



Dear Applicant:

Thank you for your inquiry into Bausman Place Apartments, located at 196 Charles Road, Lancaster PA 17603. Enclosed is a preliminary rental application for your completion and return. Please complete all lines of the application and return it to:

**COMMUNITY BASICS INC.
941 WHEATLAND AVE, SUITE 403, LANCASTER PA 17603**

A processing fee of \$30 per adult household member (persons age 18 & older) must be included with the application. This fee covers the cost of completing a credit and criminal check for all household members age 18 or older. Payment should be in the form of check or money order and made payable to Community Basics Inc. Payment of this fee is not a contractual obligation and does not guarantee housing. **The processing fee is non-refundable whether your application is accepted or is rejected.**

Any application that is received incomplete or missing the application processing fee will be returned.

The Resident Selection Criteria requires that applicants pass credit checks, criminal background checks, sex offender database search, landlord references, and income & asset verifications. Applicants must be income qualified for our community, with income and assets being verified through third parties. The minimum gross annual income requirement for a 1 bedroom apartment is \$15,744.00; the minimum gross annual income requirement for a 2 bedroom apartment is \$18,912.00; and the minimum gross annual income requirement for a 3 bedroom apartment is \$21,864.00.

If your application fails any of the criteria (for example: your household is over-income, under-income, have adverse credit/criminal/landlord references or listed on national sex offender registry) your application will be rejected for housing. Knowingly providing false information on an application is grounds for rejection.

Rental rates are as follows:

One bedroom rents range from \$656.00-\$894.00 per month

Two bedroom rents range from \$788.00-\$1125.00 per month

Three bedroom rents range from \$911.00-\$1367.00 per month

Rental rates include all utilities with the exception of phone, cable and internet services.

All apartments are equipped with a refrigerator/freezer, self-cleaning oven, dishwasher and central air conditioning. There are laundry facilities, a community room and off street parking on site as well. Residents will also have access to supportive services for their needs.

If you have any questions, please contact our office at 717-735-9590 or via email at info@communitybasics.com. Thank you for applying to our community!

PRELIMINARY RENTAL APPLICATION - COMMUNITY BASICS INC

PLEASE MARK INTEREST:	RETURN COMPLETED APPLICATION TO:	PLEASE MARK ONE:
BAUSMAN PLACE APARTMENTS	COMMUNITY BASICS INC	<input type="checkbox"/> 1 BEDROOM
146 CHARLES RD	941 WHEATLAND AVE, STE 403	<input type="checkbox"/> 2 BEDROOMS
LANCASTER, PA 17603	LANCASTER PA 17603	<input type="checkbox"/> 3 BEDROOMS
SMOKE FREE PROPERTY	<i>the following is confidential and will not be disclosed without your consent</i>	

COMPLETE ALL THE INFORMATION BELOW

Applicant's Name: (first, middle initial, last)	EMAIL:	The Phone Number to reach you
Present Street Address:	City: State: Zip Code:	No. Yrs at Present Address:
Former Street Address (if at present Address for less than 3 yrs.)	City: State: Zip Code:	No. Yrs at Former Address:
Current Housing Status: Please provide the name, address & phone number of all your landlords for past 3 yrs.		
Current Landlord Name:	Current Landlord's Address:	Landlord's Phone #:
Previous Landlord Name:	Previous Landlord's Address:	Landlord's Phone #:
Previous Landlord Name:	Previous Landlord's Address:	Landlord's Phone #:
DO YOU HAVE A SECTION 8 VOUCHER? YES _____ NO _____	DO YOU HAVE A SECTION 8 CERTIFICATE? YES _____ NO _____	
Name of Employer	Address of Employer	Employer's Phone #:
Type of Business	Are you self Employed? Yes _____ No _____	No. Yrs. On Job
Name of Previous Employer (if at present job less than 2 yrs)	Address of Previous Employer	Employer's Phone #:
Type of Business	Were you self Employed? Yes _____ No _____	No. Yrs. On Job
Co-Applicant's Name:	Email Address:	Home Phone:
Co-Applicant's Present Street Address:	City: State: Zip Code:	No. Yrs at Present Address:
Co-Applicant's Former Street Address (if at present Address for less than 3 yrs.)	City: State: Zip Code:	No. Yrs at Former Address:
Co-Applicant's Name of Employer	Address of Employer	Employer's Phone #:
Co-Applicant's Type of Business	Are you self Employed? Yes _____ No _____	No. Yrs. On Job
Co-Applicant's Name of Previous Employer (if at present job less than 2 yrs)	Address of Previous Employer	Employer's Phone #:
Type of Business	Were you self Employed? Yes _____ No _____	No. Yrs. On Job
ARE YOU HOMELESS? YES _____ NO _____	DESCRIBE YOUR SITUATION PLEASE?	

