SUPPORTIVE HOUSING MANAGEMENT SERVICES 803 EAST PITTSBURGH PLAZA EAST PITTSBURGH, PA 15112

(412) 829-3910 1-800-238-7555

Dear Applicant:

Supportive Housing Management Services is the property management division of ACTION Housing, Inc. Attached is a listing of the rental properties we offer.

Listed below is a chart indicating program income guidelines by family household size. Our property listings indicate which program guidelines are in effect for each site. Please note these guidelines represent Maximum income amounts. If your household income is lower than the designated program percentage, you may still qualify for occupancy, as long as the property you select does not also require a minimum household income.

Pittsburgh Area Median Incomes for Year 2018

Program	1 Person	2 Persons	3 Persons	4 Persons
30%	\$16,000	\$18,250	\$20,780	\$25,100
50%	\$26,600	\$30,400	\$34,200	\$38,000
60%	\$31,920	\$36,480	\$41,040	\$45,600
80%	\$42,600	\$48,650	\$54,750	\$60,800

Please note in reviewing our application the following sites offer admission priority to those eligible households whose family household income falls below 30% of the area median income:

1. Allegheny Independence House

3. Versailles/Archer Apartments

2. Leetsdale High Rise

PLEASE <u>DO NOT</u> SEND ANY IMPORTANT DOCUMENTS (Original or copy: Birth Certificate, Social Security Cards, ID and income because this will be asked for when you are considered for an apartment)

Due to the multi-program nature of our portfolio, we understand you may have questions as you review this application package. Please feel free to contact us with any questions. You may reach us by calling 412.829.3910 or 1.800.238.7555. We look forward to serving you with your housing needs.

Sincerely,

Jill Harding

Jill Harding
Waiting List Coordinator





SUPPORTIVE HOUSING MANAGEMENT SERVICES (SHMS) 803 EAST PITTSBURGH PLAZA, EAST PITTSBURGH, PA 15112 (412) 829-3910 or 1-800-238-7555

APPLICATION

Instructions

Address

Phone

mstructions				
1. All * (Asterisk) Areas need to	be completed or Applic	ation will be sent back		
2. All Information Must be Printe	ed and <u>Legible</u>			
3. If you change your Address, yo	ou MUST notify SHMS	in writing as soon as possibl	e. If we do no	ot have a current
address at all times, you may lo	ose your position on the	waiting list.		
4. Applications can be mailed to a	ddress above			
I. APPLICANT				
	Middle Name:	Last N	ame:	
		Sta	te	Zip
*Home Phone		Cell Phone		
II. CURRENT LANDLORD				
*Current Landlord's Name				
*Address	City	Sta	te	Zip
Phone		_		
How Long did you reside at this ac	ddress: From	То		
III. HOUSEHOLD INFORMAT	TION			
*Name of Each Household	* Social Security	*Relationship to Head of		
Member Who is Applying	Number	Household	Sex	* Date of Birth
11 0		Head of Household	☐ Male	
Applicant Name			☐ Female	
			☐ Male	
Co-Applicant/Dependent			☐ Female	
			☐ Male	
Dependent			☐ Female	
			□ Male	
Dependent			☐ Female	
IV. ADDITIONAL CONTACT- mailings, telephone (family mem	•	1 1	we should co	orrespond, e.g.,
Contact Name				

