

Chatham Gardens Apartments

With Application submission, the following documents are required:

- ☐ Copy of Driver's License or State ID for household members 18 years or older
- ☐ Copy of Birth Certificates for **ALL** household members
- ☐ Copy of Social Security cards for **ALL** household members
- ☐ Proof of household income (Current pay stubs, Social Security benefit letters, DSS budget sheet, Proof of Section 8, etc.)
- ☐ Current New York State Tax Return – if filed
- ☐ \$12.00 credit/background check fee for one adult 18 years or older or \$20.00 for two or more adults 18 years or older. Non-refundable credit/background check fee (money order or check only).

PLEASE NOTE: We do NOT accept cash.

****Note: Copies can be made at the Rental Office if needed.****



We are interested in knowing how you happened to apply for an apartment with us and would appreciate your answering a few short questions.

In which of the following ways did you hear of Chatham Gardens?

Please check any that apply.

☐ Our Website/Internet

☐ Referral

☐ Apartmentguide.com

☐ Relative

☐ Friend

☐ TV

☐ Agency _____
(please specify)

☐ Just Driving By

☐ Facebook

☐ NYHousingSearch.gov

☐ Craigslist

☐ Renters Lifestyle

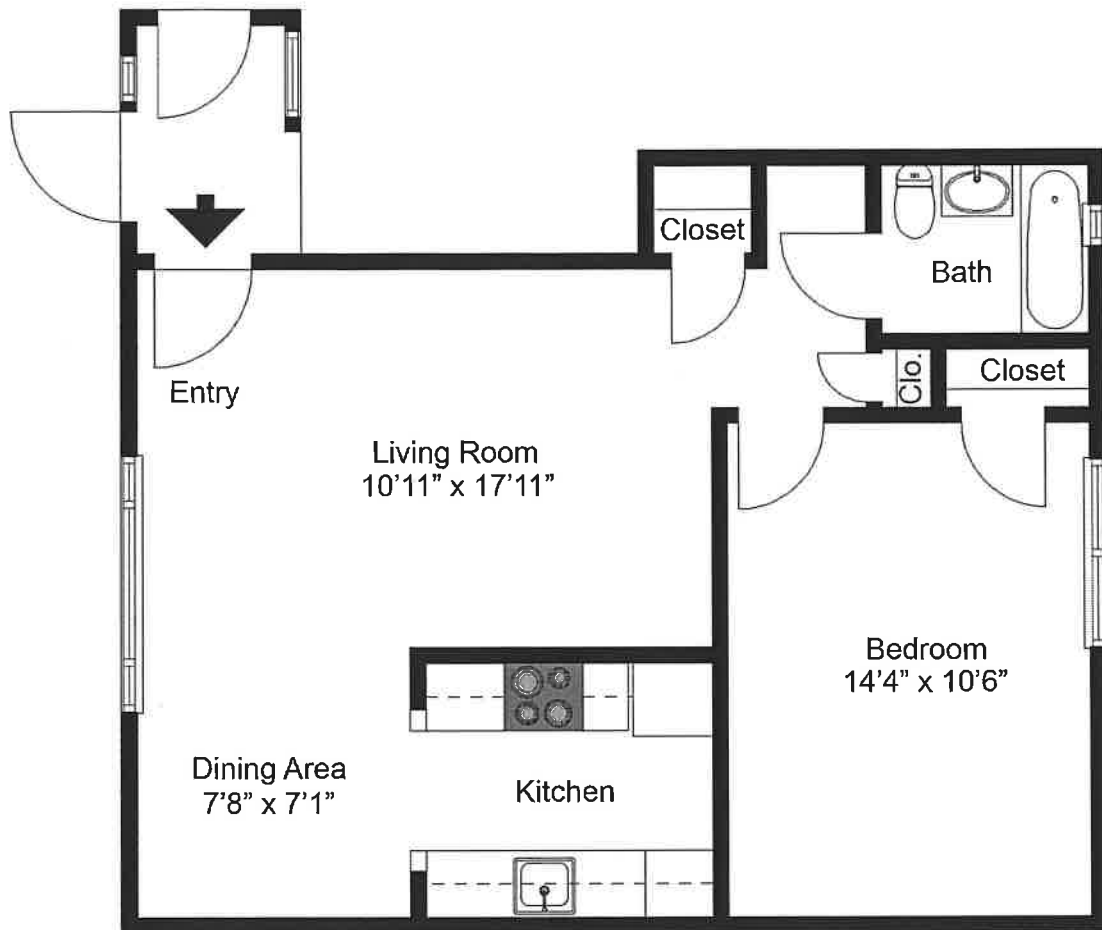
☐ Rent.com

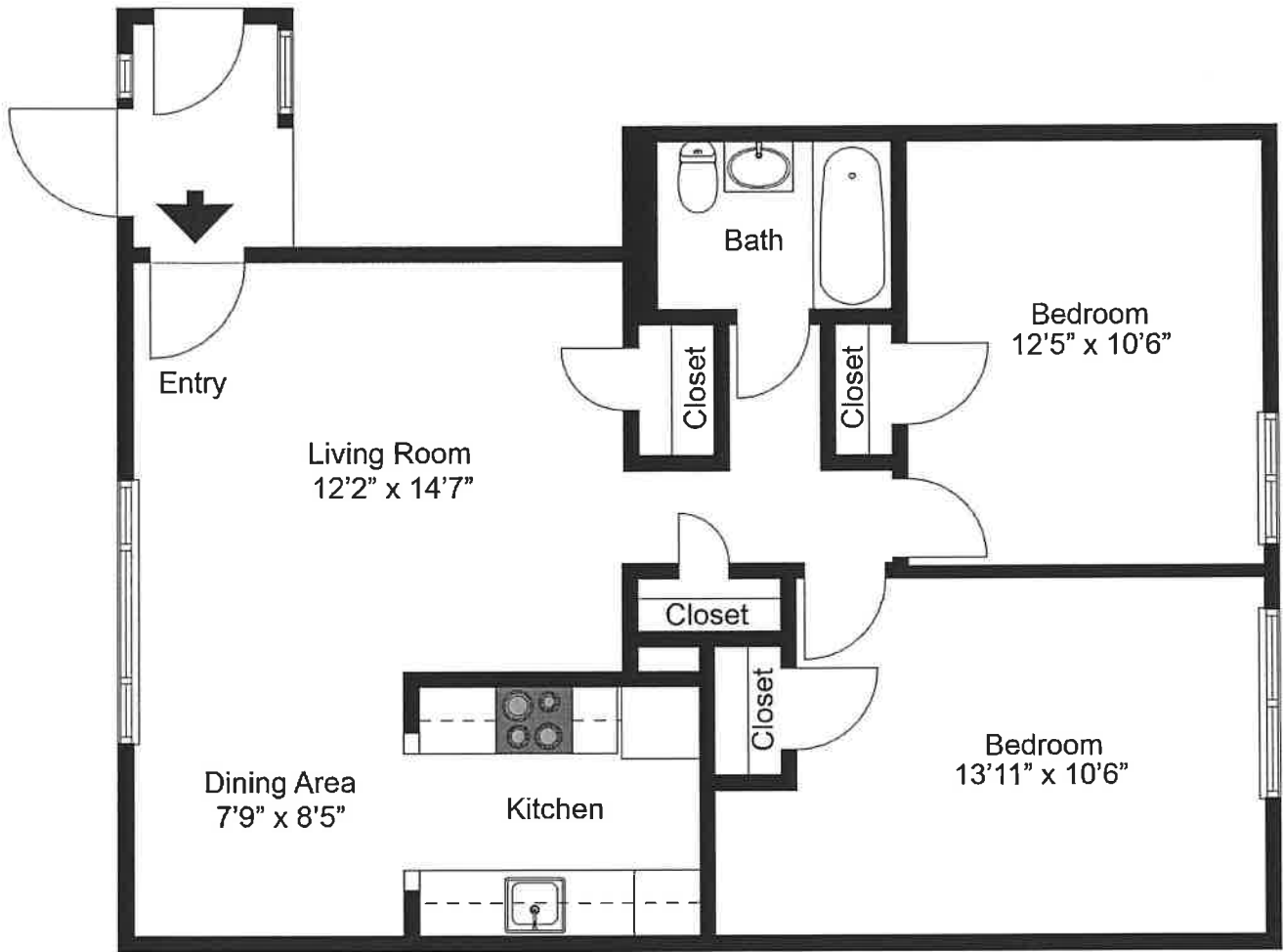
☐ Zillow.com

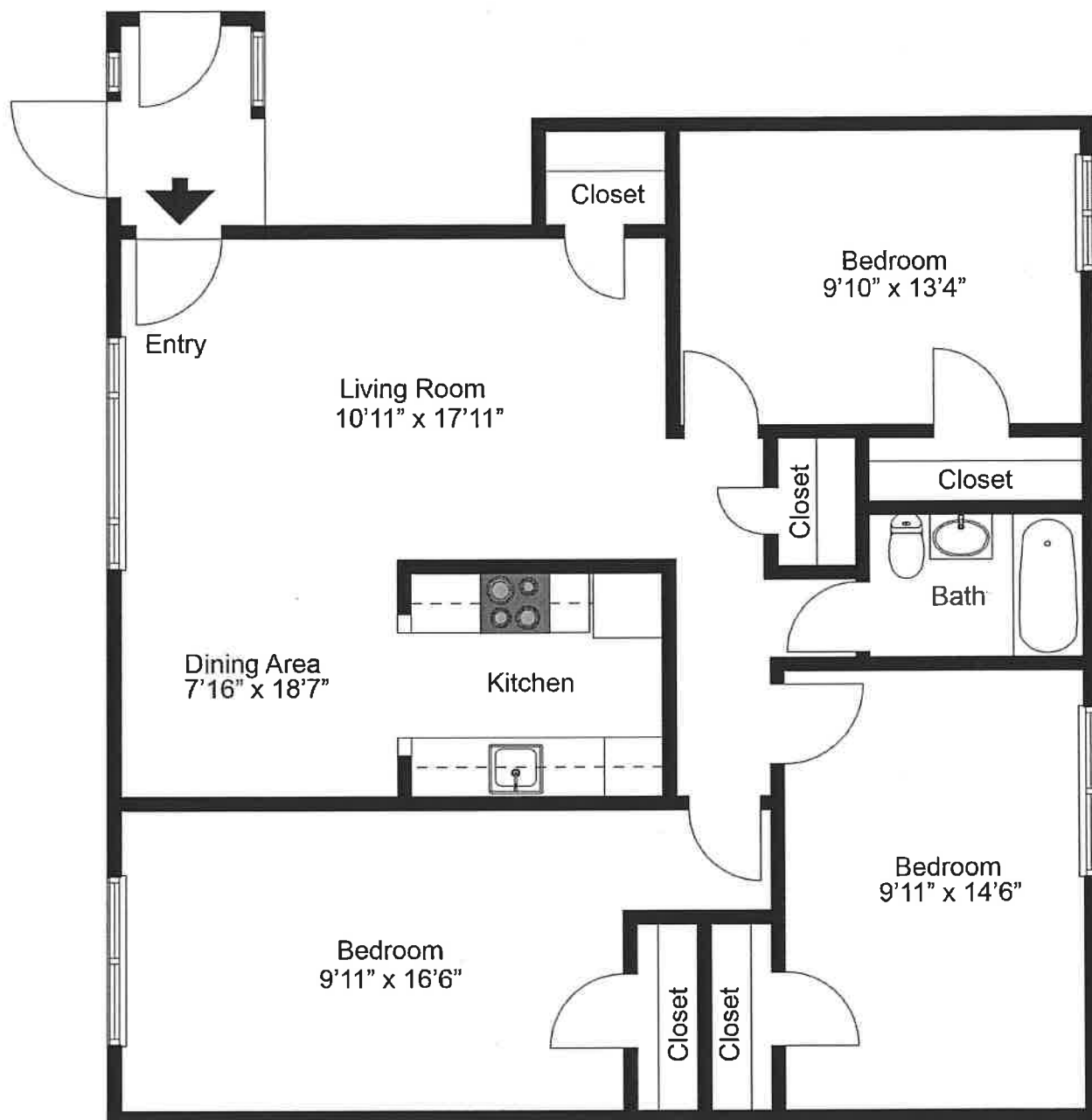
Remarks: _____

Thank you for your assistance.

Sincerely,
Jennifer Fordham
Vice President and Manager of Operations









Chatham Gardens TENANT SELECTION PLAN

Chatham Gardens was sponsored under the Mitchell-Lama Act as a complex for a single person or families. Mitchell-Lama established income guidelines must be met.

Current Income Guidelines

<u>Minimum Income for 18+ Applicants</u>	<u>Minimum Income for 55+ Applicants</u>
1 Bedroom Apartments- \$22,120	1 Bedroom Apartments- \$19,908
2 Bedroom Apartments- \$27,320	2 Bedroom Apartments- \$24,588
3 Bedroom Apartments- \$32,080	3 Bedroom Apartments- \$28,872
<u>Maximum Income for 1-3 Person Households</u>	<u>Maximum Income for 4+ Person Households</u>
1 Bedroom Apartments-\$50,484	1 Bedroom Apartments- N/A
2 Bedroom Apartments- \$62,580	2 Bedroom Apartments- \$71,520
3 Bedroom Apartments- \$73,668	3 Bedroom Apartments- \$84,192

