



Dear Applicant:

Thank you for your inquiry into our housing. 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 204, LANCASTER PA 17603**

Be sure to indicate on your application which apartment community you are interested in. Also, include the \$30 per adult household member (persons age 18 and older) with the application. If you are applying for more than one community, we need only one application with fees. You need to pay with check or money order, no cash please. Make the check payable to Community Basics Inc.

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

Resident selection criteria include credit checks, criminal background checks, landlord references, and income & asset verifications. You are not guaranteed housing by filing an application with us.

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Community Basics, Inc - Application Processing Fee Policy - Please be advised that due the cost of processing applications and in an effort to keep our costs lowered, we charge a non-refundable processing fee to all applicants. The fee covers the cost of completing a credit check and criminal check for all household

Resident Selection Criteria requires that you pass a credit check, criminal check, landlord reference and be income qualified for our community.

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

Whether your application passes or fails, the processing fee is still non-refundable, even if you change your mind and decide to withdraw your application.

The fee is \$30 for each of your household members who are age 18 and older. The non-refundable fee must accompany your application for housing. Applications received that do not include the full fee, will be returned. Payment of this fee is not a contractual obligation and does not guarantee housing. We accept check or money order made out to Community Basics Inc, no cash please.

The non-refundable fee may be paid by check or money order – no cash please.

If you have any questions please feel free to contact us. Again, thank you for applying with Community Basics, Inc.



### BRUNSWICK FARMS APARTMENTS

2 and 3 Bedroom only

Rent ranges: \$302-787 & \$845 for 2 bedroom (special qualifications for the lowest rent)  
\$349-910 & \$1089 for 3 bedroom (special qualifications for the lowest rent)

**\*\*ALL RENTS ARE SUBJECT TO CHANGE – THESE RENTS ARE 2015 AND WILL BE INCREASED FOR YEAR THE PROPERTY OPENS\*\***

6 Units meet the requirements of the ADA regulations & are wheelchair ready, + 2 units are hearing/vision impaired ready. 6 units will be set-aside as permanent housing for homeless families

Applicants are placed into the rental category for which they may qualify, based on what is on the application. We are only taking interest list names and addresses now.

Income and income from assets we consider is **GROSS** income before any/all deductions

60 apartments total, 44 two bedroom & 16 three bedroom

Tabor is Supportive Services Provider  
School District is Penn Manor

Opening early 2016, we will mail out applications to those on the interest list in late summer 2015, if opening does not get delayed. Those on the interest list – get their applications prior to us advertising the community in Lancaster newspaper.

Community room and on-site office, coin operated laundry on-site (no hookups in apartments), tot lot, computer room

Within a five mile radius of the community is shopping, restaurants, storage facility, manufacturing and other employment.

## 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 U.S. 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. Rents Increase  
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 and 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.

**PRELIMINARY RENTAL APPLICATION - COMMUNITY BASICS INC**

<b>BRUNSWICK FARMS APARTMENTS</b>  <b>A SMOKE FREE COMMUNITY!</b>	RETURN COMPLETED APPLICATION TO: COMMUNITY BASICS INC 941 WHEATLAND AVE, STE 204 LANCASTER PA 17803 (or site where picked up)	PLEASE MARK ONE:  <input type="checkbox"/> 2 BEDROOM <input type="checkbox"/> 3 BEDROOM
	the following is confidential and will not be disclosed without your consent	

**COMPLETE ALL THE INFORMATION BELOW**

Applicant's Name:	Social Security No.:	Home Phone:
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:
<b>Current Housing Status: Please provide the name, address, &amp; phone number of all your landlords for past 3 yrs.</b>		
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:	Social Security No.:	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



**SMOKE FREE SITE**

**NO PETS**



**ANNUAL INCOME - NET BEFORE ALL DEDUCTIONS**

SOURCE OF INCOME	APPLICANT ANNUAL INCOME	CO-APPLICANT ANNUAL INCOME	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			
STOCKS			
SAVINGS BONDS			
REAL ESTATE			
LIFE INSURANCE			
OTHER:			
<b>TOTAL:</b>	\$	\$	

I \_\_\_\_\_ have \_\_\_\_\_ 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.

Are all household members students? Yes \_\_\_\_\_ No \_\_\_\_\_

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 YOU HOMELESS? \_\_\_\_\_

NAME OF AGENCY TO VERIFY HOMELESS STATUS? \_\_\_\_\_

ARE YOU A VETERAN? BRANCH: ARMY NAVY AIRFORCE

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 are you registered in: \_\_\_\_\_

List all states where you have resided: \_\_\_\_\_

DO YOU OR MEMBERS OF YOUR HOUSEHOLD SMOKE? CIGARETTES? CIGARS? YES \_\_\_\_\_ NO \_\_\_\_\_  
 ELECTRONIC? YES \_\_\_\_\_ NO \_\_\_\_\_

Do you own a firearm \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been evicted from a dwelling for any reason? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

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: \_\_\_\_\_

In accordance with data collection information required by the U.S. Department of Housing & Urban Development (HUD), please provide the following information for the HEAD OF HOUSEHOLD ONLY.

RACE	
<input type="checkbox"/> White	<input type="checkbox"/> American Indian/Alaska Native & White
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Asian & White
<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American & White
<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> American Indian/Alaska Native & Black/African American
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> Other

  

ETHNICITY	GENDER
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Male
<input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Female

**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: \_\_\_\_\_

**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, Barbara Greenawalt, Nicole Whitehead 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          |                                |

**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