WATERWHEEL WORKFORCE HOUSING 867 Saw Mill River Road, Village of Ardsley, Westchester County, NY

EXPRESSION OF INTEREST

Mail or Hand Deliver Completed Application to: Housing Action Council at 55 South Broadway, Tarrytown, NY 10591 914-332-4144

[□ 3- Bedroom (\$362,300)	
The 5 Workforce Housing Units are available one or more of the following boxes:	on a priority basis in the order below.	Check

Check whether you are interested in

2- Bedroom (\$349.900)

I am a volunteer firefighter or an emergency service volunteer for the Village of Ardsley. I have been enrolled as
an active volunteer for at least 5 years.
I am a volunteer firefighter or an emergency service volunteer for the Village of Ardsley. I have been enrolled as
an active volunteer for less than 5 years.
I am an employee of the Village of Ardsley.
I am a resident of the Village of Ardsley <u>and</u> an employee of the Ardsley School District.
I am a resident of the Village of Ardsley and a veteran of the armed services.
I am a resident of the Village of Ardsley.
I am employed in the Village of Ardsley.
I am a senior citizen (65 years of age or older) residing outside the Village of Ardsley.
I am an immediate relative of a resident of the Village of Ardsley.
I am a resident of Westchester County not living in the Village of Ardsley
Other

Maximum Household Income Limits Apply: Applicants for the Workforce Housing Units must have household incomes at or less than the following (subject to change):

1 person: \$ 88,800	2 persons: \$101,500	3 persons: \$114,200
4 persons: \$126,840	5 persons: \$137,000	6 persons: \$147,150

Household Size Priorities Apply: All households regardless of household size are eligible for two bedroom units subject to NYS Housing Code Standards. Household size priorities apply to the 3 bedroom units.







Address:				Apt#:
	State:			•
Home Phone:	Cell Phone:	Work Ph	one:	
SSN:	DOB:	Gross I	ncome: _	
Email:				
. CO-APPLICANT INFO	DRMATION:		•••••	
Name:				
Address:				Apt#:
City:	State: _		_ Zip:	
Home Phone:	Cell Phone:	Work Ph	one:	
	Cell Phone: DOB:			
SSN:	DOB:	Gross II	ncome:	
SSN:	DOB:	Gross In	ncome:	
SSN: Email: S. LIST ALL PERSONS FULL NAME	DOB:DOB:	Gross In OU, PLEASE STAI DATE OF BIRTH	RT WITH	I YOURSELF:
SSN: Email: S. LIST ALL PERSONS FULL NAME	S WHO WILL LIVE WITH YO	Gross In	RT WITH	I YOURSELF: ATTENDING SCHOOL
SSN: Email: S. LIST ALL PERSONS FULL NAME Social Security #:	DOB:DOB:	Gross In	RT WITH	I YOURSELF: ATTENDING SCHOOL
SSN: Email: S. LIST ALL PERSONS FULL NAME Social Security #:	DOB:DOB:	Gross In	RT WITH	ATTENDING SCHOOL
SSN: Email: S. LIST ALL PERSONS FULL NAME Social Security #: Social Security #:	S WHO WILL LIVE WITH YO RELATIONSHIP H.O.H	Gross In	RT WITH	ATTENDING SCHOOL
SSN:Email:	S WHO WILL LIVE WITH YOUR RELATIONSHIP	Gross In	RT WITH	ATTENDING SCHOOL
SSN: Email: S. LIST ALL PERSONS FULL NAME Social Security #: Social Security #: Social Security #:	S WHO WILL LIVE WITH YO RELATIONSHIP H.O.H	Gross In	RT WITH	ATTENDING SCHOOL







e		
Sc	ocial Security #:	Occupation:
f		
Sc	ocial Security #:	Occupation:
g. Do	you expect any change (s) in your family size?	YESNO
lf	YES, EXPLAIN:	
4	CTATICTICAL INFORMATION	
4.	STATISTICAL INFORMATION	Park and a second a
a.	The following information is required for statis	
	group for the head of household only).	tistical purposes only. (Please <u>check only one from this</u>
	Single Race White Black or African American	Multi-Race American Indian or Alaska Native & White Asian & White
	Black of Affican Affierican Asian	Asian & Write Black or African American & White
	American Indian or Alaska Native Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native & Black or African American Other Multi Racial
b.	ETHNICITY: (check only one from this group)	Hispanic Non-Hispanic
5.	ACCESSIBILITY/ADAPTABILITY Do you need a handicapped accessible/adapta	ble unit? YES NO