Applicants who do not meet the minimum income requirement may still be admitted to Chatham Gardens provided they can verify they have paid a rental amount similar to what they would be paying at Chatham Gardens for a period of at least twelve (12) consecutive months and meet all other eligibility requirements.

Applicants who exceed the maximum may be admitted as residents, but must pay a rental surcharge per 9NYCRR 1727-4.1 (d). (New York Codes Rules and Regulations). Maximum Annual Income is calculated based on the annual apartment rent multiplied by 7.

Policies to comply with Fair Housing

1. Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in any program or activity receiving federal financial assistance from HUD.
2. The Fair Housing Act and the New York State Human Rights Law prohibits discrimination in housing and housing related transactions based on: Age • Creed • Disability • Domestic violence victim status • Gender identity or expression • Familial status • Lawful source of income (in housing only) • Marital status • Military status • National origin • Predisposing genetic characteristics • Pregnancy-related condition • Prior arrest or conviction record • Race/color • Sex • Sexual orientation • Retaliation for opposing unlawful discriminatory practices • Citizenship or immigration status
 - a. It applies to housing, regardless of the presence of federal financial assistance.
3. Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color or national origin in any program or activity receiving federal financial assistance from HUD.

Accepting Applications and Selecting from the Waiting List

Anyone wishing to be admitted into Chatham Gardens, or placed on the waiting list, must complete and submit to the office an application which will include name, address, age, sources of annual income, and previous place of residence. Also to be submitted with the application is a copy of driver's license or state issued photo ID, copy of social security card, and New York State tax return (previous year) or income verification if no taxes were filed. Applications will be stamped with date and time when received and placed in chronological order on the automated waiting list of the NYS Division of Housing and Community Renewal.

