## City of Beacon Workforce Housing Program

The City of Beacon's Workforce Housing program was developed through an Affordable Housing Ordinance in the City of Beacon to increase the supply of safe, decent and affordable housing throughout our community. Hudson River Housing has been retained to manage the applications for the affordable apartments in the program and is responsible for ensuring compliance with all requirements established by the Affordable Housing Agreement.

Below Market Rate (BMR) Apartments available through the Workforce Housing Program consists of:

- Luxury Studio/Lofts\*
- Luxury I Bedroom units\*
- Luxury 2-Bedroom units\*
  - \*Amenities will vary per unit.

Applicants interested in a BMR rental must submit a City Beacon Workforce Housing program application. Eligible participants will then submit a separate rental application for the BMR unit of their choice. Rental eligibility is determined by the developer. Rental eligibility thresholds will vary per developer. Application and other fees may apply.

<u>Maximum Income & Rents</u> - Maximum Income & Rents per unit are determined annually by the Department of Urban Development.

2024 Maximum Income limits (as of April 1, 2024)\*

## **Household Maximum Income**

| 1 Person | \$72,360  |
|----------|-----------|
| 2 People | \$82,710  |
| 3 People | \$93,060  |
| 4 People | \$103,320 |

<sup>\*</sup>Household income must not exceed 90% of the Area Median Income (as defined by the US Department of Housing and Urban Development (HUD). Household income is adjusted for the number of persons in the household.

## 2024 Maximum Rent Limits (as of April 1, 2024)\*

Studio/lofts/1 Bedroom - \$1,284 - \$2,141 2 Bedroom - \$1,544 - \$2,666

For more information please contact

Lashonda Denson Hudson River Housing, Inc. 313 Mill Street Poughkeepsie, NY 12601 (845) 454-5176 Option 6

ldenson@hudsonriverhousing.org

City of Beacon Workforce Housing Program Application June 26, 2024

<sup>\*</sup>Maximum rents will vary depending on the location.

#### City of Beacon Workforce Housing Program

The apartment you are considering renting was developed through the Affordable Housing Ordinance in the City of Beacon to increase the supply of safe, decent, and affordable housing throughout our community.

### As a requirement:

- 1 The units must be rented to an income eligible household. Household income must not exceed 90% of the Area Median Income as defined by the US Department of Housing and Urban Development.
- 2 Rents may not exceed the maximum rent established by the Agreement.
- 3 You must provide documentation of your eligibility. This involves completion of the attached program application, submission of requested income & asset verification documents and all other requested household information.

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

I) Households applying for Below Market Rate units shall be selected on a basis of the categories of priority: Please add any points that you feel apply to your household and submit the following backup documentation.

#### 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.

Within each of the above categories, the following special groups shall receive priority in the following order:

- 1. Priority for rental units shall be established for all eligible households as defined in 223-63, whose aggregate gross annual income is between 70% and 80% of the Dutchess County area median annual income.
- 2. Priority for all for-sale units shall be established for all eligible households as defined in § 223-63, whose aggregate gross annual income is between 90% and 100% of the Dutchess County area median annual income.

Hudson River Housing has been retained to manage the applications for the affordable apartments at Development. 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 Option 6 if you have any questions about these requirements.

# City of Beacon Workforce Housing Program Maximum Income and Rents

<u>Maximum Income & Rents</u> - Maximum Income & Rents per unit are determined annually by the Department of Urban Development.

2024 Maximum Income limits (as of April 1, 2024)\*

#### **Household Maximum Income**

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|----------|-----------|
| 2 People | \$82,710  |
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<sup>\*</sup>Household income must not exceed 90% of the Area Median Income (as defined by the US Department of Housing and Urban Development (HUD). Household income is adjusted for the number of persons in the household.

### 2024 Maximum Rent Limits (as of April 1, 2024)\*

Studio/lofts/1 Bedroom - \$1,284 - \$2,141 2 Bedroom - \$1,544 - \$2,666

Applicants must provide documentation verifying the Identity of Household Occupants and their respective incomes to Hudson River Housing, Inc. & the participating developers with the City of Beacon's Workforce Housing Program.

<sup>\*</sup>Maximum rents will vary depending on the location.

## **City of Beacon Workforce Housing Program**

### **Required Documentation Checklist**

In order to be considered as having submitted a complete application, you must provide the following income documentation with your application. This applies to all household members over the age of 18.

### If Paid by Paycheck:

Last 4 weeks consecutive pay stubs

Last 2 years Tax Return Transcripts, Wage & Income Statements and/or or verification of non filing. These documents can be obtained online at

https://www.irs.gov/individuals/get-transcript

Last 2 months bank statements

#### If Self-Employed:

Last 2 years Business Tax Return Transcripts YTD Profit & Loss Statement Last 6 Months Business Bank Statements

If receiving other forms of income such as Child Support, Pension/Retirement, Social Security, SSI, SSDI, Survivors Benefits:

Most recent statement of other income received.

Please be advised that additional information may be requested if needed to determine eligibility.

