

Berrellesa Palms Apartments

Affordable Senior Housing in Martinez, CA

Subsidized housing for 62+ who are homeless or at risk of homelessness with a long term chronic health condition



Dear Applicant(s),

Thank you for your interest in applying at Berrellesa Palms. Berrellesa Palms offers 48 affordable one bedroom units in Martinez CA. This affordable housing development features an array of amenities, including green design elements plus on-site property management and resident services. To maximize comfort and livability inside the units, universal design elements and full accessibility features are incorporated throughout the units, including roll in showers in some units, in order to accommodate a variety of physical needs over time. There are two units for the hearing/vision impaired.

Common area amenities include a computer room, a health and fitness room, a variety of community gathering and seating areas, and common laundry rooms on each floor. An outdoor courtyard will include seating as well as community garden plots for residents' use.

Berrellesa Palms is close to local services and business, several recreational parks and ample public transit options. Just a few blocks from Martinez's historic downtown, Berrellesa is also walking distance from an Amtrak station and the trails along the Martinez Regional Shoreline. The Martinez public library, the Martinez Senior Center, and an active weekly farmer's market are all less than a half mile away.

Berrellesa Palms Apartments

Affordable rents are income restricted in accordance with the Low Income Housing Tax Credit (LIHTC) program, the Housing Choice Voucher project based voucher program, and other regulatory agreements. Please refer to the last page of this flyer for rent and income limits.

All 48 units must have one household member who is of age 62 or older and must meet certain homelessness, disability, and/or additional income requirements. Additionally:

- There are limited units for HOPWA qualified households (individuals living with HIV/AIDS)
- Most units are for people with Long-Term Chronic Health Conditions; Long-Term Chronic Health Conditions are defined by the California Department of Housing and Community Development's Multifamily Housing Program (MHP) and require at least one the following 3rd party verifications:
 - From an entity authorized under the IHSS program verifying eligibility for at least 20 hours per week of IHSS personal care services.
 - From an entity authorized under the PACE program to make determinations verifying eligibility for PACE services.
 - From an entity authorized under the Multipurpose Senior Services Program verifying eligibility for the Multipurpose Senior Services Program.
 - From an entity authorized under the Assisted Living Waiver Pilot Program (ALWPP) verifying eligibility for the ALWPP (or its successor).

For more information on eligibility for one of these programs please contact the Contra Costa County information and Assistance Senior and Disabled Helpline at 925-229-8434

- All units are restricted to individuals meeting certain homelessness and/or income requirements, including any one of the following:
 - Households paying more than 50 percent of their income in housing costs.
 - Households with income at or below 20 percent of Area Median Income (AMI) (currently \$12,880* for one person and \$14,720* for two people).
 - Face immediate eviction and have been unable to identify a subsequent residence.
 - Face imminent release from an institution where other housing placement resources are not available
 - Reside in an overcrowded setting (more than two persons per living/sleeping area) in which the household does not hold a lease.
 - Reside in substandard housing subject to a current official vacation notice.
 - Homeless
 - Moving from an emergency shelter
 - Moving from Transitional Housing
 - An individual who lacks a fixed, regular, and adequate nighttime residence:
 - A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels (weekly or daily rental SRO or Motel), congregate shelters, and Transitional Housing for the mentally ill);
 - An institution that provides a temporary residence for individuals intended to be institutionalized
 - A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

* 2014 limits; subject to annual revision



Berrellesa Palms Apartments

To apply, please mail your complete Pre-Application and Grounds for Non-Acceptance form as soon as possible to:

**Berrellesa Palms
c/o The John Stewart Company
1388 Sutter Street, 11th Floor
San Francisco, CA 94109**

To enable us to process your pre-application, please make sure to submit a complete pre-application and Grounds for Non-Acceptance form signed by the head of household. **Incomplete pre-applications will be rejected.**

All pre-applications must be received by mail only by February 7th, 2014, to be included in the initial list. All others will be stamped on the date in which they are received and placed on the HACCC waiting list. We will not accept pre-applications that are faxed or hand-delivered. Please take your time in **completely and accurately** completing the pre-application, and then mail it as soon as possible.

Each household may only submit one pre-application. Duplicate household pre-applications will be removed from the lottery. Please submit only one pre-application. The Resident Selection Criteria is available upon request.

- **Income and other Restrictions apply. See 4th page for more information.**
- **All units are subsidized by the Housing Authority of Contra Costa County's Housing Choice Voucher Project Based Voucher Program.**
- **Units comprised of full-time students do not qualify unless exempted by Section 42 of the Internal Revenue Code.**





Berrellesa Palms Apartments Affordable Housing in Martinez, CA

All pre-applications must be received by mail by February 7, 2014 to be included in initial list. We will not accept applications that are faxed or hand delivered. Please take your time in accurately completing the application, and then mail it as soon as possible.

Please refer to Area Medium Income (AMI) limits (subject to change) and rents (subject to change) listed below for the available units.

These limits are effective 2014 and are adjusted annually by the Tax Credit Allocation Committee and HUD.