Eligible applicants will be notified in writing that their application has been approved and they will be contacted when an appropriate unit becomes available. Ineligible applicants will also be notified in writing of the reason for rejection and of their right to appeal within 14 days to the DHCR Law Bureau. All applicants will be treated alike regardless of race, color, sex, religion, family status, national origin, age, or any other arbitrary reasons and reasonable accommodation will be made for the disabled.

Applicants are advised that they will be entitled to one apartment refusal without affecting their position on the waiting list. A failure to respond within (10) business days from the apartment notification shall be considered a refusal.

Quarterly Tenant Selection Activity Reports are submitted to the NYS Division of Housing and Community Renewal.

Occupancy is limited to only those persons identified as applicants on the original application.

Occupancy Guidelines are in accordance with New York Codes and Regulations which follow below:

<i>Number of Bedrooms</i>	<i>Minimum Number of Occupants</i>	<i>Current Maximum Number of Occupants</i>	<i>Optional Maximum Number of Occupants</i>
1	1	2	3
2	2	4	5
3	4	6	7

For both new admission and transfer applications, the members of the applicant's household must be residing together and must meet the applicable household size requirements at the time of application and at the time of apartment availability. When appropriately documented, a child subject to a joint custody agreement who lives with the family 50% or more of the time, or a child away at school, may be included in the household count.

Admission will be denied if:

Any household member has an unacceptable landlord history, including inability to appropriately maintain housing in a decent safe and sanitary condition; history of unjustified and chronic nonpayment of rent; history of disturbing the quiet enjoyment of others; history of violence and harassment of others; history of violations of the terms of previous rental agreements, such as destruction of the unit or surrounding premises. Chatham Gardens may obtain a previous and current landlord written records of rent payment and history of major lease violations e.g. nonpayment of rent or use of premises for illegal purposes.

