



UNITED CHURCH MANOR

50 North Ave. West Seneca, New York 14224
Phone: (716) 668-5804 Fax (716) 668-0299

“...enhancing the quality of life...”

APPLICATION FOR RESIDENCE

It is hereby understood and agreed that all information in the application for residence, including statements on finances and personal interview, will be treated confidentially and that said information is correct and true. Any misrepresentation or material omission may render any agreement for residence voidable at the option of the owner.

*****Please Print*****

Name(s): 1)
2)
Address:
Zip Code
Phone Number:

1) Date of Birth:	Social Security Number:
2) Date of Birth:	Social Security Number:
Will you have an automobile? (Please check Yes or No) Yes _____ No _____ If Yes, please provide make, model, & license plate number:	
Are you a full-time student: (Please check Yes or No) Yes _____ No _____	
Are you subject to a lifetime sex offender registration requirement? Yes _____ No _____	

Please supply the following:

Present Landlord Name:
Address:
Zip Code
Phone Number:

Previous Landlord Name:
Address:
Zip Code
Phone Number:



CONTINUED ON REVERSE SIDE

FOR OFFICE USE ONLY

Application Number: _____

Time: _____

Date: _____

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Are you presently employed (Please check yes or no) Yes _____ No _____

Name of present employer:	
Address:	
	Zip Code
Phone Number:	

FINANCIAL INFORMATION

<u>Income</u>	<u>Monthly Amount</u>
Pension	\$ _____
Social Security	_____
SSI	_____
Savings Account Interest	_____
Checking Account Interest	_____
Certificates of Deposit	_____
Stock Dividends	_____
Annuities	_____
Other Income (Employment, Alimony, etc.)	_____
	Total \$ _____

<u>Assets</u>	<u>Value of Asset</u>
Real Estate Owned	\$ _____
Life Insurance Cash Surrender Value	_____
Other Assets (cash surrender value)	_____
	Total \$ _____

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Do you have any significant continuing financial condition, such as medical expenses, custodial care for a family member, etc., which may reduce either your income or resources? (Please check Yes or No) Yes _____ No _____

Do you or anyone expecting to live with you in this apartment, have any disability that requires the features of a reasonably accessible apartment? (Please check Yes or No)

Yes _____ No _____

UNITED CHURCH MANOR ADMISSION PREFERENCES

The United Church Manor gives preference to applicants who are:

1. At an income level at/or below 30% of median income in the area in which they apply.
2. Involuntarily displaced through no fault of their own.

Have you been involuntarily displaced? (Please check Yes or No) Yes _____ No _____
If yes, explain in your own words:

3. **Living in substandard housing. Are you living in substandard housing? (please check Yes or No) Yes _____ No _____ If yes, explain in your own words**

CONTINUED ON REVERSE SIDE

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Please note that the United Church Manor is required to verify the information supplied by the applicant including those that fall within Owner Preference categories. In addition, any false statements or information supplied by the applicant is punishable under Federal Law.

APPLICANT CERTIFICATION

I/We certify that if selected to receive assistance, the unit I/We occupy will be my/our only residence. I/We authorize the Owner/Manager to verify all information provided on this application and to contact previous landlord's or other resources for credit verification, criminal background check, information which may be released to appropriate Federal, State, or Local Agencies. I/We understand that false statements of information are punishable under Federal Law.

Signature of Head of Household, _____ Date _____

**Signature of Spouse or
Co-Head of Household, _____ Date _____**

Acceptance of this application does not guarantee rental of an apartment. All applicants must meet screening criteria including a credit check, criminal background check, sex offender check and an in home visit by the manager. Changes in family income, size, or address must be reported promptly to the United Church Manor. *A security deposit and a first year lease are required.*