

Affordable Housing Application

Station House

Washington DC

Thank you so much for your interest in our beautiful community! Station House features brand new apartments with caesarstone countertops, stainless steel appliances, hickory floors, full sized washer/dryer, and an amazing amenity package! We are excited to have available 28 apartments in our Affordable Dwelling Units program in the heart of Washington, DC. Below is a list of the set parameters for qualification.

Number of People	Qualifying Apartment Size	Monthly Rent	Minimum Household Income	Maximum Household Income
1	Studio	\$1,402	\$44,275	\$60,816
1 or 2	One Bedroom	\$1,485	\$46,895	\$60,816 or \$69,504
2, 3 or 4	Two Bedroom	\$1,756	\$55,453	\$69,504, \$78,192 or \$86,880

This is not subsidized housing. Rents do not change based on applicant's income and tenants will be responsible for paying the full rent themselves.

Please read the **Affordable Information Packet** for more details before completing this application.

DIRECTIONS:

This application consists of three sections:

1. The Program Application
2. Required Documentation
3. Additional Forms (*if applicable*)

The first two sections must be filled out entirely in order for your application to be processed. If a question does not apply to you, write "N/A" or cross it out. **LEAVE NOTHING BLANK.**

You must include all requested income documentation with this application. Additional documentation may be requested at a later date. You must include all *applicable* forms from Section 3.

Send all applications to:
Station House Affordable Housing Lottery
701 2nd Street NE
Washington, DC 20002

Your application will be subject to a credit, background, and landlord-tenancy check. Below is a list of building fees associated with a lease agreement at Station House:

Non-Optional Fees:

Application (nonrefundable): \$125/person above 18
Security Deposit: \$500 - credit dependent: may require 1 month
Amenity: \$600/12 mo. lease

Optional Fees:

Parking: \$200 - first space/mo. - covered & assigned
Pet (nonrefundable): \$500/pet (2 max) breed restrictive
Pet Rent: \$50/pet/mo.

Section 1

The Program Application

For further information, please visit our website at www.StationHouseDC.com/Affordable or call our Leasing Office at 202.544.9400.



INSERT APPLICATION HERE

Household Size: Please see Information Packet for household members.

My household size is: _____

Unit Size Preference: Households of Appropriate Size will be given priority. Please see information Packet. *(Circle only one)*

My unit size preference is: Studio 1 Bedroom 2 bedroom

Disability Information: Do you or a member of your household need an accessible unit?

(Circle One) Yes No

If Yes, verification of the need of an accessible unit may need to be provided in accordance with the Fair Housing Act.

Real Estate Information: Do you or a member of your household own a home or lease any other residential property?

(Circle One) Yes No

If Yes, you are not eligible to rent an affordable unit until the home or leased property is no longer in your or your household member's name. If you are going through a divorce, your divorce decree or separation papers must state that you are no longer on the deed or mortgage of the home or residential lease.

Instructions for completing the following Income Table

- List ALL CURRENT sources of income as requested below for ALL household members over the age of 18.
- Please note that the Income Table is 2 pages and income from Social Security, Pension, interest etc. is all on the second page of the table.
- If you have left a job since January 1, 2015 and are no longer receiving income, do NOT list it in the table. You will also need to submit the Verification of Terminated Employment Form (See Section 3).
- “Interest and/or Dividend Income” refers to any amount that you receive from an asset including amounts that you may be drawing down from a retirement account or 401K.
- For any section that doesn’t apply, cross out or write N/A.

INCOME TABLE – Pg. 1

(For each household member, list only current income sources and those appearing on most recent tax return. See Income Documentation Section of this Application for guidance.)