Applicants will be screened for credit history through a recognized screening service/data base such as RentGrow. Applicants must have a satisfactory credit report/rental history. Any applicant will be approved for the credit portion of the application process by:

1. Providing evidence of having made full payment of their rent on a timely basis for prior 12 months, or
2. Providing evidence of receiving full rent subsidy from Section 8 voucher, HUD/Vash, Assistance/FIPS, HOPWA/HASA, Rural Rental Assistance, Non-Profit Rental Assistance or other subsidy

Applicant may be denied for credit due to "applicable debt". Applicable debt may include debt that is: over 90 days delinquent as of the date of the credit report; debt that has been transferred to a collection agency and is being pursued for collection; money judgements and liens; and bankruptcies (in certain cases). The individualized assessment "Worksheet for Applying New York State Credit Policy for Applicants to State-Funded Housing" will be completed to consider credit history.

Screening will also be done for criminal activity. Applicants with criminal convictions will have a personal interview with the housing complex prior to a decision to complete the "Worksheet for Applying New York State Anti-Discrimination Policies When Assessing Applicants for State Funded Housing Who Have Criminal Convictions". This will provide you with the opportunity to answer questions regarding the conviction(s).

Convictions that may be considered include: drug related crimes; criminal activity involving crimes of physical violence to persons or property; or other criminal acts that adversely affected the health, safety, and welfare of other people.

There are two circumstances in which an applicant's criminal history will automatically make them ineligible for housing:

1. Conviction for producing methamphetamine
2. Lifetime registrant on a State Sex Offender Registry

Convictions that have been excused by pardon, overturned on appeal, or otherwise vacated will not be considered ineligible. You may appeal an ineligible criminal decision within 14 business days.

Veteran's Preference

Preference will be given for admission to veterans as described in Section 85 of the Civil Service Law. Veterans eligible for the preference are those who:

Have served in the armed forces of the United States (i) for a period of at least 6 months (or any shorter period due to injury incurred in such service) and have been thereafter discharged or released therefrom under conditions other than dishonorable, or (ii) who have been discharged or released from service in the armed forces of the United States on the basis of their sexual orientation, gender identity or expression, consensual sexual conduct or consensual acts relating to sexual orientation, or the disclosure of statements, conduct, or acts by the individual that were prohibited by the armed forces of the United States at the time of discharge, or (iii) are the surviving spouses of either categories (i) or (ii).

Unit Transfers

A list of residents requesting transfers will be maintained and vacancies will be filled chronologically when appropriate unit becomes available. Transfer policy will be given at the time of request.

Transfer applicants are given preference for three of every four apartments offered.

A resident must be in good standing to be approved for a transfer (satisfactory payment history with no outstanding balance, satisfactory apartment inspection, no derogatory or complaint letters on file).

Lateral transfers are not allowed unless it's for a reasonable accommodation.

Unit transfers may be approved due to specific reasons. Accepted reasons for transfer are: change in family composition, downsizing due to financial reasons, medical request including making reasonable accommodation for disabled residents requiring more accessible unit.

Waiting List

Approved applications will be placed on the NYS Division of Housing and Community Renewal automated waiting list. Apartments will be offered in the order the applications were received. Still interested letters will be sent periodically.

Smoke Free Community



As of May 1, 2024, this property is a completely smoke-free facility. Tenants living at the property as of this date have been grandfathered in to the smoking policy. These specific tenants are allowed to smoke in only their unit, no where else on the property. Due to the increased risk of fire, the known health effects of secondhand smoke, and increased maintenance costs, smoking is prohibited in any area of the property, both private and common, indoors, and within 25 feet of the building(s) including entryways, balconies, and patios. This policy applies to all residents, guests, vendors, staff, and service persons. Residents are responsible for ensuring that all household members and guests comply with this rule. The term “smoking” is defined as inhaling, exhaling, burning or carrying any lighted cigarette, cigar, pipe, or other tobacco product in any manner or any form.

Fees

Incoming residents are required to pay a security deposit of one (1) month’s rent at the time of lease signing.

A late rent fee of \$15.00 is charged on the 6th day of the month.

Unit Inspections

All units are inspected annually by the maintenance superintendent or representative. A copy of the inspection report will be completed indicating the condition of the apartment. The resident will receive a copy, and a second copy will be kept in the resident’s file. Any repairs will be completed by the maintenance department. All cleaning issues and general housekeeping issues are the responsibility of the resident. The resident will have ten (10) days to correct such issues, at which time the apartment will be re-inspected. Failure to correct such issues could result in termination or non-renewal of the lease.

Annual Income Affidavits

New York State Law requires you to submit, and us to collect, a report of your income annually, which is sent to the NYS Division of Housing and Community Renewal. Verification of income from the previous year is required, either by NYS tax return, if filed, or Social Security, pension, and bank statements.

VAWA Protections

Provides rights and obligations to all applicants under the Violence Against Women Act (VAWA). Chatham Gardens is compliant with all VAWA Final Rules and Emergency Transfer. Chatham Gardens does not discriminate against victims of domestic violence, dating violence, sexual assault, or stalking, or protected victims as well as members of their family. Victims will not be denied housing or from losing their HUD assisted housing as a consequence of domestic violence, dating violence, or stalking.

House Rule Changes

Certain house rules may be developed and listed in the lease as an attachment.

Owners must give residents written notice 30 days prior to implementing any changes in house rules or adding new rules.

By signing below you (we) acknowledge receipt of the policy, and acknowledge that you (we) have read and understand its' contents.

Name

Date

Name

Date

Witness

Date

Credit/Background Check Fee:

The undersigned hereby acknowledges receipt of this document, that I have understood, I am paying a \$12.00 non-refundable credit/background check fee per applicant 18 years or older, not to exceed \$20.00 for two or more applicants 18 years or older, to cover the cost to process the credit/background check on my application for residency.

Signature

Date

Return to:
Chatham Gardens
216 Chatham Gardens
Rochester, New York 14605

FOR OFFICE USE ONLY

APPLICATION FOR APARTMENT AT:
Chatham Gardens

Date stamp & application number

Date _____

*Applications are placed in order of date and time received. An Applicant may be interviewed only after the receipt of this application.