Number of Units	Number of Units**	Rents	Income Limits based on the number of people in your family (Subject to change)	
			1 person	2 people
One Bedroom (20% AMI) HOPWA	3	20% income	\$12,880	\$14,720
One Bedroom (30% AMI) chronic illness	45	30% income	\$19,320	\$22,080

- MINIMUM INCOME: is 2.5 times the monthly rent as calculated by the Housing Authority. If appealed, the household may demonstrate the ability to pay rent for consideration.

**Proposed

Applicants desiring an affordable unit are subject to the policy on Resident Selection and third party income and asset verification to determine the household's combined annual income in accordance with the Low Income Housing Tax Credit Program requirements and other regulatory agreements. Restrictions on full-time student households also apply.

Equal Housing Opportunity

Berrellesa Palms Pre-Application for 1-Bedroom Apartments

NOTE: All pre applications must be received by mail only to be included in the site based waiting list managed by the Contra Costa Housing Authority. Please use ink.

DEADLINE FOR INITIAL LIST: February 7, 2014

A complete application will need to be filled out at a later date.

PLEASE PRINT CLEARLY IN ENGLISH

First Name	MI	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	Month	Day Year
<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number	Telephone Number	Extension
<input type="text"/>	<input type="text"/>	<input type="text"/>
Mailing Address		Apt. Number
<input type="text"/>		<input type="text"/>
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

REFERING CASE MANAGEMENT ORGANIZATION:

ORGANIZATION: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

NAME OF CONTACT: _____

Please consider completing this OPTIONAL Section. Do you require special unit design features? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes: <input type="checkbox"/> Visual/Hearing impairment <input type="checkbox"/> Mobility impairment
Race (OPTIONAL): <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander	Hispanic <input type="checkbox"/> Yes <input type="checkbox"/> No

1. How did you hear about us? (What agency or newspaper): _____
2. How many people will live in your home? Include yourself: 1 2 3
3. Total **gross monthly** income from all sources (Before any deductions). Your estimate. \$ _____
4. Total **gross annual** income from all sources (Before any deductions). Your estimate. \$ _____
5. Do you have a Housing Choice voucher? Yes No
6. Are all household members full-time students? Yes No

EQUAL HOUSING OPPORTUNITY
 Telephone Device for the Deaf: (415) 345-4470



Berrellesa Palms Pre-Application for 1-Bedroom Apartments

7. Is at least one person in your Household over 62 years of age? Yes No
8. Are you or your co-applicant(s) eligible for HOPWA units? Yes No
There are limited units designated for households living with HIV/AIDS or related illnesses
9. Are you or your co-applicant (s) a disabled adult? Yes No
All other units not specified in question #8 are aside for people with Long-Term Chronic Health Conditions; Long-Term Chronic Health Conditions are defined by the California Department of Housing and Community Development's Multifamily Housing Program (MHP) and at least one the following 3rd party verifications:
- Signed letter or contract from an entity authorized under the IHSS program verifying eligibility for at least 20 hours per week of IHSS personal care services.
 - Signed letter (or form) from an entity authorized under the PACE program to make determinations verifying eligibility for PACE services.
 - Signed letter (or form) from an entity authorized under the Multipurpose Senior Services Program verifying eligibility for the Multipurpose Senior Services Program.
 - Signed letter (or form) from an entity authorized under the Assisted Living Waiver Pilot Program (ALWPP) verifying eligibility for the ALWPP (or its successor).
10. Are you currently homeless or at risk of homelessness? Yes No
Berrellesa Palms is restricted to individuals meeting certain homelessness and/or income requirements, including any one of the following:
- Households paying more than 50 percent of income in housing costs.
 - Households with income at or below 20 percent of Area Median Income (AMI) with no rental subsidy available to the household (currently \$12,880 for one person and \$14,720 for two people*). * 2014 limits; subject to annual revision.
 - Reside in an overcrowded setting (more than two persons per living/sleeping area) in which the household does not hold a lease.
 - Reside in substandard housing subject to a current official vacation notice.
 - Homeless
 - Moving from an emergency shelter
 - Moving from Transitional Housing
 - An individual who lacks a fixed, regular, and adequate nighttime residence:
 - A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels(weekly or daily rental SRO or Motel), congregate shelters, and Transitional Housing for the mentally ill);
 - An institution that provides a temporary residence for individuals intended to be institutionalized
 - A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
 - Face immediate eviction and have been unable to identify a subsequent residence.
 - Face imminent release from an institution where other housing placement resources are not available

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Berrellesa Palms Pre-Application for 1-Bedroom Apartments

The following are Housing Authority of the County of Contra Costa preferences for the project based subsidy:

11. Do you or any household member live, work or have you been hired to work in the Housing Authority of Contra Costa County's (HACCC) Jurisdiction? Yes No

12. Are you or any household member on the Contra Costa Housing Authority waitlist Yes No

13. Do you or any household member live, work or have you been hired to work in the City of Martinez? Yes No

14. Please list all household members who will live in the assisted unit including yourself:

Name	SSN	Date Of Birth	M / F
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15. Are you disabled? Yes No