6.	RENT:			
	What is your C	urrent Mont	hly Rent \$	
	Check Utilities ☐ Heat		now: per month	
	☐ Electricity	\$	per month	
	☐ Gas	\$	per month	
	☐ Water	\$	per month	
	☐ Other	\$	per month	
7.	INCOME:			
	Include overtir	ne pay, com	missions, fees, tips, bonuses and/or EMPLOYER'S	GROSS EARNINGS (Pre-Tax)
	MEMBER		NAME/ADDRESS	CURRENT ANTICIPATED
				\$\$ Weekly/ biweekly/ monthly (circle one)
				\$\$ Meekly/ biweekly/ monthly (circle one)
				\$\$ Weekly/ biweekly/ monthly (circle one)
			~	







HOUSEHOLD MEMBER	SOURCE		AMOUNT
			\$
		Weekly/	biweekly/ monthly (circle one)
		\$	\$
		·	biweekly/ monthly (circle one)
			\$
			biweekly/ monthly (circle one)
HOUGEHOLD ACCETS			
HOUSEHOLD ASSETS:			
Checking Accounts:			
Bank:	Acct. No.:		Amt.:
Bank:	Acct. No.:		Amt.:
	Passbook/Statement and Christmas		
Bank:	Acct. No.:		Amt.:
Bank:	Acct. No.:		Amt.:
Bank:	Acct. No.:		Amt.:
Certificates of Deposit (CD's	<u>)</u> :		
	Acct. No.:		
Bank:	Acct. No.:	 	Amt.:
Bank:	Acct. No.:		Amt.:
Credit Union Shares:			
Credit Union Name:		.mt.:	
Stocks/Bonds (value): \$	Savings I	Bonds (value): _	
Other Amt.: (includes IRA's, mul	tual funds, etc.) \$		
	nt NOW own real estate:		NO

OTHER SOURCES OF INCOME:

8.

	If "yes", what is	the value:				
	Has the applican	t or co-applicant <u>EVI</u>	ER owned real estate	YESYES	N	IO
	If "yes", when? _					
					••••••	
0.	All household		bmit <u>COPIES</u> of the	following docun	nents with	their application:
	:	2015 & 2014 & 2013	W2's and Federal	ax Returns with	all Schedules	S
			ecent Pay Stubs & doo pension, child support	umentation on any	y other sourc	ce of income,
		3 Months of all Bank	, Credit Union, and In	vestment Statemer	nts (all page	es)
		Most Recent Retirem	ent Fund Account Sta	tements (e.g. 403k	o, 401k)	
		\$25 Credit Report Fe	e (Non-refundable –	Made payable to He	ousing Action	n Council)
		Signature ant Signature		DateDate		
		· ·	SUMER CREDIT I	NFORMATION		
vestigny per laractereby will will	gative agencies en erson pertaining teristics and mod y, and to disclose make funding ava d that I have the	nployed by such, to ito my employmente of living, to obtain and furnish such informallable in connection right, under 606B of	investigate references history, credit, pricinal a consumer reporormation to Housing A with this property list	or statements or tenancies, char and such other action Council, to the ted above in supporting Act, to make	other data of acter, gene credit informine owner, are out of this are written re	credit bureau or othe btained from me or fron ral reputation, persona nation which may resul nd to agencies that mad application. I have been equest, within reasonable
	Applicant Signatur	<u>——</u> е	Co-Applicant	Signature		Date
			~			^
			2		1	







11.	HOW DID YOU HEAR ABOUT THIS DEVELOPMENT?	
	Friend If friend, how did your friend hear about this?	
	Employer	
	Sign Posted on Site	
	Website/ Internet	(list site)
	Newspaper (Identity): On-line Version?	
	Church/ Synagogue (Identify):	
	Community Organization (Identify):	
	Other (Identify):	







Waterwheel Condominium 867 Saw Mill River Road, Ardsley 10502 Affordability Analysis – January, 2015

Workforce Housing Units (All figures are approximate and are subject to change)