Applicant Name(s): _____

Current Address: _____
Street Apt.# City State Zip

Landlord Name: _____ Landlord Phone Number: _____

How long have you lived there? _____

Email: _____ Phone Number: _____

Please list all states in which any household member has resided:

Name: _____ States(s): _____

Do you ☐ RENT or ☐ OWN Amount of current monthly rental or mortgage payment: \$ _____

If owned, do you receive monthly rental income from property? ☐ Yes ☐ No (check one)

I. HOUSEHOLD COMPOSITION

Unless assistance is required, this form must be completed by the applicant/tenant.

- List each person who will reside in the unit along with the relationship to the head of household, date of birth, and social security number*

	HOUSEHOLD MEMBER NAME (First MI Last)	RELATIONSHIP	DOB	SSN
1.		HEAD		
2.				
3.				
4.				
5.				
6.				

INCOME INSTRUCTIONS:

- List gross amounts anticipated to be received in the 12 month period following move in.*
 - Answer each YES-NO question. For each YES include the gross amount and frequency.*
- Do NOT leave any unanswered questions.***

II. HOUSEHOLD INCOME

Use an extra copy of pages 1 and 2 as needed if more than 2 adult members are included in the household.
All adults must sign the form.

	Head of Household			Co-Head and/or Other Member		
Type of Income	Check One	Amount	Frequency	Check One	Amount	Frequency
1. Salary or pay from job	[] YES [] NO	\$		[] YES [] NO	\$	
2. Social Security	[] YES [] NO	\$		[] YES [] NO	\$	

II. HOUSEHOLD INCOME (continued)							
3. SSI	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
4. SSP	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
5. Unemployment benefits	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
6. Worker's compensation	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
7. Severance pay	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
8. Pension income	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
9. Retirement acct payments	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
10. Investment acct payments	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
11. Annuity acct payments	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
12. Trust acct payments	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
13. Disability/death benefits	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
14. Real estate rent income	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
15. Military pay	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
16. Veterans/VA income	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		
17. Other income:	☐ YES ☐ NO	\$		☐ YES ☐ NO	\$		

For each source of income checked YES above, please complete the following:

Income #	HH Member	Name of Source	Address/Phone/Email

III. ADDITIONAL INFORMATION	
Have you or any member of your family ever been convicted of a felony or required to be a lifetime registrant on the state sex offender registry? ☐ Yes ☐ No If yes, please describe: The NYS HCR Justice-Involvement Policy can be found here: https://hcr.ny.gov/marketing-plans-policies#credit-and-justice-involvement-assessment-policies. Applicants have a right to an individualized assessment prior to any rejections.	
Have you ever resided at a Rochester Management Community? ☐ Yes ☐ No If yes, when and where: Have you applied to any other Rochester Management Communities? ☐ Yes ☐ No If yes, where:	
Will you take an apartment when one is available? ☐ Yes ☐ No	
Please list the bedroom size(s) and move in date that interest you: *Applicants can go on more than one bedroom size waitlist if they are eligible or need a reasonable accommodation for another bedroom size*	
Briefly describe your reason for applying:	
Do you receive rental assistance (Section 8, DSS, other housing subsidies)? ☐ Yes ☐ No	

IV. VEHICLE AND PET INFORMATION (if applicable)

List any cars, trucks, or other vehicles owned. Parking will be provided for one vehicle. Arrangements with Management will be necessary for more than one vehicle

Make/Model of Vehicle:

License Plate #:

Year:

Color:

Do you have any pets? ☐ Yes ☐ No

If yes, please describe:

V. REFERENCE INFORMATION

Previous Landlord

Name:

Address:

Home Phone:

Business Phone:

How long?

Emergency Contact

Name:

Address:

Phone #:

Relationship:

VETERANS ADMISSION PREFERENCE: ☐ Those who have served in the armed forces of the United States (i) for a period of at least 6 months (or any shorter period due to injury incurred in such service) and have been thereafter discharged or released therefrom under conditions other than dishonorable, or (ii) who have been discharged or released from service in the armed forces of the United States on the basis of their sexual orientation, gender identity or expression, consensual sexual conduct or consensual acts relating to sexual orientation, or the disclosure of statements, conduct, or acts by the individual that were prohibited by the armed forces of the United States at the time of discharge, or (iii) are the surviving spouses of either categories (i) or (ii). Check box and attach DD-214 to qualify for admission preference.

CERTIFICATION

I/We hereby certify that I/We Do/Will Not maintain a separate subsidized rental unit in another location. I/We further certify that this will be my/our permanent residence. I/We understand I/We must pay a security deposit for this apartment prior to occupancy. I/We certify that all information in this application is true to the best of my/our knowledge and I/We understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy.

This development is operated under the supervision of the New York State Homes and Community Renewal. All questions must be answered in order to process the application.

The above information is correct to the best of my knowledge. I have no objection to inquiries for the purpose of verifying the facts herein stated.

I (we) understand that a credit inquiry and a Criminal Background check may be made in the course of processing this application.

All adult applicants, 18 or older, must sign application.

SIGNATURE(S):

(Signature of Tenant)

Date

(Signature of Co-Tenant)

Date

Title 18 Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief as may be appropriate against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at **208 (a) (6) (7) and (8).** Violation of these provisions are cited as violations of 42 U.S.C. Section **408 (a) (6) (7) and (8).*



EQUAL HOUSING OPPORTUNITY



HANDICAPPED ACCESSIBLE



KATHY HOCHUL
Governor

Homes and Community Renewal

RUTHANNE VISNAUSKAS
Commissioner/CEO

Know Your Rights: New York State's Anti-Discrimination Policy When Assessing Justice-Involved Applicants for State-Funded Housing

If you are applying for state-funded housing and have a history of involvement with the criminal justice system, you have rights and protections.

