



Please Return To:

Christopher Community, Inc.
990 James Street
Syracuse, New York 13203
Phone: (315) 424-1821

FOR OFFICE USE ONLY

Application Form # _____
Date: _____ Time _____
Bedroom Size: _____

INFORMATION SOLICITED ON THIS APPLICATION IS REQUESTED BY THE APARTMENT OWNER IN ORDER TO ASSURE THE GOVERNMENT THAT FEDERAL NEW YORK AND STATE LAWS PROHIBITING DISCRIMINATION AGAINST TENANT APPLICATIONS ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, RELIGION, SEX, MARTIAL STATUS, AGE AND HANDICAP ARE COMPLIED WITH. THIS INFORMATION WILL NOT BE USED TO DISCRIMINATE AGAINST YOU.

Please respond to all questions on this form as appropriate. If application is for more than one person be sure to answer all questions for any household member that is applicable.

WHAT AREA ARE YOU INTERESTED IN: (MARK ALL THAT APPLY) _____ West _____ North _____ South _____ No preference

A. **Head of Household Name:** _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ Telephone Messages: _____
Best Time To Contact You: _____

B. **NAME OF ALL PERSONS WHO WILL BE LIVING IN THE APARTMENT:**

Name	Age	DOB	Social Security #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. **Are you or any household member employed? If so, complete the following:**

Employer's Name: _____
Address: _____
City/State/Zip: _____
Phone Number: _____

Employer's Name: _____
Address: _____
City/State/Zip: _____
Phone Number: _____

D. **Present Income:**

Social Security payment per month _____
Supplemental Security income per month _____
Pension income per month _____
Gross Employment income per month _____
Public Assistance income per month _____
Unemployment Assistance _____
Child Support _____
Other (Explain source) _____

E. **Current Bank Account Balance:**
Checking account _____ Savings account _____
Money Market account _____ Other accounts _____

F. **Assets:**
Full value of stocks \$ _____ Full value of bonds \$ _____
Full value of CD's \$ _____ Market value of Real Estate \$ _____
Full value of other \$ _____

G. **Present Living Accommodations (please check as appropriate):**
Own House or Mobile Home _____ Rental Housing _____
Public Housing _____ Boarding House _____
Living with Relatives _____ Hotel/Motel _____
Living with Friends _____ Other _____
How long have you lived at your residence? _____
If you rent, what is your monthly rent, including utilities? _____

H. **Name, Address & Phone Number of Your Present Landlord:**

Name, Address & Phone Number of your Previous Landlords in past 5 years:
1. _____
2. _____
3. _____

I. **Are you presently receiving any form of rent subsidy/certificate?** _____
Name of subsidy source _____

J. **Are you on the waiting list of the Syracuse Housing Authority for the Section 8 Rental Assistance?** Yes _____ No _____ **or on the Syracuse Housing Authority Apartment Wait List?** Yes _____ No _____

K. **Have You Ever Been Evicted?** Yes _____ No _____ **When?** _____
If so, please explain: _____

L. **Will your family require an apartment that needs to be equipped to meet any special needs (i.e. such as wheelchair?)** Yes _____ No _____
Please list any other accommodations required by your family: _____

M. **Please list 3 personal references (who are not relatives):**
Name Address/City/State/Zip Phone Number

N. **Have you or any adult members of your household been convicted of a criminal Offense?** No _____ Yes _____ **Offense** _____

O. **Are you a full time student?** No _____ Yes _____ **School Name:** _____

Please review your application carefully. **If any questions are not answered the application may be deemed to be incomplete and returned to you.**

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING

Any willful misrepresentation or concealment of any material fact which would affect eligibility for admission will be considered grounds for termination of lease and eviction. I, therefore, declare the information provided to be true to the best of my knowledge.

I understand that I/We will be asked to provide "Release of Information" forms to confirm income, references, criminal background, predator status, and credit history if this application is to be processed for consideration of occupancy.

Co-applicant #1

Date

Co-applicant #2

Date

.....
Race/Ethnicity Information:

The information regarding race, ethnicity and sex designation is requested for statistical purposes only. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way.

Race of Head of Household (please check all that apply):

____ American Indian/or Alaska Native ____ Asian ____ Black or African American
____ Native Hawaiian or Pacific Islander ____ White ____ Other: _____

Ethnicity of Head of Household (please check one) : ____ Hispanic or Latino ____ Not Hispanic or Latino

Gender (please check one): ____ male ____ female

FAIR HOUSING NOTICE

Federal, State and Local Fair Housing Laws protect individuals from housing discrimination. It is unlawful to discriminate based on certain protected characteristics, which include, but are not limited to: race, creed, color, national origin, sexual orientation, gender identity or expression, military status, sex, age, disability, marital status, lawful source of income or familial status.