If yes, check one of the following boxes: - Physical Mental Developmental HIV/AIDS

16. Have you been involuntarily displaced from housing due to a federal or state declared disaster or government action? (e.g., code enforcement, public improvement or development, witness protection program)? Yes No

17. Have you graduated from an approved transitional housing program that partners with the Housing Authority of Contra Costa County (HACCC), such as Shelter Plus Care? Yes No

18. If you are employed, what City do you live, work or were recently hired to work in: _____

19. Have you previously been terminated from the Housing Authority of the County of Contra Costa HCV Program due to insufficient program funds? Yes No

20. Are you a veteran? Yes No

I understand that all of these answers will be checked. I certify that the above statements are true and correct. I understand that false statements or information are punishable under federal law and cause for immediate denial of housing.

Applicant Signature: _____

Date: _____

All pre-applications must be received by mail by February 7, 2014, to be included in the initial list.

Pre-applications received after that date will be placed on the waitlist

Please mail your signed pre-application and signed Grounds for Non-Acceptance as soon as possible to:

**Berrellesa Palms
C/o The John Stewart Co.
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Grounds for Non-Acceptance of Rental Application

We welcome your application to rent an apartment at Berrellesa Palms. It is the responsibility of each applicant to provide any and all information required to determine eligibility. The following lists the reasons why we might deny your application. Persons with disabilities may be entitled to reasonable accommodations.

- 1) **Credit** (An exception for extraordinary medical expenses, foreclosures, and school loans may be permitted.)
 - (a) A single unmet credit problem in excess of \$2500 within the past 3 years.
 - (b) Total unmet credit problems (including government tax liens) in excess of \$5000 within the past 3 years.
 - (c) A bankruptcy discharged within the last 3 years.
- 2) **Rental History**
 - (a) A judgment against an applicant obtained by the current or previous landlords.
 - (b) An unmet obligation owed to a previous landlord.
 - (c) The applicant must have made timely payments of the last year's rental payments.
 - (d) A negative landlord reference
- 3) **Personal History**
 - (a) A history of violence or abuse (physical or verbal), in which the applicant was determined to be the antagonist.
 - (b) Current abuse of alcohol or use of illegal drugs. Use shall constitute abuse for illegal drugs.
- 4) **Criminal Background Check**

A check will be made of criminal conviction records for the past seven years for all adult Applicants of the household; however any convictions reported on a background screening may be grounds for denial. Reports will be obtained from local, state, and federal records and may also include local Police records. If the Applicant has resided in a state other than California and has a past conviction, a report will be required from that state or federal organization. A felony and/or misdemeanor offense and/or continued and ongoing criminal activity will be grounds for rejection if such offenses involve physical violence to persons or property, domestic violence, sexual abuse, sales of narcotics, illegal weapons possession, any form of assault, breaking and entering, burglary or drug related criminal offenses. Consideration may be granted to Applicants with past nonviolent criminal records with no further criminal record. Applicants will be provided the criminal background record upon request and provided an opportunity to respond and to provide evidence of mitigating factors.
- 5) **Annual Income/Occupancy standard/other program regulations**
 - (a) Annual Income (including assets) must be within the established restrictions for the property.
 - (b) Household size must meet the established occupancy standard for the property.
 - (c) Applicant must meet all program regulated eligibility requirements.



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6) Documentation/Interviews

Each potential occupant must provide all documentation required by the selection process. If an applicant does not show up for an interview, or provide at a minimum the following documentation, it is grounds for denying your application.

- (a) Completed and signed application, release of information, grounds for denial, and app (if required).
- (b) Proof of all income sources and assets, including the two most recent income payments (i.e. pay check stub, social security or other independent verifications).
- (c) Copy of most recent bank statements and/or other accounts (IRA, stocks, mutual funds, etc.)

7) Offer of an Apartment

Applicants will be offered only one apartment. Declining the offer of an apartment is considered to be withdrawal of the application by the applicant unless there are verifiable medical circumstances that prevent you from moving at the time of offer.

8) Falsification of any information on the application

Applicants found to be falsifying any information and/or providing false information related to their application at anytime during the application process is grounds for automatic denial.

9) Nondiscrimination

In the performance of its obligations, The John Stewart Company will comply with the provisions of any federal, state or local law prohibiting discrimination in housing on the basis of race, color, creed, ancestry, national origin, sex, sexual orientation, familial status, source of income, age, disability, AIDS, or AIDS related condition.

I HAVE READ AND UNDERSTAND THE FOREGOING AND FIND THEM TO BE REASONABLE REASONS MY RENTAL APPLICATION CAN BE DENIED. I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ATTACHED HOUSING AND INCOME STATEMENTS ARE TRUE AND CORRECT.

Applicant#1: _____ Date: _____

Applicant#2 _____ Date: _____

Applicant#3 _____ Date: _____

Applicants who are not accepted will have 14 days to appeal in accordance with the Grievance Procedure. During the hearing mitigating circumstances will be considered.