	TWO BEDROOM		THREE DROOM
Sale Price	\$	349,900	\$ 362,300
5% Down Payment		(17,495)	(18,115)
Mortgage Amount	\$	332,405	\$ 344,185
Principal + Interest**	\$	1585	\$ 1645
Approximate Taxes	\$	625	\$ 670
Common Charges	\$	350	\$ 450
Walls In Insurance	\$	50	\$ 50
Total Housing Payment (PITI)	\$	2,610	\$ 2,815
Approx. income needed to carry payment	\$	94,910*	\$ 102,365*

^{*}If monthly debt (minimum monthly payments on credit cards, loans, leases, child support payments etc.) is higher than 5% of your gross monthly income a higher income may be necessary.

Maximum Income Limits as of June 2015

(Income limits are subject to change)

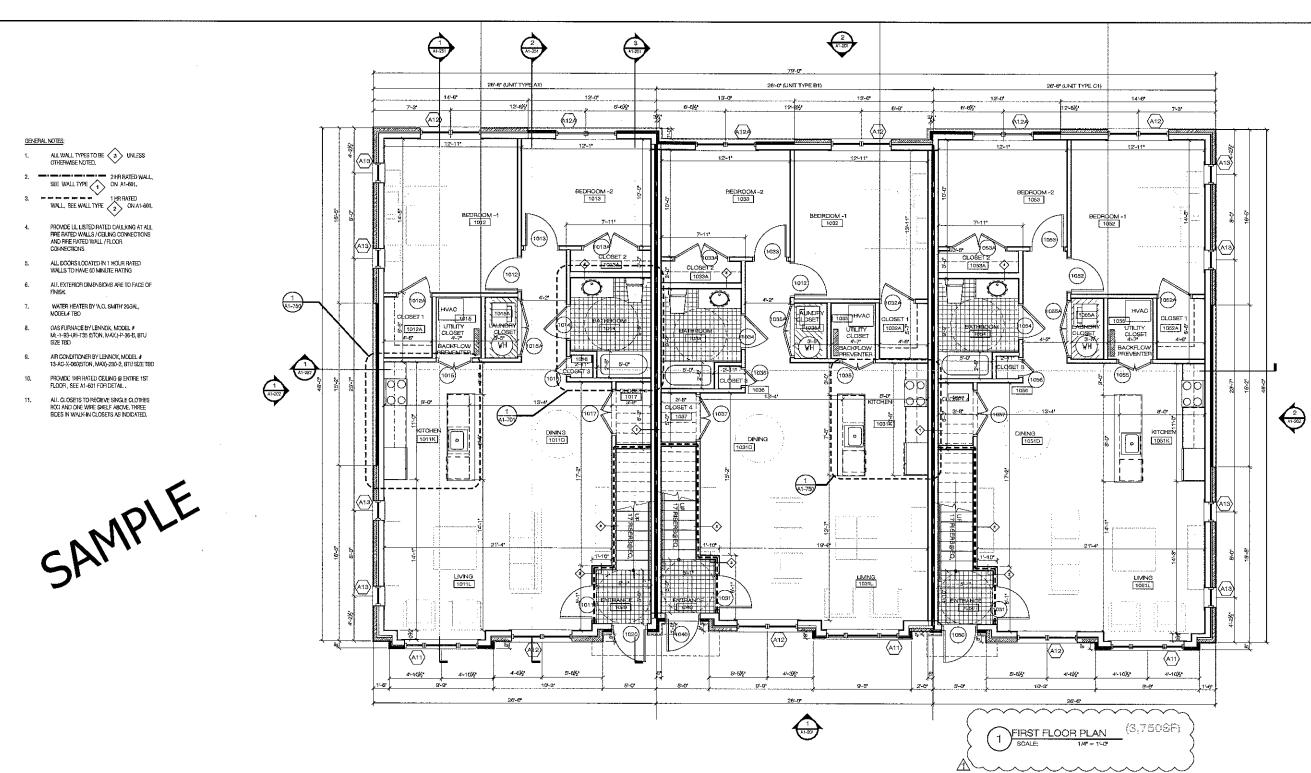
No. of Persons	Income Limit
1	\$ 88,800
2	\$ 101,500
3	\$ 114,200
4	\$ 126,840
5	\$ 137,000
6	\$ 147,150