Household Member Name	Source of Income	Current GROSS Monthly Income
	Employer <i>(Name)</i>	
	Employer <i>(Name)</i>	
	Employer <i>(Name)</i>	
	Employer <i>(Name)</i>	
	Employer <i>(Name)</i>	
	Employer <i>(Name)</i>	
	Employer <i>(Name)</i>	
	Self-employed <i>(Source Income)</i>	
	Self-employed <i>(Source Income)</i>	
	Self-employed <i>(Source Income)</i>	
	Child Support/Alimony	
	Child Support/Alimony	
	Periodic payments from family/friend <i>(i.e. rent assistance)</i>	
	Other Income <i>(List in Other Income Table)</i>	

INCOME TABLE – Pg. 2

Household Member Name	Source of Income	Current GROSS Monthly Income
	Social Security	
	Social Security	
	Social Security	
	Social Security	
	SSDI	
	SSDI	
	Unemployment Compensation	
	Workman’s Compensation	
	Severance Pay	
	Pension <i>(List source)</i>	
	Pension <i>(List source)</i>	
	Retirement Funds	
	Title IV/TANF	
	Full-Time Student Income <i>(18 & Over Only)</i>	
	Full-Time Student Income <i>(18 & Over Only)</i>	
	Interest/Dividend Income <i>(List Asset in Other Income Table)</i>	
	Interest/Dividend Income <i>(List Asset in Other Income Table)</i>	
	Interest/Dividend Income <i>(List Asset in Other Income Table)</i>	
	Total Gross Monthly Household Income (MHI)	
MHI X 12	Anticipated Gross Yearly Household Income (YHI)	

OTHER ASSETS TABLE

If a section doesn't apply, cross it out or write N/A. In the next section you will be directed to submit detailed bank/balance statements for EVERY ASSET listed below:

	Bank Name	Last 4 Digits of Acct Number	Amount	6-month Average
Checking Accounts			Bal. \$	
			Bal. \$	
			Bal. \$	
			Bal. \$	
Savings Accounts			Bal. \$	
			Bal. \$	
			Bal. \$	
			Bal. \$	
Trust Account			Bal. \$	
Certificates (or CDs)			Bal. \$	
			Bal. \$	
			Bal. \$	
			Bal. \$	
Savings Bonds	Maturity Date:		Value \$	
	Maturity Date:		Value \$	
401k, IRA, Retirement Accounts (Net Cash Value)	Company Name:		Value \$	
	Company Name:		Value \$	
	Company Name:		Value \$	
	Company Name:		Value \$	
Mutual Funds	Name:	# of Shares:	Interest/Dividends	Value
			\$	\$
			\$	\$
			\$	\$
Stocks			\$	\$
			\$	\$
			\$	\$
Bonds			\$	\$
			\$	\$

Section 2

Required Documentation

Please note: the following questions are applicable to every single person who will be occupying the unit. Therefore, the use of “I” or “my” in the following questions includes all household members.

You MUST initial every question in Section 2 and, where provided, check “N/A” or “Yes”.

Every time you answer “Yes”, you must submit all documentation as directed in that question.

INCOME DOCUMENTATION

1. Earnings/Wages (CURRENT EMPLOYMENT): I have attached copies of my most recent pay stub or income statement for every source of income for every household member 18 years or older as listed on the Income Tables in Section 1. All attached pay-stubs or statements have the name of the employer, date, wages, and name of the household member and cover the most recent pay period (*which will be a 2 week period if paid every week, or a 4 week period if paid every 2 weeks, or a 2 month period if paid every month*).

- N/A
- Yes

Initial(s): _____

Initial(s): _____

2. Earnings (FORMER EMPLOYMENT): For EACH AND EVERY source of income reported on the most recent tax return where a household member is no longer receiving income (e.g., no longer working for a particular employer), I have attached one of the following:

- a) A letter signed by that household member **and** a letter signed and dated from the former employer verifying the last day of income and the Year-To-Date income at time of separation OR
- b) Only for jobs where my last day of employment was in the previous calendar year, I have attached the last paystub from the job that shows a Year-To-Date income that matches the Wages on the W-2 for that job OR
- c) The initial determination of unemployment benefit statement that lists former employers, length of employment, gross income by quarter, and EIN Number OR
- d) I have completed only the top portion of the Verification of Terminated Employment form attached in Section 3 of this application and understand that this form will be submitted to the contact provided by me on the form in hopes of having it returned in the next 1-2 weeks but in the event that the former employer does not return the form, I will submit the materials listed in part a, b, c of this section.