There Are Only Two Mandatory Reasons That You Can Automatically Be Rejected:

1. Conviction for methamphetamine production in the home; and
2. Being a lifetime registrant on a state or federal Sex Offender database.

You Cannot Be Rejected Based On:

1. All pending arrests (including those with adjournments in contemplation of dismissal (ACOD));
2. Arrest records that were resolved in your favor;
3. Convictions for offenses committed before you turned 18 years old;
4. Misdemeanor convictions that occurred more than 1 year ago;
5. Felony convictions that occurred more than 5 years ago;
6. Convictions resulting in incarceration/parole supervision, from which you were released more than 1 year ago;
7. Convictions that did not involve physical violence or danger to persons or property, or did not affect the health, safety and welfare of others;
8. Convictions for which you have received a Certificate of Good Conduct or Certificate of Relief from Disabilities that is permanent and covers housing.
9. Youthful offender adjudications;
10. Convictions for violations sealed pursuant to Section 160.55 of New York State Criminal Procedure Law;
11. Convictions sealed pursuant to Section 160.58 or 160.59 of New York State Criminal Procedure Law;
12. Convictions that were excused by pardon, overturned on appeal or vacated;

You Cannot Be Asked About 9-12 Above

If a housing provider asks you about them or any pending arrest with an ACOD, you may answer as if the protected arrest, conviction or adjudication never occurred. If you believe you have been discriminated against based on these protections, file a complaint with the New York State Division of Human Rights: <https://dhr.ny.gov/complaint>

You Must be Given 14 Days to Provide Additional Information Before Any Rejection

You must be contacted and provided 14 business days to provide additional relevant information including:

1. How much time has passed since the conviction(s)?
2. How old were you at the time of the conviction(s)?
3. How serious was the conviction(s)?
4. Evidence about your rehabilitation, including treatment programs, volunteer work, paid employment, etc. since your conviction(s)
5. Were there mitigating circumstances surrounding the offense that reduce the severity of the offense?

If you were not given an opportunity to answer these questions, or if you feel the housing provider did not properly evaluate your application and wrongfully denied you housing, contact New York State Homes and Community Renewal's Fair and Equitable Housing Office at feho@hcr.ny.gov for assistance. More information is available here: <https://hcr.ny.gov/marketing-plans-policies#credit-and-justice-involvement--assessment-policies>

NOTICE DISCLOSING TENANTS' RIGHTS TO REASONABLE ACCOMMODATIONS FOR PERSONS WITH DISABILITIES

Reasonable Accommodations

The New York State Human Rights Law requires housing providers to make reasonable accommodations or modifications to a building or living space to meet the needs of people with disabilities. For example, if you have a physical, mental, or medical impairment, you can ask your housing provider to make the common areas of your building accessible, or to change certain policies to meet your needs.

To request a reasonable accommodation, you should contact your property manager by calling 585-546-8713 or by e-mailing office@chathamgardens.com*. You will need to inform your housing provider that you have a disability or health problem that interferes with your use of housing, and that your request for accommodation may be necessary to provide you equal access and opportunity to use and enjoy your housing or the amenities and services normally offered by your housing provider. A housing provider may request medical information, when necessary to support that there is a covered disability and that the need for the accommodation is disability related.

If you believe that you have been denied a reasonable accommodation for your disability, or that you were denied housing or retaliated against because you requested a reasonable accommodation, you can file a complaint with the New York State Division of Human Rights as described at the end of this notice. Specifically, if you have a physical, mental, or medical impairment, you can request:† Permission to change the interior of your housing unit to make it accessible (however, you are required to pay for these modifications, and in the case of a rental your housing provider may require that you restore the unit to its original condition when you move out); Changes to your housing provider's rules, policies, practices, or services; Changes to common areas of the building so you have an equal opportunity to use the building. The New York State Human Rights Law requires housing providers to pay for reasonable modifications to common use areas.

Examples of reasonable modifications and accommodations that may be requested under the New York State Human Rights Law include:

If you have a mobility impairment, your housing provider may be required to provide you with a ramp or other reasonable means to permit you to enter and exit the building.

If your healthcare provider provides documentation that having an animal will assist with your disability, you should be permitted to have the animal in your home despite a "no pet" rule.

If you need grab bars in your bathroom, you can request permission to install them at your own expense. If your housing was built for first occupancy after March 13, 1991 and the walls need to be reinforced for grab bars, your housing provider must pay for that to be done.

If you have an impairment that requires a parking space close to your unit, you can request your housing provider to provide you with that parking space, or place you at the top of a waiting list if no adjacent spot is available.

If you have a visual impairment and require printed notices in an alternative format such as large print font, or need notices to be made available to you electronically, you can request that accommodation from your landlord.

Required Accessibility Standards

All buildings constructed for use after March 13, 1991, are required to meet the following standards:

- Public and common areas must be readily accessible to and usable by persons with disabilities;
- All doors must be sufficiently wide to allow passage by persons in wheelchairs; and
- All multi-family buildings must contain accessible passageways, fixtures, outlets, thermostats, bathrooms, and kitchens.
- If you believe that your building does not meet the required accessibility standards, you can file a complaint with the New York State Division of Human Rights.

How to File a Complaint

A complaint must be filed with the Division within one year of the alleged discriminatory act or in court within three years of the alleged discriminatory act. You can find more information on your rights, and on the procedures for filing a complaint, by going to www.dhr.ny.gov, or by calling 1-888-392-3644. You can obtain a complaint form on the website, or one can be e-mailed or mailed to you. You can also call or e-mail a Division regional office. The regional offices are listed on the website.

*The Notice must include contact information when being provided under 466.15(d)(1), above. However, when being provided under (d)(2) and when this information is not known, the sentence may read "To request a reasonable accommodation, you should contact your property manager."