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ANNUAL INCOME

SOURCE	APPLICANT	CO-APPLICANT	OTHER HOUSEHOLD MEMBERS 18 & OLDER	TOTAL PER YEAR:
GROSS SALARY				
OVERTIME PAY				
COMMISSIONS				
TIPS/BONUSES				
UNEMPLOYMENT BENEFITS				
WORKER'S COMP.				
SOCIAL SECURITY				
PENSION				
RETIREMENT FUNDS				
TANF/WELFARE				
ALIMONY				
CHILD SUPPORT				
INTEREST OR DIVIDENDS				
NET INCOME FROM BUSINESS				
NET RENTAL INCOME				
OTHER:				

TOTAL:

ASSETS	CASH VALUE	INCOME FROM ASSETS	NAME OF BANK
CHECKING			
SAVINGS			
CERTIFICATES OF DEPOSIT			
MUTUAL FUNDS			
MONEY MARKET			
SAVINGS BONDS			
REAL ESTATE			
LIFE INSURANCE			
OTHER:			
TOTAL:	\$	\$	

I have have not - (MARK ONE BOX PLEASE) have not disposed of any asset(s) valued at \$1,000 or more in the past two years for less than fair market value of the item. If yes, please list asset value under the "other" column in the listing of assets above.

HOUSEHOLD COMPOSITION. List the head of your household and all members who would live in your home. Give the relationship of each family member to the head.

MEMBER NO.	FULL NAME:	RELATIONSHIP	BIRTH DATE (M/D/Y)	SOCIAL SECURITY NO.
Head of Household:		SELF		
2				
3				
4				
5				
6				

Are there any special housing needs or reasonable accommodations that the household will require?

 Are You Disabled? Yes: _____ No: _____

MOTHER'S MAIDEN NAME: _____
 APPLICANT'S MAIDEN NAME: _____

Are ALL household members students? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____
 If yes, please explain: _____

Are you a registered sex offender? Yes _____ No _____
 If yes, which state(s) are you registered in: _____

List all states where you have resided: _____

Do you own a firearm? _____ Yes _____ No

Have you ever been evicted from a dwelling for any reason? Yes _____ No _____
 If yes, please explain: _____

Are you or anyone in your household a victim of domestic violence, stalking, dating violence? _____ Yes _____ No

Have you or anyone in your household ever been in foster care? _____ Yes _____ No

The information provided above is true & complete to the best of my/our knowledge and belief. I/We consent to the disclosure of income & financial information from my/our employer and financial references for the purpose of income & asset verification related to my/our application for tenancy. I/We consent to a criminal, credit background check and review for the purpose of references related to my/our application for tenancy. I/We understand that any misrepresentation may result in the denial of my/our application for tenancy. I/We have read this application and understand its contents. I/We understand this application is not a rental agreement, contract, lease or offer to rent. All Applications are subject to approval by the Owner and/or Management Agent. I release from all liability all persons, companies & corporations supplying such information. I authorize the release of information to CBI.

Applicant's signature: _____ Date: _____
 Co-Applicant's signature: _____ Date: _____
 Other Applicant's signature: _____ Date: _____
***ALL ADULT HOUSEHOLD MEMBERS MUST SIGN ABOVE**

MARKETING

How did you hear about Community Basics, Inc, or the community you are interested in?

MARK AS MANY AS APPLY:

<input type="checkbox"/> CBI WEBSITE	<input type="checkbox"/> SOCIALSERVE.COM
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<input type="checkbox"/> REFERRAL-CBI EMPLOYEE	<input type="checkbox"/> APARTMENTS.COM
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<input type="checkbox"/> NEWSPAPER. Name of Paper? _____	<input type="checkbox"/> REFERRED BY A SOCIAL AGENCY
--	--

<input type="checkbox"/> OTHER WEBSITE	<input type="checkbox"/> HOUSING AUTHORITY REFFERAL
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<input type="checkbox"/> DRIVE--BY	<input type="checkbox"/> REFERRAL - CBI RESIDENT
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APARTMENTSMART.COM PAHOUSINGSEARCH.COM

<input type="checkbox"/> OTHER - PLEASE DESCRIBE: _____

In accordance with data collection information required by the U.S. Department of Housing & Urban

RACE			
PLEASE SELECT ONE OR MORE			
<input type="checkbox"/>	WHITE	<input type="checkbox"/>	BLACK OR AFRICAN AMERICAN
<input type="checkbox"/>	ASIAN(SELECT A SUB-CATEGYOY AS WELL)		
<input type="checkbox"/>	ASIAN INDIAN	<input type="checkbox"/>	CHINESE
<input type="checkbox"/>	JAPANESE	<input type="checkbox"/>	KOREAN
<input type="checkbox"/>	OTHER ASIAN	<input type="checkbox"/>	FILIPINO
<input type="checkbox"/>	VIETNAMESE	<input type="checkbox"/>	OTHER ASIAN
<input type="checkbox"/>	AMERICAN INDIAN OR ALASKA NATIVE	<input type="checkbox"/>	AMERICAN INDIAN/ALASKA NATIVE & BLACK/AFRICAN AMERICA
<input type="checkbox"/>	NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (PLEASE SELECT A SUB-CATEGORY AS WELL)	<input type="checkbox"/>	OTHER
<input type="checkbox"/>	NATIVE HAWAIIAN	<input type="checkbox"/>	GUAMANIAN OR CHAMORRO
<input type="checkbox"/>	SAMOAN	<input type="checkbox"/>	OTHER PACIFIC ISLANDER
<input type="checkbox"/>	DECLINE TO REPORT	<input type="checkbox"/>	OTHER PACIFIC ISLANDER
ETHNICITY (SELECT ONE)		GENDER	
ETHNICITY		GENDER	
<input type="checkbox"/>	NOT OF HISPANIC, LATINA/O OR SPANISH ORIGIN	<input type="checkbox"/>	MALE
<input type="checkbox"/>	HISPANIC, LATINO/A OR SPANISH ORIGIN	<input type="checkbox"/>	FEMALE
<input type="checkbox"/>	PUERTO RICAN	<input type="checkbox"/>	MEXICAN, MEXICAN AMERICAN, CHICANO/A
<input type="checkbox"/>	CUBAN	<input type="checkbox"/>	ANOTHER HISPANIC, LATINO/A OR SPANISH ORIGIN
<input type="checkbox"/>	DECLINE TO REPORT		