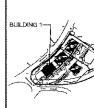
^{**}Assumes 30 year fixed rate mortgage at 4%



This advertisement is not an offering. It is a solicitation of interest in the advertised property. No offering of the advertised units can be made and no deposits can be accepted, or reservations, binding or non-binding, can be made until an offering plan is filed with the New York State Department of Law. This advertisement is made pursuant to Cooperative Policy Statement No.1 issued by the New York State Department of Law. Sponsor: Ardsley Waterwheel Partners LLC –Two Executive Drive, Suite 600, Fort Lee, NJ 07024





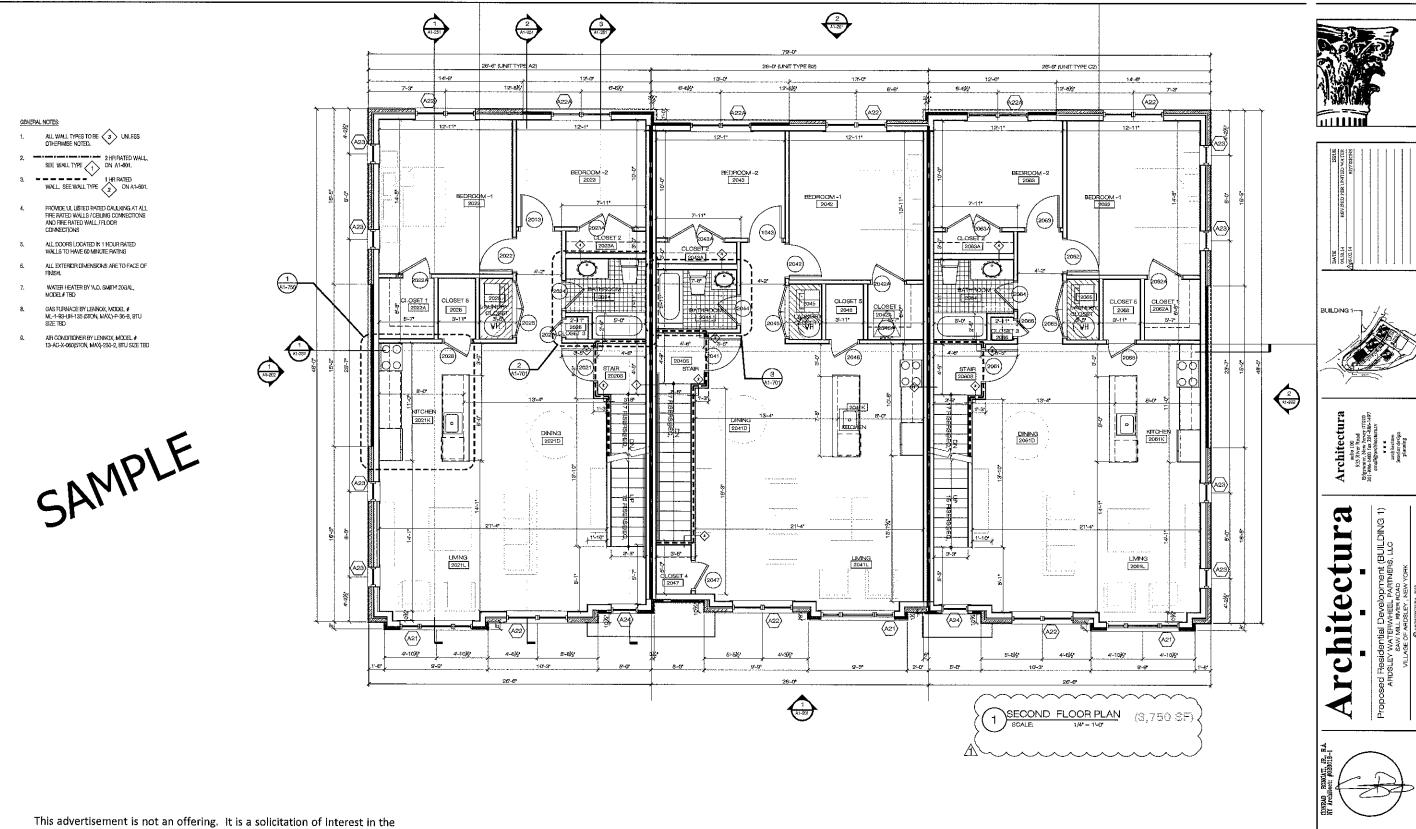


Architectura
suite 100
93.8 River Road
Edgewater, New Jonesy (17/20
2013-886-1400 faz 2013-886-1497