†This Notice provides information about your rights under the New York State Human Rights Law, which applies to persons residing anywhere in New York State. Local laws may provide protections in addition to those described in this Notice, but local laws cannot decrease your protections.



Homes and Community Renewal

Notice of Occupancy Rights under the Violence Against Women Act¹

To all Tenants and Applicants

The Violence Against Women Act (VAWA) provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.² This notice explains your rights under VAWA. A HUD-approved certification form is attached to this notice. You can fill out this form to show that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking, and that you wish to use your rights under VAWA.

Protections for Applicants

If you otherwise qualify for the rental housing or program, you cannot be denied admission or denied assistance because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Protections for Tenants

You may not be denied assistance, terminated from participation, or be evicted from your rental housing because you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

Also, if you or an affiliated individual of yours is or has been the victim of domestic violence, dating violence, sexual assault, or stalking by a member of your household or any guest, you may not be denied rental assistance or occupancy rights solely on the basis of criminal activity directly relating to that domestic violence, dating violence, sexual assault, or stalking.

Affiliated individual means your spouse, parent, brother, sister, or child, or a person to whom you stand in the place of a parent or guardian (for example, the affiliated individual is in your care, custody, or control); or any individual, tenant, or lawful occupant living in your household.

Removing the Abuser or Perpetrator from the Household

Chatham Gardens (acronym HP for purposes of this document) may divide (bifurcate) your lease in order to evict the individual or terminate the assistance of the individual who has engaged in criminal activity (the abuser or perpetrator) directly relating to domestic violence, dating violence, sexual assault, or stalking.

If HP chooses to remove the abuser or perpetrator, HP may not take away the rights of eligible tenants to the unit or otherwise punish the remaining tenants. If the evicted abuser or perpetrator was the sole tenant to have established eligibility for assistance under the program, HP must allow the tenant who is or has been a victim and other household members to remain in the unit for a period of time, in order to establish eligibility under the program or under another HUD housing program covered by VAWA, or, find alternative housing.

In removing the abuser or perpetrator from the household, HP must follow Federal, State, and local eviction procedures. In order to divide a lease, HP may, but is not required to, ask you for documentation or certification of the incidences of domestic violence, dating violence, sexual assault, or stalking.

Moving to Another Unit

Upon your request, HP may permit you to move to another unit, subject to the availability of other units, and still keep your assistance. In order to approve a request, HP may ask you to provide documentation that you are requesting to move because of an incidence of domestic violence, dating violence, sexual assault, or stalking. If the request is a request for emergency transfer, the housing provider may ask you to submit a written request or fill out a form where you certify that you meet the criteria for an emergency transfer under VAWA. The criteria are:

(1) You are a victim of domestic violence, dating violence, sexual assault, or stalking. If your housing provider does not already have documentation that you are a victim of domestic violence, dating violence, sexual assault, or stalking, your housing provider may ask you for such documentation, as described in the documentation section below.

(2) You expressly request the emergency transfer. Your housing provider may choose to require that you submit a form or may accept another written or oral request.

(3) You reasonably believe you are threatened with imminent harm from further violence if you remain in your current unit. This means you have a reason to fear that if you do not receive a transfer you would suffer violence in the very near future.

OR

¹Despite the name of this law, VAWA protection is available regardless of sex, gender identity, or sexual orientation.

²Housing providers cannot discriminate on the basis of any protected characteristic, including race, color, national origin, religion, sex, familial status, disability, or age. HUD-assisted and HUD-insured housing must be made available to all otherwise eligible individuals regardless of actual or perceived sexual orientation, gender identity, or marital status.

You are a victim of sexual assault and the assault occurred on the premises during the 90-calendar-day period before you request a transfer. If you are a victim of sexual assault, then in addition to qualifying for an emergency transfer because you reasonably believe you are threatened with imminent harm from further violence if you remain in your unit, you may qualify for an emergency transfer if the sexual assault occurred on the premises of the property from which you are seeking your transfer, and that assault happened within the 90-calendar-day period before you expressly request the transfer.

HP will keep confidential requests for emergency transfers by victims of domestic violence, dating violence, sexual assault, or stalking, and the location of any move by such victims and their families.

HP's emergency transfer plan provides further information on emergency transfers, and HP must make a copy of its emergency transfer plan available to you if you ask to see it.

Documenting You Are or Have Been a Victim of Domestic Violence, Dating Violence, Sexual Assault or Stalking

HP can, but is not required to, ask you to provide documentation to "certify" that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking. Such request from HP must be in writing, and HP must give you at least 14 business days (Saturdays, Sundays, and Federal holidays do not count) from the day you receive the request to provide the documentation. HP may, but does not have to, extend the deadline for the submission of documentation upon your request. You can provide one of the following to HP as documentation. It is your choice which of the following to submit if HP asks you to provide documentation that you are or have been a victim of domestic violence, dating violence, sexual assault, or stalking.

- A complete HUD-approved certification form given to you by HP with this notice, that documents an incident of domestic violence, dating violence, sexual assault, or stalking. The form will ask for your name, the date, time, and location of the incident of domestic violence, dating violence, sexual assault, or stalking, and a description of the incident. The certification form provides for including the name of the abuser or perpetrator if the name of the abuser or perpetrator is known and is safe to provide.
- A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident of domestic violence, dating violence, sexual assault, or stalking. Examples of such records include police reports, protective orders, and restraining orders, among others.
- A statement, which you must sign, along with the signature of an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, "professional") from whom you sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse, and with the professional selected by you attesting under penalty of perjury that he or she believes that the incident or incidents of domestic violence, dating violence, sexual assault, or stalking are grounds for protection.
- Any other statement or evidence that HP has agreed to accept.

If you fail or refuse to provide one of these documents within the 14 business days, HP does not have to provide you with the protections contained in this notice.