City

State Zip

l •	or mobility impairment	, visual impairment, or hearing impa	airment needed for you or
member of your household			
*VI. Income		*VII Net Family Assets	
Income Source	Monthly Amount	Asset Source	Approximate Value
Gross Wages, Salaries	\$	Checking	\$
Net Business Income	\$	Savings	\$
Gross Social Security	\$	Direct Express Card	\$
Gross Pension	\$	CD's	\$
Public Assistance	\$	Money Market	\$
Alimony/Child Support	\$	Other (Bonds, Annuities, etc.)	\$
Unemployment/Workers Comp	\$		
SSI (Supplemental Security Income)	\$		
Other (insurance, IRA, etc.)	\$		
*VIII. Additional Questions			
Please circle Yes or No to the j	following questions:		
Yes No 1. Is any member	of the household enroll	ed as a student at an Institute of Hig	gher Education?
Yes No 2. Have you or an	y household member ev	ver been convicted of a felony or dr	ug related activity?
Yes No 3. Are you or any	household member(s) s	subject to a State Lifetime Sex Offe	nder Registration?
Yes No 4. Do you curre	ntly have a Section 8	3 Voucher?	
List all States in which you a	nd all household memb	ers have lived:	
Dist all States in which you a	nd an nousenoid memo	ers have rived.	
YC 1.X7	6.1	1 . 1 .	_
If you answered Yes to any o	t these questions, pleas	e explain below:	
I certify the above information is	true and complete to the	ne best of my knowledge. I underst	and and authorize inquirie
•	-	and to verify the above statements.	-
and criminal background check.			
*		*	
Applicant Signs	ature	Co-Applicant Sign	nature



Date



Date

^{*}The properties listed above require a <u>HUD verification of a disability form</u>, which will be processed once your application is submitted. Head of Household must be person with qualifying disability

Subsidized Housing for <u>SENIOR CITIZENS</u>

SUBSIDIZED HOUSING APPLICATION FOR... SENIOR CITIZENS (62 or older)

Put a check mark in the "check here" box for as many properties for which you are interested

	Check here box for as many	groperties for which you		* Check
Property Name & Address	Housing for:	Amenities	# of Bdrms	Here
Bessemer Manor	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
850 Main Street,		laundry, community room,	1	
East Pittsburgh, PA 15112	50% Area Median Income	elevator, on-site parking		
Center Township	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
3671 Brodhead Rd.		laundry, community room,	1	
Monaca, PA 15061	50% Area Median Income	elevator, on-site parking		
Dormont Place	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
2900 Belrose Avenue		laundry, community room,	1	
Dormont, PA 15216	50% Area Median Income	elevator, on-site parking		
Forest Hills Senior Apartments	ONLY for persons <u>62 yrs. or older</u>	A/C, range & Refrig,		
2111 Ardmore Blvd.		laundry, community	1	
Forest Hills, PA 15221	50% Area Median Income	room,elevator,		
Greenfield Terrace (Greenfield)	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
3909 Raff Street		laundry, community room,	1	
Pittsburgh, PA 15207	50% Area Median Income	elevator, on-site parking		
Leetsdale Manor	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig, laundry		
27 Spencer Street	or person with disability	room, elevator, community	1	
Leetsdale, PA 15056	30%, 50% Area Median Income	/computer room and on-site parking		
Miller Avenue Senior Apartments	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig, elevator		
16 Miller Avenue		laundry, community room,	1	
Duquesne, PA 15110	50% Area Median Income	on-site parking		
Northside Coalition Senior	ONLY for persons 62 yrs. or older	A/C		
Housing		A/C, range & refrig, elevator laundry, community room,	1	
1500 Brighton Place		on-site parking	1	
Pittsburgh, PA 15212	50% Area Median Income	r 8		
Ormsby Manor (Mt. Oliver)	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,	1	
113 Ormsby Avenue		laundry, community room,	1	
Pittsburgh, PA 15210	50% Area Median Income	elevator, on-site parking		
Primrose Apartments	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
1240 Denning Way		laundry, community room,	1	
North Versailles, PA 15137	50% Area Median Income	elevator, on-site parking		
Second Baptist Senior Apts	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
128 W. 12 th Avenue		laundry, community room,	1	
Homestead, PA 15120	50% Area Median Income	elevator, on-site parking		
Sylvania Place (Beltzhoover)	ONLY for persons 62 yrs. or older	A/C, range & refrig,		
29 Sylvania Avenue		laundry, community room,	1	
Pittsburgh, PA 15210	50% Area Median Income	elevator, on-site parking		
Versailles/Archer Apartments	ONLY for persons <u>62 yrs. or older</u>	A/C, range and refrigerator,		
3221 Versailles Avenue		on-site parking; community	1	
501 Archer Street	30%, 50% Area Median Income	room and elevator at		
McKeesport, PA 15132		Versailles		
West Lake Apartments (Elliot)	ONLY for persons <u>62 yrs. or older</u>	A/C, range & refrig,		
1015 Crucible Street		laundry, community room,	1	
Pittsburgh, PA 15220	50% Area Median Income	elevator, on-site parking		