I understand proof of termination is required for every single job on my previous year's tax returns (no matter how small) and that this is to verify my current income and that being terminated from one or multiple jobs will in no way affect my affordable housing program eligibility.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

3. Earnings (Social Security, SSDI, Pension, Retirement, Public Assistance, TANF): I have attached copies of the most recent statements for every source of income listed on the line above for every household member 18 years or older. I understand that for Social Security and/or SSDI payments I need to submit the yearly benefit letter I receive from the Social Security Administration Office detailing my payments for the next 12 months.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

4. **Earnings (SELF EMPLOYED ONLY):** For every self-employed household member 18 years or older, I have attached copies of **ALL** of the following:
- a) The most recent **year's federal income tax returns** (including any attachments and amendments) AND
 - b) A **year-to-date profit and loss statement** AND
 - c) A **projected profit and loss statement** for the next 12 months AND
 - d) All supporting documentation including current financial statements, accountant statements, quarterly tax returns (if I file quarterly), and income and expense receipts AND
 - e) **A statement signed, dated and notarized by the self-employed household member summarizing the enclosed material**

- N/A
- Yes

Initial(s): _____

Initial(s): _____

5. **Earnings (UNEMPLOYMENT)** I have attached copies of the **two (2)** most recent consecutive unemployment statements for every household member 18 years or older who is currently receiving unemployment and understand that it must be assumed that the household member will continue to receive unemployment over the next 12 months. **For every household member who reported unemployment on their most recent tax return but who no longer receives it,** I have attached a copy of my current unemployment benefit statement or balance that was obtained online or at my unemployment office. The statement shows the last two unemployment payments received, my current benefit rate, and my current total benefit balance. I understand that if this documentation indicates that I have current benefits and have received recent payments, my unemployment will be calculated as part of my income, regardless of my current employment status.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

6. **Earnings (WORKMAN'S COMP, SEVERANCE PAY):** I have attached copies of the **three (3)** most recent consecutive pay stubs or three most recent statements for payments I am receiving through Workman's Compensation or Severance settlement and if my current compensation or pay is not going to continue for the next 12 months, I have attached the legal document stating the monthly, yearly or total amount to which I am entitled in addition to the timeline and/or termination of such pay.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

7. **Household member with NO EARNINGS:** If a member of my household is 18 years or older and is not employed and not receiving any income, I have attached the **Certificate of Zero Income** form from him/her attesting to this fact AND this letter has been signed and dated by that household member.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

8. Divorce and/or Separation: I understand that legally married couples shall both be considered part of the household, even if separated, and that children shall be considered part of the household if they spend more than 50% of the year (183 days, including partial days) in the residence and so I have attached a copy of my divorce decree AND the divorce agreement to verify my household size claims. I understand that if no legal action has been taken for filing for divorce or separation, my partner's income must be included in my application.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

9. Child Support and/or Alimony: If I am entitled to receive Child Support and/or alimony (even if I am not receiving it), I have attached **one** of the following:

- a) A copy of my divorce decree or settlement agreement OR
- b) A statement from the Department of Revenue (DOR) that shows my payments for the past 3 months OR
- c) In the event that I am not receiving the child support or alimony that I am entitled to receive, I have attached a copy of my divorce decree AND proof of a legal claim filed against the person that owes me money and, if applicable, DOR statements and/or legal claims showing payments made and/or owed.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

10. Periodic Payments: If I am receiving any periodic payments, or listed anything under "Other Income", I have attached a signed and dated letter from the source of income that includes **ALL** of the following:

- a) The Year-To-Date income received AND
- b) The anticipated monthly income for the next 12 months AND
- c) The letter has me listed as the recipient of the payments AND
- d) The letter is notarized.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

11. Households with Students: I have attached proof for every household member **18** years or older who is a full-time student of his/her full-time student status in the form of: Letter from the Registrar, Transcript or other enrollment verification.