ACT 11 AMENDED – CONSUMER NOTICE

Section 806(b) of the Real Estate Licensing and Regulation Act, 63 P.S. § 455.608(b) requires that brokers, associate brokers, salespersons or rental listing referral agents provide the following written statement at the time of initial interview or when the rental application is taken:

**CONSUMER NOTICE
THIS IS NOT A CONTRACT**

Jo A. Raff, Lisa Kashner, Monica Paquin, and/or Ellen Souders hereby states that with respect to the Community Basics, Inc. managed communities of:

- | | |
|-------------------------------------|--------------------------------|
| Country Club Apartments | Park Avenue Apartments |
| Golden Triangle Apartments | Walnut Street Apartments |
| New Holland Apartments | Three Center Square Apartments |
| Nissly Chocolate Factory Apartments | Old Market Apartments |
| Cloister Heights | Marietta Senior Apartments |
| Fordney House | Lincoln House |
| Brunswick Farms Apartments | Saxony Ridge Apartments |
| Bausman Place Apartments | |

THEY ARE DIRECT EMPLOYEES OF THE OWNER/LANDLORD, COMMUNITY BASICS, INC.

I acknowledge that I have received this notice:

Applicant/Consumer

Date

I certify that I have provided this notice:

Licensee

Date

**VIOLENCE AGAINST WOMEN AND JUSTICE DEPARTMENT
AUTHORIZATION ACT OF 2005**

Please note, the provisions of the Violence against Women and Justice Department Act of 2005 offers protections to you:

* A landlord may not consider incidents of domestic violence, dating violence, or stalking as serious or repeated violations of the Lease or other "good cause" for termination of assistance, tenancy or occupancy rights of the victim of abuse.

* The landlord may not consider criminal activity directly related to abuse, engage by a member of a tenant's household or any guest or other person under the tenant's control, cause for termination of assistance, tenancy, or occupancy rights if the tenant or immediate member of the tenant's family is the victim or threatened victim of that abuse.

* The landlord may request in writing that the victim ,or a family member on the victim's behalf, certify that the individual is a victim of abuse and that the Certification of Domestic Violence, Dating Violence or Stalking, Form HUD 91066, or other documentation as noted on the certification form, be completed and submitted within fourteen (14) business days, or an agreed upon extension date to receive protection under VAWA. Failure to provide the certification or other supporting documentation within the specified timeframe may result in eviction.

I/we have been informed of the rights and protections, listed above.

Signature: _____

Signature: _____

Date: _____

Section 42 Tax Credit Program

What is Section 42?

The Tax Credit Reform Act of 1986 created the Low Income Housing Tax Credit Program (LIHTC). The program regulations are under Section 42 of the Internal Revenue Code. The tax credit encourages developers to build affordable housing to meet the needs of the community. As a condition for receiving Housing Tax Credits, owners must keep the units affordable for a specified number of years. Affordable rents are defined and calculated based on Median Household income figures published annually by the US Department of Housing and Urban Development (HUD).

What does it cost?

The residents who live in Section 42 units must be income and program eligible. The rent that a Section 42 resident will pay is based on a **fixed rental fee for the unit size that is lower than the average market rate rent in the area.**

What does it offer?

Affordable rents that are lower than similar market rate units in the community. **RENTS ARE NOT BASED ON INCOME. RENT INCREASES EACH YEAR BETWEEN 2-5%.**

What should I be prepared for?

It is difficult to identify which rental properties participate in the Section 42 program.

You will be asked to complete an application that requests information regarding your household composition, income and student status. These factors will determine your eligibility for this program.

Qualified income levels are determined by the local office of the Department of Housing & Urban Development (HUD), based on two factors: 1) a percentage of the median household income for the county or metropolitan statistical area in which the development is located; and 2) the number of people in your household.

Your income level is based on the combined projected gross income, including income from assets, for the next 12 months of all household members 18 years of age and older.

You must re-certify your income and family size before you are offered a new lease. This process starts about 90 days before your lease renewal date.

The unit is being rented to you and those identified on the rental application. Any changes in household size or income must be reported in writing and may require that you reapply for eligibility.