CONRAD RODGAL, 12, RA.
NY Architect, 4620019-1

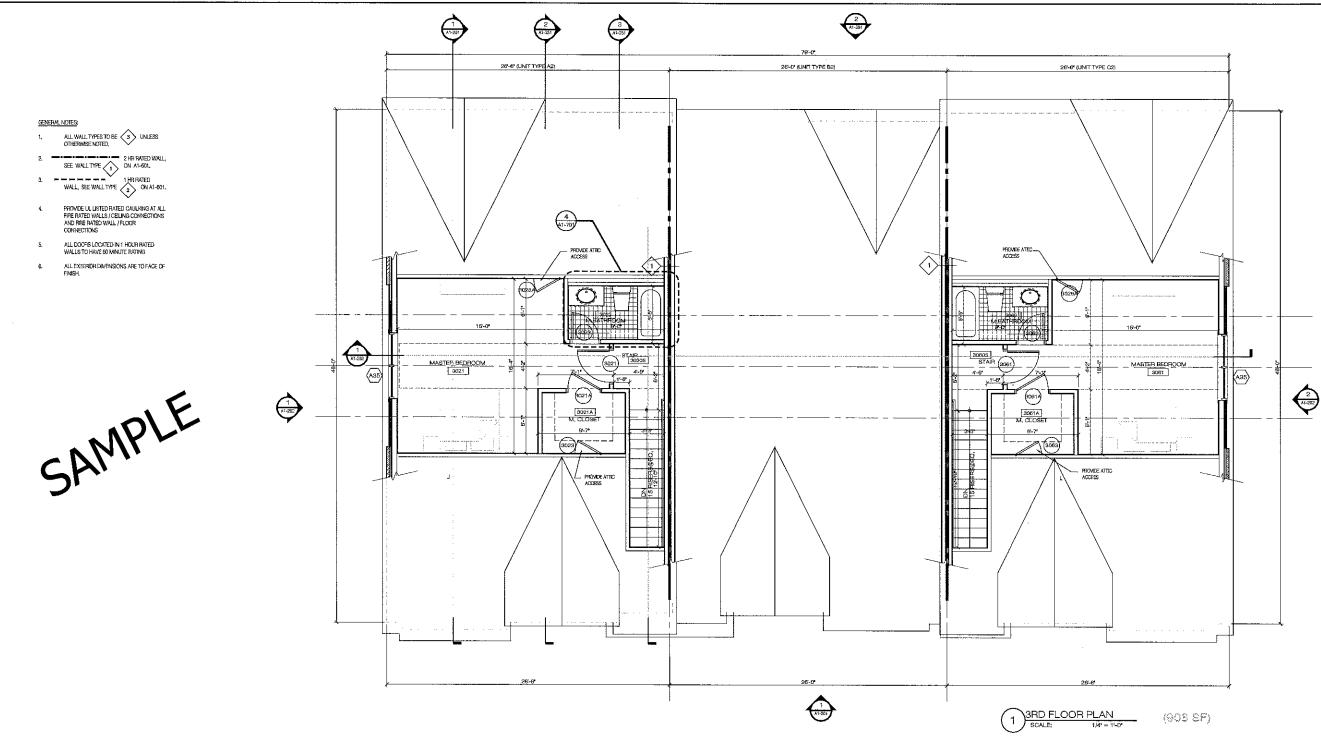
EIRST FLOOR PLAN NOTES

ı		
ľ	SCALE	DRAWNBY
١	AS SHOWN	EC/NK
Γ	DATE	SHEET NO
ı	03,15,12	
Γ	PROJECT NUMBER	IA1-101
ı	2012018	



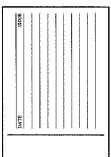
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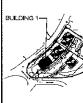
DRAWING TITLE
SECOND FLOOR PLAN
NOTES



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THIR	D FLOOR PLAN
NOT	

SCALE	DRAWNBY
AS SHOWN	EC/NK
DATE	SHEET NO
03,15,12	
PROJECT NUMBER	IA1-103
2012018	