If HP receives conflicting evidence that an incident of domestic violence, dating violence, sexual assault, or stalking has been committed (such as certification forms from two or more members of a household each claiming to be a victim and naming one or more of the other petitioning household members as the abuser or perpetrator), HP has the right to request that you provide third-party documentation within thirty (30) calendar days in order to resolve the conflict. If you fail or refuse to provide third-party documentation where there is conflicting evidence, HP does not have to provide you with the protections contained in this notice.

Confidentiality

HP must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA.

HP must not allow any individual administering assistance or other services on behalf of HP (for example, employees and contractors) to have access to confidential information unless for reasons that specifically call for these individuals to have access to this information under applicable Federal, State, or local law.

HP must not enter your information into any shared database or disclose your information to any other entity or individual. HP, however, may disclose the information provided if:

- You give written permission to HP to release the information on a time limited basis.
- HP needs to use the information in an eviction or termination proceeding, such as to evict your abuser or perpetrator or terminate your abuser or perpetrator from assistance under this program.
- A law requires HP or your landlord to release the information.

VAWA does not limit HP's duty to honor court orders about access to or control of the property. This includes orders issued to protect a victim and orders dividing property among household members in cases where a family breaks up

Reasons a Tenant Eligible for Occupancy Rights under VAWA May Be Evicted or Assistance May Be Terminated

You can be evicted and your assistance can be terminated for serious or repeated lease violations that are not related to domestic violence, dating violence, sexual assault, or stalking committed against you. However, HP cannot hold tenants who have been victims of domestic violence, dating violence, sexual assault, or stalking to a more demanding set of rules than it applies to tenants who have not been victims of domestic violence, dating violence, sexual assault, or stalking.

The protections described in this notice might not apply, and you could be evicted and your assistance terminated, if HP can demonstrate that not evicting you or terminating your assistance would present a real physical danger that:

- 1) Would occur within an immediate time frame, and
- 2) Could result in death or serious bodily harm to other tenants or those who work on the property.

If HP can demonstrate the above, HP should only terminate your assistance or evict you if there are no other actions that could be taken to reduce or eliminate the threat.

Other Laws

VAWA does not replace any Federal, State, or local law that provides greater protection for victims of domestic violence, dating violence, sexual assault, or stalking. You may be entitled to additional housing protections for victims of domestic violence, dating violence, sexual assault, or stalking under other Federal laws, as well as under State and local laws.

For Additional Information

If you feel that they have been incorrectly denied your rights under VAWA, you should contact NYS Homes and Community Renewal (HCR) at FEHO@hcr.ny.gov.

For help regarding an abusive relationship, you may call the National Domestic Violence Hotline at 1-800-799-7233 or, for persons with hearing impairments, 1-800-787-3224 (TTY).

For tenants who are or have been victims of stalking seeking help may visit the National Center for Victims of Crime's Stalking Resource Center at <https://www.victimsofcrime.org/our-programs/stalking-resource-center>.

HCR has also created the HCR VAWA Local Services Provider List of local organizations, including housing and legal service providers, that support individuals who are or have been victims of domestic violence, available at: <https://hcr.ny.gov/system/files/documents/2018/11/hcrvawaresourcelist.pdf>

You may view a copy of HUD's final VAWA rule at: <https://www.federalregister.gov/documents/2016/12/06/2016-29213/violence-against-women-reauthorization-act-of-2013-implementation-in-hud-housing-programs-correction>.

Additionally, HP must make a copy of HUD's VAWA regulations available to you if you ask to see them.

Attachment: Certification form HUD-5382

**CERTIFICATION OF
DOMESTIC VIOLENCE,
DATING VIOLENCE,
SEXUAL ASSAULT, OR STALKING,
AND ALTERNATE DOCUMENTATION**

**U.S. Department of Housing
and Urban Development**

OMB Approval No. 2577-0286
Exp. 06/30/2017

Purpose of Form: The Violence Against Women Act (“VAWA”) protects applicants, tenants, and program participants in certain HUD programs from being evicted, denied housing assistance, or terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation.

Use of This Optional Form: If you are seeking VAWA protections from your housing provider, your housing provider may give you a written request that asks you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking.

In response to this request, you or someone on your behalf may complete this optional form and submit it to your housing provider, or you may submit one of the following types of third-party documentation:

- (1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an attorney, or medical professional, or a mental health professional (collectively, “professional”) from whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or “stalking” in HUD’s regulations at 24 CFR 5.2003.
- (2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or administrative agency; or
- (3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or tenant.

Submission of Documentation: The time period to submit documentation is 14 business days from the date that you receive a written request from your housing provider asking that you provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing provider may, but is not required to, extend the time period to submit the documentation, if you request an extension of the time period. If the requested information is not received within 14 business days of when you received the request for the documentation, or any extension of the date provided by your housing provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or issuance of this form does not serve as a written request for certification.

Confidentiality: All information provided to your housing provider concerning the incident(s) of domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details shall not be entered into any shared database. Employees of your housing provider are not to have access to these details unless to grant or deny VAWA protections to you, and such employees may not disclose this information to any other entity or individual, except to the extent that disclosure is: (i) consented to by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing regarding termination of assistance; or (iii) otherwise required by applicable law.

**TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE,
DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

1. Date the written request is received by victim: _____

2. Name of victim: _____

3. Your name (if different from victim's): _____

4. Name(s) of other family member(s) listed on the lease: _____

5. Residence of victim: _____

6. Name of the accused perpetrator (if known and can be safely disclosed): _____

7. Relationship of the accused perpetrator to the victim: _____

8. Date(s) and times(s) of incident(s) (if known): _____

10. Location of incident(s): _____

In your own words, briefly describe the incident(s):

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature _____ Signed on (Date) _____

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.