MARKET RENT - NON-SUBSIDIZED HOUSING

MARKET RENT - UNSUBSIDIZED HOUSING APPLICATION- Section 8 Voucher Welcome MINIMUM HOUSEHOLD INCOME APPLIES

Do you have a Section 8 Voucher?	<i>Yes</i>	No
Are you a U.S. Armed Services Veteran?	Yes	No

FAMILY NON-SUBSIDIZED HOUSING- Section 8 Voucher Welcome

i Gas	A/C, range and refrigerator, on-site parking, on bus line.	1		
		1		
l Gas				
l Gas		2		
	No pets, 2-Story Walk-up.	Studio		
ian Income				
Plus Electric	Newly remodeled, equipped			
	kitchen, wall-to-wall carpet,	1		
	laundry room, elevator,			
ea Median Income	community room, parking, on bus line, A/C			
ing \$575				
ing \$675		1		
Median Income	A/C, Elevator.	2		
Owner has established waiting list preference for half the apartments at Dave Wright Apartments for persons who have been diagnosed as being on the Autism Spectrum. Are you applying for this owner preference:YESNO				
	ian Income 6 Plus Electric ea Median Income ing \$575 ing \$675 Median Income ne apartments at Dave	ian Income S Plus Electric Newly remodeled, equipped kitchen, wall-to-wall carpet, laundry room, elevator, community room, parking, on bus line, A/C ing \$575 ing \$675 Equipped kitchen, laundry room, parking, on bus line, A/C, Elevator. Median Income ne apartments at Dave Wright Apartments for person	ian Income S Plus Electric Newly remodeled, equipped kitchen, wall-to-wall carpet, laundry room, elevator, community room, parking, on bus line, A/C ing \$575 ing \$675 Equipped kitchen, laundry room, parking, on bus line, A/C, Elevator. Median Income ne apartments at Dave Wright Apartments for persons who have be	

NON-SUBSIDIZED HOUSING- Persons 55 and Older- Section 8 Voucher Welcome

Property Name & Address	Housing for:	Amenities	# of Bdrms	* Check Here
124 W. Sycamore Street	Plus Electric	A/C, range and refrigerator, community room, elevator, laundry room. Tenant Pay Electric. No Parking on site	1	

NON-SUBSIDIZED HOUSING- Persons 62 and Older- Section 8 Voucher Welcome

Property Name & Address	Housing for:	Amenities	# of Bdrms	* Check Here
		A/C, equipped kitchen, wall to wall carpet, laundry room,	1	
Russellton, PA 15076	60%, 80% Area Median Income	community room, elevator, laundry room. Tenant Pay Electric. On site parking		

Note: You will receive a letter once your application is processed

APPLICATIONS CAN BE MAILED TO:

SUPPORTIVE HOUSING MANAGEMENT SERVICES 803 EAST PITTSBURGH PLAZA EAST PITTSBURGH, PA 15112 Supplemental and Optional Contact Information for HUD-Assisted Housing Applicants

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) Emergency Unable to contact you Termination of rental assistance Eviction from unit Late payment of rent	Assist with Recertification P Change in lease terms Change in house rules Other:	rocess	
Commitment of Housing Authority or Owner: If you are approarise during your tenancy or if you require any services or special issues or in providing any services or special care to you.			
Confidentiality Statement: The information provided on this for applicant or applicable law.	rm is confidential and will not be discl	osed to anyone except as permitted by the	
Legal Notification: Section 644 of the Housing and Community requires each applicant for federally assisted housing to be offered organization. By accepting the applicant's application, the housing requirements of 24 CFR section 5.105, including the prohibitions programs on the basis of race, color, religion, national origin, sex age discrimination under the Age Discrimination Act of 1975.	d the option of providing information g provider agrees to comply with the on discrimination in admission to or	regarding an additional contact person or non-discrimination and equal opportunity participation in federally assisted housing	
Check this box if you choose not to provide the contact	information.		
Signature of Applicant		Date	

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.