Send the complete application and required documents to:

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

| Applicant Information               |          |   |                |                |                             |
|-------------------------------------|----------|---|----------------|----------------|-----------------------------|
| First Name                          |          | MI  |                | Last Name      |                             |
|                                     |          |   |                |                |                             |
| Social Security #                   |          | DOB   |                | AGE            | FULL TIME STUDENT<br>Y OR N |
| Phone                               | Woı      | rk Phone  | E-Mail A       | ddress         |                             |
| Current Address                     |          |   |                |                |                             |
| Street Address                      |          | City  | Stat           | e 7            | Zip                         |
| Sirect Address                      |          | City  | Stat           | . 2            | шр                          |
| How Long Lived There                | e?       | Land  | dlord Name     |                | Landlord Phone#             |
| Mo. F                               | Rent     |   |                | Reasor         | n For Moving                |
|                                     |          |   |                |                |                             |
| <b>Previous Address</b>             |          |   |                |                |                             |
| Street Address                      |          | City  | Stat           | e 2            | Zip                         |
| Date In                             |          | Date Out  | Land           | dlord Name     | Landlord Phone #            |
|                                     |          |   |                |                |                             |
| <b>Employment &amp; Income Info</b> | ormation | l   |                |                |                             |
| Income Source #1                    |          |   |                |                |                             |
| Employer Name/Income Source         |          |   | En             | nployer Addres | S                           |
| Position                            |          | Start Date  |                |                | End Date                    |
|                                     |          | / /   |                | / /            |                             |
|                                     |          |   |                | <u> </u>       |                             |
| Gross Per Paycheck                  |          | How Often Are you Paid? (Circle One) Once Per Month Twice Per Month |                |                | Self Employed?              |
| <b>5</b>                            |          | e Per Week Every  |                |                | Y or N                      |
| Income Source #2                    |          |   |                | •              |                             |
| Employer Name/Income Source         |          | Emp   | ployer Address |                |                             |
| Position                            |          | Start Date  |                |                | End Date                    |
|                                     |          | / /   |                |                | / /                         |
| Gross Per Paycheck                  |          | en Are you Paid? (C   |                |                | Self Employed?              |
| \$                                  |          | Once Per Month Twice Per Month Once Per Week Every Two Weeks        |                |                | Y or N                      |
| Amount                              | How Oft  | How Often Are you Paid? (Circle One)                                |                | Source         |                             |
| \$                                  |          | Once Per Month Twice Per Month<br>Once Per Week Every Two Weeks     |                |                |                             |
|                                     | Once P   | ei week Every IV  | VO WEEKS       |                |                             |

| C- A                        |           |                            |          |                  |
|-----------------------------|-----------|----------------------------|----------|------------------|
| Co-Applicant Information    |           | ) (T                       |          | T                |
| First Name                  |           | MI                         |          | Last Name        |
|                             |           |                            |          |                  |
| Social Security #           | Do        | OB                         | AGE      |                  |
|                             |           |                            |          |                  |
|                             |           |                            |          |                  |
| Phone                       | V         | Vork Phone                 | Email    | address          |
|                             |           |                            |          |                  |
| Current Address             |           |                            |          |                  |
| Street Address              |           | City                       | State    | Zip              |
|                             |           | •                          |          | •                |
|                             |           |                            |          |                  |
| How Long Lived There?       |           | Landlord Name              |          | Landlord Phone#  |
|                             |           |                            |          |                  |
|                             |           |                            |          |                  |
| Mo. Rent                    |           |                            | Re       | eason For Moving |
|                             |           |                            |          |                  |
|                             |           |                            |          |                  |
| Previous Address            |           |                            |          |                  |
| Street Address              |           | City                       | State    | Zip              |
|                             |           |                            |          |                  |
| Die                         | D + 0     | т 11 1                     | NT.      | Landlord Phone # |
| Date In                     | Date Out  | Landlord                   | Name     | Landiord Phone # |
|                             |           |                            |          |                  |
| Employment & Income Inf     | armatian  |                            |          |                  |
| Income Source #1            | oi mation |                            |          |                  |
|                             |           |                            |          |                  |
| Employer Name/Income So     | ource     |                            | Emplo    | oyer Address     |
|                             |           |                            |          |                  |
| Position                    |           | Start Date                 |          | End Date         |
|                             |           | / /                        |          | / /              |
|                             |           |                            |          |                  |
| Gross Per Paycheck          | How       | Often Are you Paid? (Cir   | cle One) | Self Employed?   |
| \$                          |           | ice Per Month Twice Per    |          | Sen Employed.    |
|                             |           | ce Per Week Every Two      |          | Y or N           |
| Income Source #2            |           | ·                          |          |                  |
|                             | 1#00      |                            | Employ   | yer Address      |
| Employer Name/Income Source |           |                            | Emplo    | yer Address      |
|                             |           |                            |          |                  |
| Position                    |           | Start Date                 |          | End Date         |
|                             |           | / /                        |          | / /              |
| Gross Per Paycheck          | How O     | ften Are you Paid? (Circle | One)     | Self Employed?   |
| \$                          |           | Per Month Twice Per Mo     |          |                  |
|                             | Once l    | Per Week Every Two We      | eeks     | Y or N           |