THE FOLLOWING ARE SOME EXAMPLES OF POTENTIAL FAIR HOUSING VIOLATIONS:

- Refusing to rent, sell or show a property based on a potential tenant or purchaser's protected characteristic.
- Quoting a higher price to a purchaser or renter because of the potential purchaser or tenant's protected characteristic.
- Refusing to rent to a tenant who has children or increasing a security deposit based on the number of children who will be living in the apartment.
- Steering prospective tenants or purchasers to certain neighborhoods based on any protected characteristics.
- Refusing to rent to a potential tenant because of their source of income, including but not limited to, Section 8 vouchers or other government subsidies.
- Refusing to waive a "no pet" policy for tenants that require a service, assistance or emotional support animal.
- Discriminating at the direction of a seller or landlord or because it is the preference of a seller or landlord.
- Refusing to rent to a renter who is a victim of domestic violence.

YOU HAVE THE RIGHT TO FILE A COMPLAINT

- New York State, Department of State: (518) 474-4429
- New York State, Division of Human Rights: (844) 862-8703

ALBANY OFFICE: One Commerce Plaza, 99 Washington Avenue, P.O. Box 22001, Albany, NY 12201-2001
• Customer Service: (518) 474-4429 • Website: www.dos.ny.gov • E-Mail: licensing@dos.ny.gov

REGIONAL OFFICES:

• BINGHAMTON • BUFFALO • HAUPPAUGE • NEW YORK CITY • UTICA

*This sign must be prominently posted in all real estate broker offices
and at all public open houses.*



New York State Housing and Anti-Discrimination Disclosure Form

Federal, State and local Fair Housing Laws provide comprehensive protections from discrimination in housing. It is unlawful for any property owner, landlord, property manager or other person who sells, rents or leases housing, to discriminate based on certain protected characteristics, which include, but are not limited to **race, creed, color, national origin, sexual orientation, gender identity or expression, military status, sex, age, disability, marital status, lawful source of income or familial status**. Real estate professionals must also comply with all Fair Housing Laws.

Real estate brokers and real estate salespersons, and their employees and agents violate the Law if they:

- Discriminate based on any protected characteristic when negotiating a sale, rental or lease, including representing that a property is not available when it is available.
- Negotiate discriminatory terms of sale, rental or lease, such as stating a different price because of race, national origin or other protected characteristic.
- Discriminate based on any protected characteristic because it is the preference of a seller or landlord.
- Discriminate by “steering” which occurs when a real estate professional guides prospective buyers or renters towards or away from certain neighborhoods, locations or buildings, based on any protected characteristic.
- Discriminate by “blockbusting” which occurs when a real estate professional represents that a change has occurred or may occur in future in the composition of a block, neighborhood or area, with respect to any protected characteristics, and that the change will lead to undesirable consequences for that area, such as lower property values, increase in crime, or decline in the quality of schools.
- Discriminate by pressuring a client or employee to violate the Law.
- Express any discrimination because of any protected characteristic by any statement, publication, advertisement, application, inquiry or any Fair Housing Law record.

YOU HAVE THE RIGHT TO FILE A COMPLAINT

If you believe you have been the victim of housing discrimination you should file a complaint with the New York State Division of Human Rights (DHR). Complaints may be filed by:

- Downloading a complaint form from the DHR website: www.dhr.ny.gov;
- Stop by a DHR office in person, or contact one of the Division’s offices, by telephone or by mail, to obtain a complaint form and/or other assistance in filing a complaint. A list of office locations is available online at: <https://dhr.ny.gov/contact-us>, and the Fair Housing HOTLINE at (844)-862-8703.

You may also file a complaint with the NYS Department of State, Division of Licensing Services. Complaints may be filed by:

- Downloading a complaint form from the Department of State’s website https://www.dos.ny.gov/licensing/complaint_links.html
- Stop by a Department’s office in person, or contact one of the Department’s offices, by telephone or by mail, to obtain a complaint form.
- Call the Department at (518) 474-4429.

There is no fee charged to you for these services. It is unlawful for anyone to retaliate against you for filing a complaint.



Division of Licensing Services

New York State
Department of State, Division of Licensing Services
(518) 474-4429
www.dos.ny.gov

New York State
Division of Consumer Rights
(888) 392-3644

New York State Housing and Anti-Discrimination Disclosure Form

For more information on Fair Housing Act rights and responsibilities please visit <https://dhr.ny.gov/fairhousing> and <https://www.dos.ny.gov/licensing/fairhousing.html>.

This form was provided to me by Kelly A. Besaw (print name of Real Estate Salesperson/
Broker) of Christopher Community, Inc. (print name of Real Estate company, firm or brokerage)

(I)(We) _____

(Buyer/Tenant/Seller/Landlord) acknowledge receipt of a copy of this disclosure form:

Real Estate Consumer/Seller/Landlord Signature *Kelly A. Besaw* Date: _____

Real Estate broker and real estate salespersons are required by New York State law to provide you with this Disclosure.