- N/A
- Yes

Initial(s): _____

Initial(s): _____

12. Other Income: I have included interest, dividends, and distributions from the following: Checking or savings accounts, CDs, money market accounts, Treasury bills, stocks, bonds, securities, trust funds, gifts, pensions, IRAs, Keoghs, and other retirement accounts. All accounts must include complete statements with all pages and list dividend and interest information if applicable ***regardless of how little money may currently be in the account.***

N/A

Yes

Initial(s): _____

Initial(s): _____

TAX DOCUMENTATION

1. I have attached all **W-2s, 1099s and all other tax documentation for all sources of income for the previous year's income tax returns.** I understand that W-2s are the tax documents that are given by employers to show wages, salaries and tips and 1099s are the tax documents that are given for other sources of income (ex: interest on savings accounts, income from retirement accounts, income from unemployment etc). These are the tax documents used so that 1040 taxes can properly be filed as detailed in the next question below. *(You will have a W-2 for every job worked in the most recent year you filed taxes. Please be sure that the wages in the W-2s you submit add up to the wages you filed on our 1040 tax form. If you are not currently working at any of the jobs for which you have received a W-2, please see Question 4: "Earnings (Former Employment)" on the first page of Section 2 for directions.)*

- N/A
- Yes

Initial(s): _____

Initial(s): _____

2. **1040 Tax Returns:** I have attached a computerized print out of the **most recent year's federal income tax returns including any and all schedules, attachments and amendments** for every household member 18 years or older. **Every page of the tax return must be sent** (including, if applicable, Schedules A, B, C etc.). I understand I can obtain these transcripts for free by calling the IRS at 1.800.829.1040 and they will mail or fax them to me. I can also obtain these transcripts from the professional who I hired to file my taxes last year. **For every household member who has not filed in the past 3 years,** I have attached a statement from the IRS showing "No Filing" for that household member (and can call 1.800.829.1040 and the IRS will mail it or fax it to me in 7-10 days).

- N/A
- Yes

Initial(s): _____

Initial(s): _____

CERTIFICATION STATEMENT

Please read each item carefully before you sign.

1. I hereby certify that the information provided in this preliminary application is correct to the best of my knowledge.
2. I understand that this is a preliminary application and the information provided **does not** guarantee housing. Additional information and verifications will be necessary to complete the income certification process and lease application.
3. I understand that any material change in the income or assets of my household that occurs after the submission of this application may make me ineligible for the affordable housing.
4. Co-signers and Guarantors **are not** permitted unless they are co-tenants who will reside in the unit.
5. I acknowledge that if my email address is provided in this application, correspondence with me will be through email instead of postal mail unless I make a written request otherwise.
6. The undersigned give consent to the District of Columbia, the Owner and the Certifying Authority or their assigns to verify the information provided in this application.

Applicant's Signature

Date

Applicant's Signature

Date

Section 3

Additional Forms *(if applicable)*

**These are the forms that you only need to complete if
directed to do so in Section 2**

Verification of Terminated Employment

To Be Completed By Applicant:

Applicant/Tenant: _____

Soc. Security #: _____

Contact Info of previous employer:

Name of Contact					
Company Name					
Street Address					
City, State, Zip					
Tel. #		Fax #		email	

To Be Completed By Previous Employer:

Date of Termination: _____ Last Day Actually Worked: _____

Total Gross Income paid to employee over the last calendar year employed: _____

Reason for Termination: Employee Quit Other

Do you anticipate rehiring this employee? Yes No If yes, when: _____

Will the employee receive additional paychecks for Workman's Compensation? Yes No

If yes, provide the name and address of the company through which this can be verified:

Total severance pay anticipated for the next 12 months: _____

Is employee entitled to receive unemployment compensation? Yes No

AUTHORIZED SIGNATURE

Print Name: _____

Title: _____

Signature: _____

Date: _____

Contact Number: _____

Please mail Form to:

Station House
701 2nd Street NE
Washington, DC 20002

-- OFFICE USE ONLY --

Date Sent: _____

Date Received: _____

Comments:

Certification of Zero Income

(To be completed by **adult** household members only, if appropriate)

Household Name: _____ **Development Name:** Station Townhouses, LLC DBA: Station House

I hereby certify that I have not received income from any of the following sources during the previous 12 months.

1. Wages from employment (including commissions, tips, bonuses, fees, etc.);
2. Income from operation of business;
3. Rental income from real or personal property;
4. Interest or dividends from assets;
5. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
6. Unemployment or disability payments;
7. Public assistance payments;
8. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
9. Sales from self-employed resources (Avon, Mary Kay, Cutco, etc.);
10. Any other source not named above.

Under penalty of perjury, I certify that the information presented in this certificate is true and accurate to the best of my knowledge. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Tenant

Printed Name of Tenant

Date