| 1                     | Name                  | DOB Ag                | Receiving Income Y or N    |
|-----------------------|-----------------------|-----------------------|----------------------------|
|                       |                       |                       | 11                         |
|                       |                       |                       |                            |
| Assets                |                       |                       |                            |
| Type                  | Bank/Institution Name | Account Balances      | Penalty to Convert to Cash |
| Checking #1           |                       |                       |                            |
| Checking #2           |                       |                       |                            |
| Checking #3           |                       |                       |                            |
| Savings #1            |                       |                       |                            |
| Savings #2            |                       |                       |                            |
| Savings #3            |                       |                       |                            |
| Money Market          |                       |                       |                            |
| Mutual Fund           |                       |                       |                            |
| Mutual Fund           |                       |                       |                            |
| 401K                  |                       |                       |                            |
| 401K                  |                       |                       |                            |
| Stocks/Bonds          |                       |                       |                            |
| Other                 |                       |                       |                            |
| Other                 |                       |                       |                            |
|                       |                       |                       |                            |
| <b>Household Expe</b> | nses                  |                       |                            |
| Type                  |                       | <b>Monthly Amount</b> |                            |
| Rent                  |                       | \$                    |                            |
| Renter's Insuranc     | ee                    | \$                    |                            |
| Utilities             |                       | \$                    |                            |
| Car Payment           |                       | \$                    |                            |
| Insurance             |                       | \$                    |                            |
| Student Loans         |                       | \$                    |                            |
| Other Loans           |                       | \$                    |                            |
| Credit Cards          |                       | \$                    |                            |
|                       |                       |                       |                            |
| Emergency Con         | ntact                 | 1                     |                            |
|                       |                       | Address               | Phone #                    |
|                       |                       | Address               | Phone #                    |
|                       |                       |                       |                            |

#### HRH Privacy Policy & Authorization Form

- I understand that Hudson River Housing provides housing stability counseling after which I will receive a written action plan consisting of recommendations for handling my situation, possibly including referrals to other housing agencies as appropriate.
- I agree to allow Hudson River Housing to pull my credit report at the time of intake. In lieu of a credit pull,
  I agree to provide Hudson River Housing with a copy of my credit report dated within 30 days of the intake date.
- I understand that Hudson River Housing receives Congressional funds through the Housing Stability Counseling Program (HSCP) and as such, is required to submit client-level information to the online reporting system and share some of my information with HSCP administrators or their agents for purposes of program monitoring, compliance and evaluation.
- I give permission for HSCP administrators and/or their agents to follow-up with me between now and June 30, 2026, for the purposes of program evaluation.
- I may be referred to other housing services of the organization or other agency or agencies as appropriate that may be able to assist with concerns that have been identified. I understand that I am not obligated to use any of the services offered to me.

Hudson River Housing leases/rents residential properties to the public. As a client of HSCP services, you are under no obligation to rent a property from Hudson River Housing. Hudson River Housing lists/sells properties to the public. As a client of HSCP services, you are under no obligation to purchase a property from Hudson River Housing, or use the services of Real Estate. Hudson River Housing is affiliated with the following businesses: Real Estate & Lending.

Hudson River Housing is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your "nonpublic personal information, such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization and signature on the HSCP Authorization Agreement. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information, and designing future programs.

#### Types of information that we gather about you:

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets and income; and
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit card usage; and
- Information we receive from a credit reporting agency, such as your credit history.

#### Release of your information to third parties

- So long as you have not opted out, we may disclose some or all of the information that we collect, as described above, to creditors, where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
- We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
- Within the organization, we restrict access to nonpublic personal information about you to those employees who
  need to know that information to provide services to you. We maintain physical, electronic, and procedural
  safeguards that comply with federal regulations to guard your nonpublic personal information

# Available Developments

(Please check the development(s) that you are interested in)

Please note that unit sizes and rent vary per development

| The<br>Beacon<br>Hip<br>Lofts | The<br>Beacon      | 7 Creek<br>Drive | 344 Main<br>Street | 121<br>Rombout<br>Avenue | Edgewater           |
|-------------------------------|--------------------|------------------|--------------------|--------------------------|---------------------|
| 18 Front<br>Street            | 445 Main<br>Street | 7 Creek<br>Drive | 344 Main<br>Street | 123 Rombout<br>Avenue    | Edgewater<br>Avenue |
|                               |                    |                  |                    |                          |                     |

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. I acknowledge that I have received information about Hudson River Housing's Privacy Policy and Housing Stability Program.

| ☐ I wish to opt or         | of Hudson River Housing's Housing Stability Program |  |
|----------------------------|---|--|
| Acknowledged & Agreed      |   |  |
| Signature of Applicant:    | Date:   |  |
| Please Print Name          |   |  |
|                            | ъ.  |  |
| Signature of Co-Applicant: | Date:   |  |
| Please Print Name:         |   |  |