinance in the City of Beacon to increase the supply of safe, decent and affordable housing throughout this community.

Hudson River Housing has been retained, through a written agreement, to manage the applications for the affordable Below Market Rate Units. Hudson River Housing is a nonprofit agency and is responsible for ensuring compliance with all requirements established by the Affordable Housing Agreement. You may contact Hudson River Housing at (845) 454-5176 if you have any questions about these requirements. The Agreement is available by contacting the City of Beacon or Hudson River Housing, Inc.

As a requirement:

 The units must be sold to income eligible households. Household income must not exceed 100% of the Area Median Income as defined by the US Department of Housing and Urban Development.

100% Area Median Income Per	nousenoia size
1 person - \$ 70,400	3 People - \$90,500
2-People - \$80,400	4 People - \$100,500

- 2) The purchase price may not exceed the maximum amount established by the Agreement.
- 3) You must provide documentation of your eligibility. This involves completion of the attached application, submission of requested income and asset verification documents.

In addition, the Agreement establishes the following priority order for applications

 Households applying for Below Market Rate units shall be selected on a basis of the categories of priority: Please indicate if you feel your household meets one of the following priority categories on the application.

Category

- A) Volunteer emergency responders for the City of Beacon who have served at least five years.
- B) City of Beacon municipal employees.
- C) Employees of the Beacon School District.
- D) All other residents of the City of Beacon.
- E) Other persons employed in the City of Beacon.
- F) All others.

If you are interested in one of these affordable units please send in all required documentation to:

Lashonda Denson Hudson River Housing, Inc. NeighborWorks®HomeOwnership Center of Dutchess County 313 Mill Street Poughkeepsie, NY 12601 845.454.5176 845.485.1641 fax Idenson@hudsonriverhousing.org

CITY OF BEACON WORKFORCE HOUSING APPLICATION

Applicant Information	ation					
First Name		MI		Last Name		
Social Security #	DOB	AGE	7	FULI	L TIME STUDENT	
Social Security #		101	_	1011	Y OR N	
Phone	Work Phone	E-Mail Ad	ldress			
Current Address						
Street Address		City		State	Zip	
		-			-	
Citizenship S	tatus	Marital Status			Military Status	
(Circle 1)		(Circle 1)		-	
U. S. Citizen I	Foreign Born	Single	Separated	l (legally)	Active Military	
Resident Alien	Other	Married	Divo	orced	Veteran	
Education Level		D	nianity Cat			
(Circle 1)		PI	riority Cat (Circle 1)	egory		
College Primary		con Emergency First	Responder		esidents of the City of Beacon	
HS/GED Vocational		con Municipal Emplo			ons employed in the City of Beacon	
	C. Employee	of the Beacon City Scl	nool District	F . All Others		
Income Source #1						
Employer Name/Inc		E	mployer Addı	ress		
Supervisor N	Name		Su	pervisor Cont	act #	
1				L		
Position	Start Date			End Date		
1 0311011						
Gross Per Paychecl	K How Of	ten Are you Paid? (Circle One)		Self Employed?	
\$		•	Per Month		r Juni	
	Once Pe	r Week Every Two Weeks		Y or N		
Income Source #2						
Employer Name/Inco	ome Source	Employer Address				
Supervisor N	ame	Supervisor Contact #				
Desition	Start Data	End D. (
Position	Start Date	End Date				
Gross Per Paychecl		ten Are you Paid? (Circle One)	/ /	Self Employed?	
\$	Once Pe		Per Month		Sen Employeu:	
	Once Pe		Two Weeks		Y or N	

CITY OF BEACON WORKFORCE HOUSING APPLICATION

Co Applicant In	formation					
First Name		MI		Last Name		
Social Security #	DO	B AGE	Ŧ	FULI	L TIME STUDENT	
5					Y OR N	
Phone	Work Phor	ne E-Mail Ad	ldress			
Current Addres	s					
Street Address	~	City		State	Zip	
		2			L L	
Citizenship	Status	Mari	tal Status			
(Circle			Circle 1)		Military Status	
U. S. Citizen	Foreign Born	Single	Separated	(legally)	Active Military	
Resident Alien	Other	Married	Divo		Veteran	
Education Level		Pi	Priority Category			
(Circle 1) College Primary	A City of B	eacon Emergency First	(Circle 1) Responder	D All other r	esidents of the City of Beacon	
	B . City of B	eacon Municipal Emplo			ons employed in the City of Beacon	
HS/GED Vocation		e of the Beacon City Scl		F . All Others		
Income Source #	<i>‡</i> 1					
Employer Name/			Employer Address			
Employer Rume,			21	npiojer rida		
			Supervisor Contact #			
Superviso	r Name		Sup	ervisor Cont	act #	
Position	Start Date		End Date			
/ /		/ /				
Gross Per Paych		Often Are you Paid? (Self Employed?	
\$			Per Month			
Once Pe		Per Week Every	Two Weeks		Y or N	
Income Source #						
Employer Name/Income Source		Employer Address				
Supervisor Name			Supervisor Contact #			
1			1			
Position	Start Date		End Date			
POSITION	Start Date		End Date			
Gross Per Paych		Dften Are you Paid? (Circle One)	, ,	Self Employed?	
\$			Per Month		Sen Employeu?	
			Wo Weeks		Y or N	

CITY OF BEACON WORKFORCE HOUSING APPLICATION

Other Occupants			
Name	DOB	Age	Receiving Income Y or N

Assets (Supporting Documentation i.e. Account Statements.	Note: You must also include the value of any assets disposed of in the past 24 months at less than fair market value.)
	in may cause delay in the processing of this application

<u>Type</u>	<u>A/C</u>	<u>Current</u> <u>Value</u>	<u>Penalty to Convert</u> <u>to Cash</u>	Interest Rate	Asset Income
Checking					
Checking					
Money Market					
Mutual Fund					
Savings					
Savings					
401K					
401K					
Bonds					
Business					
CVLI					
Stocks					
Real Estate					
Other					
		(Plassa circ)	Available Developments		

(Please circle the unit(s) that you are interested in)

249 N	Iain Street
U	Init #208

____ Unit #204

____ Unit #308

I agree to authorize the participating developers with the City of Beacon's Workforce Housing Program or any of its subsidiaries, agents, or assignees to use this copy of my signature as my consent and approval to verify my credit, employment, income, assets, former tenancies and criminal background, of any, in connection with my application for future tenancy in an apartment offered through the City of Beacon's Workforce Housing Program. I understand that all information collected during the verification process will be used solely for the purposes of determining eligibility for residing at a unit offered through the City of Beacon's Workforce Housing Program.

Acknowledged & Agreed	
Signature of Applicant:	Date:
Please Print Name	
Signature of Co-Applicant:	Date:
Please Print Name:	